Inception report:
External Evaluation of the Access To COVID-19 Tools Accelerator (ACT-A)

July 29, 2022

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Acronyms

ACT-A	Access to COVID-19 Tools Accelerator
AMC	Advance Market Commitment
BMGF	Bill & Melinda Gates Foundations
CEPI	Coalition for Epidemic Preparedness Innovations
CSOs	Civil society organizations
COVAX	Vaccines pillar of ACT-A
CoVDP	COVID-19 Vaccine Delivery Partnership
Dx	Diagnostics
FC	Facilitation Council
FIF	Financial Intermediary Fund for Pandemic Prevention, Preparedness and Response
GAP	US COVID-19 Pandemic Prioritized Global Action Plan for Enhanced Engagement
Gavi	Gavi, the Vaccine Alliance
Global Fund	Global Fund to Fight AIDS, Tuberculosis and Malaria
HICs	High-income countries
HSRC	Health Systems and Response Connector
LICs	Low-income countries
LMICs	Lower-middle income countries
PPE	Personal protective equipment
SFP	Self-financing participant
TOR	Terms of Reference
Tx	Therapeutics
UMICs	Upper-middle income countries
Vx	Vaccines
Wellcome	The Wellcome Trust
WHO	World Health Organization

1. Introduction

This document serves as the inception report for the external evaluation of the Access to COVID-19 Tools Accelerator (ACT-A). This inception report defines the scope, methodology, data collection tools, and work plan for the evaluation. The evaluation team, led by Open Consultants, developed this inception report in coordination with the ACT-A Facilitation Council (FC) Reference Group overseeing the evaluation. The evaluation team will use this inception report to guide data collection, analysis, and preparation of the evaluation report.

This document is organized as follows: First we discuss the project scope, including the six focus areas of the evaluation. Then we describe the evaluation methodology which includes the evaluation framework, three main types of data collection and analysis (document and data analysis, key informant interviews, and online surveys). Next, we provide an outline of the evaluation report and a work plan for the evaluation.

2. Project scope

The ACT-A was launched in April 2020 to enable an effective and equitable global response to the COVID-19 pandemic. It was established at a time of urgency and uncertainty – less than three months after the World Health Organization (WHO) determined that the outbreak of the 2019 novel coronavirus (2019-nCoV) was a Public Health Emergency of International Concern (January 30, 2020).[1]

As a global partnership, ACT-A aims to **accelerate the development, production, and equitable access to COVID-19 tests, treatments, and vaccines**. ACT-A comprises the three pillars of Diagnostics, Therapeutics, and Vaccines (COVAX), as well as a fourth cross-cutting pillar – the Health Systems and Response Connector (HSRC).[2] In addition, the COVID-19 Vaccine Delivery Partnership (CoVDP) was established in January 2022 to support vaccine delivery in the 92 AMC countries.[3] Enhancing access to the full set of COVID-19 tools is essential to bring an end to this pandemic, which is far from over.

The **key objective of the evaluation** is to identify lessons learnt that will be of use in establishing a future global countermeasure platform for pandemic preparedness and response to enhance global health security. The evaluation is a rapid, forward-looking exercise (see also **Box 1**). The evaluation will systematically assess the 24 questions set out in the TOR and review the ACT-A partnership through a focus on six areas:

1. Mandate
2. Set-up and structure, including governance and accountability
3. Achievements
4. Resource mobilization and financing
5. Gaps and missed opportunities
6. Way forward.

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[1] https://www.who.int/news-room/detail/30-01-2020-statement-on-the-second-meeting-of-the-international-health-regulations-(2005)-emergency-committee-regarding-the-outbreak-of-novel-coronavirus-(2019-ncov)
[2] There is also a cross-cutting Access and Allocation workstream (https://www.act-a.org/about).
[3] https://www.gavi.org/news/media-room/92-low-middle-income-economies-eligible-access-covid-19-vaccines-gavi-covax-amc

Box 1: Underlying principles of the ACT-A external evaluation

- Forward-looking nature, with a focus on lessons learnt
- Not an impact evaluation of the global response to the COVID-19 pandemic (no impact modelling
- Not a detailed description of all ACT-A activities – instead, the aim is to answer 24 research questions from the Terms of Reference (ToR)
- Builds upon previous and ongoing reviews and evaluations

In evaluating ACT-A, we will consider the highly dynamic, uncertain, and political environment in which ACT-A was set up. This includes the virus itself, evolving evidence on the responses (e.g., public health and social measures, development and production of medical countermeasures), the fast changing political, economic, and financial environment, and other factors. For the lessons learnt and recommendations, we will consider alternative models for global pandemic preparedness and response and what these require as an enabling environment.

At the same time, the lessons learnt will recognize that multiple other processes are underway, such as the development of the Financial Intermediary Fund for Pandemic Prevention, Preparedness and Response (FIF)[4] and the ongoing global process to negotiate a convention, agreement or other international instrument under the Constitution of the WHO to strengthen pandemic prevention, preparedness and response.[5]

The lessons learnt from this evaluation will take into account and to some extent also link to these processes.

3. Evaluation methodology

In this section we describe the evaluation framework, our data collection and analysis methods, and our approach to identify recommendations and lessons learnt.

A. Evaluation framework

We developed an evaluation framework to systematically and comprehensively assess the 24 review questions set out in the TOR (Annex 1). This framework provides an overview of the TOR questions and the methods and data that will be used to assess these questions.

B. Data collection and analysis methods

We will apply a **mixed-method design** and use three **complementary data collection and analysis methods** for this evaluation:

(i) Document and data analysis
(ii) Semi-structured key informant interviews (and focus group discussions)
(iii) Online surveys.

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[4] https://www.worldbank.org/en/topic/pandemics/brief/factsheet-financial-intermediary-fund-for-pandemic-prevention-preparedness-and-response
[5] https://www.who.int/news-room/questions-and-answers/item/pandemic-prevention--preparedness-and-response-accord; see also

In addition to these three main methods, we will also include an analysis of data from open-ended inputs from stakeholders, described further below.

(i) Document and data analysis

The purpose of our document and data analysis is to develop a **comprehensive understanding of ACT-A's mandate, objectives, institutional set up, governance, accountability, resource mobilization and financing, achievements, and key challenges.** We will note changes to ACT-A's structure over time,[6] as well as key areas of debate or special interest, in order to identify topics for further exploration in the interviews and surveys. To do this, we will conduct a rapid review of: peer-reviewed and gray literature; ACT-A and partner documents; and key quantitative data. This will include publicly available documents and data, as well as internal documents shared with the evaluation team.

Review of documents by ACT-A and its co-convening agencies: We will review the **ACT-A website and the websites of the ten ACT-A co-convening agencies** (BMGF, CEPI, FIND, Gavi, The Global Fund, Unitaid, Wellcome, the WHO, the World Bank, UNICEF)[7] to collect and review organizational documents and other content related to **ACT-A strategy, policy, and funding**.

Below is a sample of documents to be included in the review (see also **Annex 2**, which includes an initial scoping of relevant documents and data):

- ACT-A Quarterly Updates
- Consolidated Financing Framework for ACT-A Agency & In-Country Needs
- ACT-Accelerator Prioritized Strategy & Budget for 2021 (and other budgets)
- ACT-A Strategic review from 2021, and other (ongoing) evaluations[8]
- Terms of Reference of ACT-A bodies, e.g., the "ACT-A Facilitation Council Terms of Reference"
- Strategy, policy, and financing documents from ACT-A's co-convening agencies, including workplans and respective Board documents
- The "Two years of impact" report and the "ACT now, ACT together 2020-2021 Impact" report
- ACT-Accelerator 'faire share asks' – by country
- Update on Monitoring Vaccination, Testing, Treatment and PPE Targets for COVID-19
- Outcome statements of ACT-A FC meetings
- ACT-A Humanitarian Situation Reports.

Internal documents will be identified and requested from the ACT-A Hub during the evaluation.

The document review will be important for the evaluation of ACT-A's end-to-end approach, its evolving governance and operating model, and its launch at a time of significant urgency. We will consider the dynamic context in which ACT-A was established as an unprecedented and loose multistakeholder partnership. We will account for modifications to ACT-A's structure since its launch (e.g., an initial donor group evolved to create the FC in 2020; the FC composition then changed in 2021 after the midterm review). The analysis of ACT-A documents will also be critical to understand to what extent partners coordinated their work across and within pillars (including through joint strategic

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[6] As part of the document review, we will take into account that ACT-A's structures were modified (for example, also a result of the Strategic Review in 2021). We will assess effects of these changes through the interviews and surveys.

[7] For an overview of the co-convening agencies and ACT-A's overall structure, see https://www.act-a.org/about. PAHO is a delivery partner of ACT-A (https://www.who.int/initiatives/act-accelerator/about).

[8] To the extent possible, we will leverage (ongoing) evaluations to answer the 24 evaluation questions.

plans). The review will also assess how ACT-A engaged with external partners, such as civil society organizations (CSOs) and regional institutions. The review will also identify any **internal and external factors** that had impact on the implementation of ACT-A's objectives and targets.

The document review will include an assessment of financial documents, including from co-convening agencies. The external evaluation will answer questions on the amounts and speed/timing of funding pledged (when did donors pledge what amounts, when were the pledges paid, and how has that affected ACT-A's ability to at-risk purchase, procure, and deliver COVID-19 tools and to deliver on its mandate?).[9] Our document review will analyze to what extent pillar co-leads were able to use the mobilized funding **efficiently and effectively**, including with respect to equitable allocations and implementation. We aim to collect unpublished data and analysis from ACT-A agencies and institutions on the use of funding. We will also assess the level of reporting on funding, as an important dimension of accountability. The ACT-A Hub has shared with us an assessment of ACT-A joint resource mobilization, including lessons learnt and recommendations, which provides important input for this evaluation.

The document review will also help to analyze dynamics between the 92 countries of the **COVAX Advance Market Commitment (AMC) and the higher-income self-financing participants (SFPs) of the COVAX Self-Financing Facility**, which was intended to increase the purchasing power of the COVAX Facility, creating a bigger pool of investments and sharing the risks of investing in vaccine candidates.[10] In addition to reviewing relevant studies and peer-reviewed articles on this two-pronged design/approach of COVAX, we will include the findings from the 2021 ACT-A strategic review and other ongoing evaluations to the extent possible. We will also analyze the benefits and challenges of the design for specific country groups – low-income countries (LICs), lower-middle income countries (LMICs) and upper-middle countries (UMICs) – and regions. Overall, we aim to capture the global dynamics, characterized by market competition and interdependencies, to analyze ACT-A's performance as part of the global response.

We will also use the document review to assess how important ACT-A was within the overall global response, and how well ACT-A managed to coordinate with other actors and initiatives, including CSOs, regional institutions, and multilateral forums, such as the G7 and the G20.

**Quantitative data analysis:** We will collect and analyze quantitative data, including from the following **databases**:

ACT-A progress: Since its launch, ACT-A has supported the development and delivery of diagnostics, vaccines, and treatments, alongside other products, and types of support.

- We will use the **Global COVID-19 Access Tracker** to track progress towards the global targets for access to COVID-19 vaccines, treatments, tests, oxygen, and PPE

ACT-A funding: The ACT-A Hub and other sources provide relevant financial data:

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[9] On financing and procurement challenges, see for example: Agarwal, Ruchir Reed, Tristan: How to End the COVID-19 Pandemic by March 2022. World Bank Group; Agarwal, Ruchir Reed, Tristan: Financing Vaccine Equity : Funding for Day-Zero of the Next Pandemic. World Bank Group.
[10] https://www.gavi.org/covax-facility

- The **ACT-Accelerator Commitment Tracker** will be a key data source. It provides transparent reporting on funding commitments made between donors and ACT-A agencies against ACT-Accelerator Pillar budgets (including fair-share calculations)
- **The COVID-19 Health Funding Tracker**, sponsored by the Wellcome Trust (https://covidfunding.eiu.com/explore/)
- Potentially, **OECD DAC data** on health ODA and ODA for the COVID-19 response[11]

Other (context on the COVID-19 pandemic):

- **WHO Coronavirus Dashboard**, which, for example, includes data on COVID-19 cases, deaths, and vaccinations (https://covid19.who.int/)

Rapid review of peer-reviewed and gray literature: We will collect and analyze peer-reviewed and gray literature relevant to ACT-A's **structures, governance, funding, contributions, and achievements.**

We will search the MEDLINE and Scopus databases **for relevant academic and other relevant literature** (including CSO review/statements), related to ACT-A's mandate, governance, investments, and achievements. Our search will use key terms related to ACT-A including "Access to COVID-19 Tools Accelerator", "COVID-19 Tools Accelerator", "ACT Accelerator", "ACT-A", and "COVAX." No restrictions on language or publication type will be applied to our search. We have begun this search in MEDLINE and Scopus and identified several relevant articles to date (**Annex 2**). The initial review shows that there are several articles on ACT-A's operating model, governance, accountability, and resource mobilization.[12] Additional studies focus on ACT's impact and achievements, as well as on **internal and external factors negatively affecting the ability of ACT-A to deliver on its mandate**.[13]

We will also conduct a Google Scholar search to identify more gray literature, such as the report by the **Independent Panel for Pandemic Preparedness and Response (IPPPR)** and its background papers, as well as other main reports on pandemic preparedness and responses by WHO, World Bank, and others.**[14]**

(ii) Key informant interviews

The purpose of our key informant interviews is to identify the strengths and weaknesses of ACT-A's model and respective lessons learnt.

To ensure that a range of voices and perspectives are heard, we will conduct **up to 70 interviews** with key informants. Interviewees will be **selected based on the following criteria**:

- their role within ACT-A's processes and governance
- knowledge/experience with the evaluation framework's topics

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[11] To allow tracking ODA for COVID-19 control, the OECD introduced a new code for reporting COVID-19 ODA.

[12] Moon S. et al. Governing the Access to COVID-19 Tools Accelerator: towards greater participation, transparency, and accountability. Lancet. 2022 Jan 29;399(10323):487-494. doi: 10.1016/S0140-6736(21)02344-8.

[13] Watson OJ, Barnsley G, Toor J, Hogan AB, Winskill P, Ghani AC. Global impact of the first year of COVID-19 vaccination: a mathematical modelling study. Lancet Infect Dis. 2022 Jun 23:S1473-3099(22)00320-6. doi: 10.1016/S1473-3099(22)00320-6.

[14] https://theindependentpanel.org/

- stakeholder and organizational affiliation (to ensure balance of participants from governments, civil society, agencies, academia, etc.)
- gender (to aim for gender balance among participants)
- geography (to ensure adequate coverage of regions, countries, and country income groups)

We developed an initial list of key informants, which includes suggestions from the Reference Group. We aim to have key informants that include:

- High-level officials of the ACT-A hosts and agencies participating in ACT-A (see **Table 1** for an overview of pillar co-leads)[15]
- Current and previous WHO special envoys
- ACT-A Facilitation Council Members (including co-chairs)
- ACT-A Executive Hub, hosted by WHO
- Representatives of governments from low-income, middle-income, and high-income countries (e.g., health ministries; procurement bodies; development ministries)
- ACT-A donors
- Civil society organizations that have advocated for and/or against the ACT-A arrangements
- Civil society platforms in countries receiving ACT-A commodities and support
- Academic experts
- Industry
- Other.

In addition to individual interviews, we will facilitate a small number of **focus group discussions** (FGD) with civil society representatives and potentially also with other stakeholders. The FGDs will help us reach a larger number and wider spectrum of voices beyond the 70 KIIs. We will organize one FGD with ACT-A CSOs and Community representatives. We will organize additional focus groups with selected other CSOs, think tanks, and academics (details to be defined). All FGDs will be held remotely by video/phone.

Table 1: ACT pillars and co-leads

Pillar	Pillar Co-leads
Vaccines Pillar (COVAX)	CEPI, Gavi, WHO
Diagnostics Pillar	FIND, Global Fund, WHO
Therapeutics Pillar	Wellcome, Unitaid, WHO
Health Systems Connector	Global Fund, World Bank, WHO
Access & Allocation workstream	WHO

The evaluation team will send emails to key informants inviting them to participate in an interview and sharing a **letter of invitation from the Reference Group co-chairs.** We will schedule interviews

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[15] Leaders from each of the 10 agencies make up the 'Principals Group', which addresses cross-cutting strategy and delivery considerations, with representatives from industry, CSOs, international financial institutions, and the Facilitation Council invited to participate in meetings.

and conduct the interviews remotely over phone or video. The interviews will be guided with a **semi-structured questionnaire** which will be **tailored for different (groups of) key informants**.

We will take detailed notes during each interview. With the key informant's permission, interviews may be also recorded for note-taking purposes. Only the evaluation team will have access to notes and recordings from the interviews. We will synthesize information shared by key informants with that from other interviews. Individuals will not be identified by name in the evaluation report.

We will analyze and synthesize the interview data according to our evaluation framework. At least two members of the evaluation team will analyze each interview to ensure consistency and accuracy. We will cluster and summarize the interview results by key themes, stakeholder groups (i.e., donors, low- and middle-income country governments, agencies, academia, private sector, CSOs), region, and country income group (where feasible). We will identify cross-cutting takeaways across regions and other clusters. The evaluation team will have regular meetings to ensure quality and consistency in our approach and analysis.

It will be challenging for our team to conduct such a large number of interviews in the short evaluation timeframe. In addition, there are summer holidays in Europe and North America during this period. It will thus be of critical importance that the evaluation Reference Group and other ACT-A Facilitation Council members as well as the ACT-A partners support the interview processes (see also **Box 2**).

Box 2: Risks and risk management

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i)   Timeframe/timing of evaluation

The timeframe for the external ACT-A evaluation is very tight, and it coincides with summer holidays in Europe and North America. In addition, key stakeholders, especially in low- and middle-income countries, are currently focusing their attention on the response to the COVID-19 pandemic and the food crisis. To manage these risks, we request that the Reference Group and other ACT-A stakeholders support the evaluation team in getting access to key informants and survey respondents, including through making introductions to identified informants and respondents. Without such support, it will be very difficult to have a good survey response rate, and to conduct a sufficient number of interviews between early August and mid/late-September.

ii)   Contrasting views

The evaluation may find contrasting views on key evaluation questions. If this is the case, we will stratify the opinions by stakeholder constituencies (without compromising confidentiality) and describe the contrasting views.

iii)   Varying participation/familiarity with ACT-A

As discussed at the evaluation kick-off meeting, low- and lower-middle- income countries additional to the larger emerging economies were included in ACT-A's governance in a meaningful way at a late phase. It may thus be difficult to find key informants and survey respondents from low- and middle-income countries that are knowledgeable about all aspects of ACT-A (governance, resource mobilization, added value etc.). At country level, key stakeholders will likely be more aware of the contributions of the co-convening agencies (e.g., through the vaccines labels), while they will be less knowledgeable of ACT-A as a global partnership and structure. We will put extra effort to engage participants from low- and middle- income countries and adjust interviews as needed.

(iii) Online survey

We will conduct online surveys to reach a large number of stakeholders and gather data from closed questions to compare and aggregate. We have developed **three online surveys** to provide a more comprehensive and standardized assessment. The surveys include:

- A detailed survey for specific respondents closely involved with ACT-A, with 40 questions (mostly closed questions with open fields for further comments). This survey will be sent to the co-convening agencies, FC members (governments, CSOs, industry etc.), current and former Special Envoys, and others with strong knowledge and familiarity with ACT-A.
- An online survey for government representatives from low- and middle-income countries (15 closed and open-ended questions). This survey will be sent to representatives from low- and middle-income country governments with more limited/no direct involvement in ACT-A's structures. While these respondents will likely have less knowledge with regards to the 24 evaluation questions, it will be important to capture their perspective as they are the targeted beneficiaries of ACT-A.
- An online survey for CSOs and representatives from academia and think tanks (10 closed questions and open-ended questions).

The online survey will be made available in English and French. We will use the software SurveyMonkey to implement the survey. We will pilot test the survey questionnaire to verify its technical functionality. We will analyze the survey results using descriptive statistics and content analysis, including qualitative analysis of responses to the open-ended questions. The survey will allow stratifying results by stakeholder groups.

We are in the process of curating a list of survey respondents, which will be completed with additional contact suggestions from the Reference Group and Facilitation Group members.

Given the time constraints, we will need support from the ACT-A Facilitation Council and its evaluation Reference Group, the ACT-A Hub and the ACT-A agencies to achieve a good response rate (**Box 2**). This support will be very important to ensure strong participation of key stakeholders.

(iv) Additional methods

At the suggestion of the Reference Group, we will also analyze results from an invitation to provide open-ended inputs guided by some framing questions. The purpose of the open-ended submissions is to provide countries, CSO members, and potentially other stakeholders the opportunity to comment on ACT-A's achievements, challenges, and lessons learnt.

The invitation to provide open-ended comments will be guided by the following questions:

1. How well did ACT-A's structures and operating model support coordination, priority-setting, resource mobilization, and accountability? How could ACT's governance be improved?

2. Considering ACT-A's four pillars (Diagnostics, Therapeutics, Vaccines (COVAX), and the Health Systems and Response Connector), what were ACT-A's greatest achievements? What were its largest challenges? For future pandemic response, would you largely replicate the structure with these four pillars and a loosely affiliated partnership?

3. What are the main lessons learnt from ACT-A to date?

These questions have been posted on the ACT-A Hub website's evaluation page with information on the submission process. Stakeholders will be able to respond to these questions by submitting a two-page document (maximum length). The Reference Group, ACT-A Hub, and WHO will manage reaching out to countries and other stakeholders to encourage participation. Submissions will be sent directly to a dedicated email the evaluation team is creating for this purpose. We will analyze the qualitative data from the two-page submissions and include the findings in the final evaluation report.

C. Development of recommendations and lessons learnt

We will triangulate the findings of the document analysis, the key informant interviews, the online survey, and open-ended submissions to (i) gain a comprehensive picture of ACT-A's achievements and challenges, and to (ii) develop actionable lessons learnt about financing mechanisms for pandemic preparedness and response in the future. Based on our assessment, we will develop the draft evaluation report, including preliminary lessons learnt. Based on the feedback from the evaluation reference group, we will finalize the report. The report will be written in English.

4. Report outline

We developed preliminary outline of the evaluation report (**Table 2**), which was discussed during the kick-off meeting with the Reference Group.

Table 2: Outline of the evaluation report

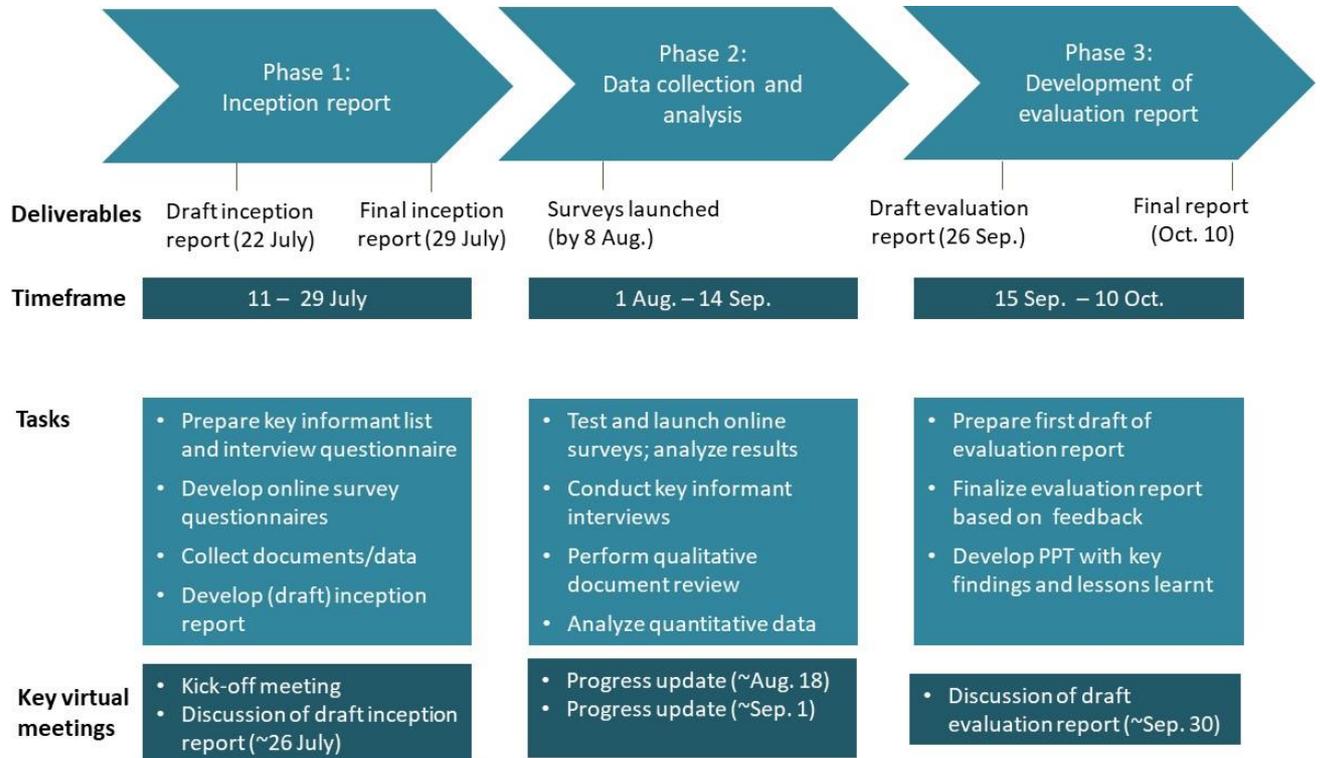| Sections	Key points to be addressed
1. About the evaluation	• Background, Objective, Scope, Methods
2. Introduction: Setting the context	• ACT-A launch at time of urgency/in dynamic context • Objectives and targets • End-to-end approach for COVID-19 tool development and delivery • Informal network, relying on existing partner systems and governance • Acknowledge achievements, e.g., funding mobilized; Vx, Dx, Tx development /delivery; PPE; oxygen; strengthened country systems and plans; other functions performed (e.g., indemnification; manufacturing support); • Evaluation starting point: What can we learn from ACT-A for the future? Could a different model have been more effective ("counterfactual")?

3. Mandate and governance	• Objects/targets realistic and appropriate, including for equity?
	• Strengths/weaknesses of governance system (decision-making, accountability, participation), e.g.:
	    o Sufficient coordination across pillars and actors involved?
	    o Adequate procedures in place to ensure transparent, effective, efficient decision-making, priority setting, allocation of resources?

	o Level of inclusion of LMICs and CSOs/communities? o Interaction with initiatives/forums outside of ACT-A • Benefits of alternative model (e.g., stronger decision-making body; pros/cons of a complementary "common pot" to the direct agency financing)?
4. Financing	• Amount: ACT-A properly funded; and at sufficient speed? Fair-share model useful? • Allocation: Funding adequately distributed across pillars? • Strengths and limitations of the resource mobilization model? • Speed and level of implementation? • Accountability for funding and results? • Support to Member States?
5. Performance across pillars	• Performance of vertical pillars: Dx, Tx, and Vx o Upstream/downstream (accelerating innovation vs. procurement, delivery, equitable access) o Benefits of ACT-A across country income groups o Regional dynamics, including role of regional mechanisms o Specific and common challenges across pillars (e.g., regulation; COVAX dual structure/AMC design) o Oxygen • Strengths and weaknesses of HSRC; targeted approach of CoVDP • Performance on specific ACT-A functions (e.g., indemnification; market shaping; support to manufacturing)
6. Role of factors external to ACT-A	• Trade barriers of input factors/raw material, manufacturing capacities, procurement/supply issues, technology transfer, IP, implementation challenges at country level etc.
7. Lessons learnt	• Functions at global, regional, national levels: R&D, market shaping, demand creation, procurement, delivery, etc., including on future role of WHO in pandemic preparedness and response • For global functions: Which governance arrangements? Which resource mobilization models? • What preparedness functions are needed globally to ensure the development of medical countermeasures in peace time? Which measures need to be taken to address external factors?

5. Workplan

The project timeline, key tasks, meetings, and deliverables are summarized in **Figure 1** below.

Figure 1: Workplan

	Phase 1: Inception report	Phase 2: Data collection and analysis	Phase 3: Development of evaluation report
Deliverables	Draft inception report (22 July) — Final inception report (29 July)	Surveys launched (by 8 Aug.)	Draft evaluation report (26 Sep.) — Final report (Oct. 10)
Timeframe	11 – 29 July	1 Aug. – 14 Sep.	15 Sep. – 10 Oct.
Tasks	• Prepare key informant list and interview questionnaire • Develop online survey questionnaires • Collect documents/data • Develop (draft) inception report	• Test and launch online surveys; analyze results • Conduct key informant interviews • Perform qualitative document review • Analyze quantitative data	• Prepare first draft of evaluation report • Finalize evaluation report based on feedback • Develop PPT with key findings and lessons learnt
Key virtual meetings	• Kick-off meeting • Discussion of draft inception report (~26 July)	• Progress update (~Aug. 18) • Progress update (~Sep. 1)	• Discussion of draft evaluation report (~Sep. 30)

Annex 1: Evaluation framework

Evaluation questions	Methods and data
Mandate 1. Was the ACT-A mandate relevant, achievable, and realistic? Was equity well defined and communicated? 2. Were the objectives and targets set appropriately, particularly with regards to equity and taking into consideration the speed with which implementation had to take place in a rapidly changing and dynamic environment, including the focus on 91+1 countries?	-Review of ACT-A documents to assess the context and rationale of decisions on mandate, as well as any changes made to its mandate -Key informant interviews (KIIs), including with actors involved in ACT-A's launch, to understand the discussions on the mandate and ACT-A's country focus -Assessment of ACT-A's equity concept considering different definitions of equity and discussion with WHO, CSOs, academics and others -Review of peer-review and gray literature (incl. from CSOs) on ACT-A's mandate, scope, and country focus, considering the dynamic global context
Set-up and structure, including governance and accountability 3. Was ACT-A appropriately structured and were there adequate procedures in place to ensure transparent, effective, and efficient governance and coordination of the response across and within the four pillars? 4. Was the decision-making process clear, efficient? How was consultation, priority setting and accountability for decisions achieved throughout the existence of ACT-A? 5. What were the benefits and disadvantages of the mandates and operations of the Facilitation Council and the Steering Group (Principals meeting), including with regards to decision-making? 6. To which extent were LICs and LMICs appropriately represented in ACT-A, throughout its existence? 7. Were civil society and communities meaningfully included in ACT-A governance (Facilitation Council, pillars, working groups), and how? 8. To which extent did ACT-A reduce transaction costs between agencies? What was the perceived added value of the ACT-A global platform compared to	-Review findings from ACT-A strategic review (2021), which, e.g., found insufficient cross-pillar coordination and limited representations of LICs, LMICs, and CSOs, and assess if changes to ACT-A structures led to significant improvements in terms of balanced representation and decision-making, accountability, and transparency: KIIs with CSOs and representatives of LICs and LMICs; CSO and government survey -KIIs with agencies, FC members, and Special Envoys to assess quality/level of coordination, collaboration, and priority-setting across and within pillars. Detailed survey also includes questions on this matter -Surveys and KIIs with broad spectrum of stakeholder to assess if ACT-A's operating model was appropriate to deliver on its mandate and achieve its objective. Key to discuss alternative models to generate lessons learnt, including on future governance arrangements and functions, such as procurement, performed by any new platform for pandemic response and preparedness -Review of peer-review and gray literature on governance, accountability, representation, operating – initial search shows that a range of articles and reports are available on these matters

self-driven alliances between related agencies? 9. To which extent were the ACT-A global procurement and distribution platforms the most appropriate compared with a more decentralized approach and/or as a channel for donations?	
Achievement of its objectives and commitments 10. To what extent did ACT-A achieve its objectives in relation to accelerate development, production, and equitable access to Covid-19 tests, treatments, vaccines, and personal protective equipment (PPE) and ensure health systems are ready to enable implementation of countermeasures? 11. To what extent did ACT-A manage to mobilise a coherent global response to the pandemic through advocacy and information sharing? 12. What were the key challenges faced with regards to operationalisation of ACT-A and its pillars in LICs and LMICs? What were the enhancing and limiting factors of the ACT-A pillars when it comes to work at country level to support a national response and build institutional capacities to implement it? 13. To which extent have external factors influenced ACT-A's ability to deliver on its mandate (e.g. WHO member states responses to Covid-19, movement of goods and commodities, geopolitical tensions, last mile challenges, market dynamics, manufacturers of medical countermeasures, academic, research and development sector, private sector, misinformation, disinformation, fake news and conspiracy theories)?	-Database analysis, especially Global COVID-19 Access Tracker and to some extent the WHO Coronavirus Dashboard; compare progress with global/ACT-A's targets -Review of documents by ACT-A and its partners, such as quarterly updates; Two-Year impact report, etc. -Review of peer-reviewed literature on achievements and impact, such as the study of the global impact of COVAX after one year (see Annex 2 for an initial scoping) -Survey questions on the perceived performance of ACT-A pillars, including on function performed by each of the pillars and ACT-A's added value overall (upstream; downstream; support to country planning and system readiness) -Survey questions on enabling factors and barriers, including the negative impact of external factors -KIIs with broad spectrum of stakeholders to discuss ACT-A's ability to perform specific functions and deliver on its objectives and targets, and barriers and enabling factors, including at country level -Review of ACT-A websites to assess ACT_A's ability to mobilize a coherent global response through advocacy and information sharing

Resource mobilisation and financing	-Assessment of ACT-Accelerator Commitment Tracker and The COVID-19 Health Funding Tracker (funding/funding gaps – overall and by pillar; pledges made/fair-share assessment; funding for R&D and delivery)
14. Was ACT-A adequately funded and at sufficient speed and the funding adequately allocated to achieve its objectives?	-Survey/study by ACT-A hub on resource mobilization
15. Have funding commitments and pledges translated into actual funding delivered and implemented. Has the funding been sufficiently flexible in response to a dynamic situation?	-WHO assessment/work on speed of implementation -Review of peer-reviewed and gray literature on resource mobilization and funding - KIIs on strengths and weaknesses of resource mobilization model and fair-share approach; amounts of funding provided; challenges and opportunities; (reduced) transaction costs
16. To which extent did ACT-A generate additional funds? How much non-ODA funds were mobilized?	-Survey questions on strengths and weaknesses of resource mobilization model and fair-share approach; amounts of funding provided; challenges and opportunities
17. To which extent did ACT-A contribute to enhanced and better financing of global Covid-19 response measures?	
18. What were the strengths and limitations of a decentralized resource mobilisation strategy led independently by each ACT-A partner? What were the consequences for funding allocation between pillars?	
19. What were the strengths and limitations of the fair share approach to defining size of financing requests, as well as the role of private sector and philanthropic contributions?	
Gaps and missed opportunities	-KIIs
20. What are the key structural issues of ACT-A that may have prevented it from fully achieving its mandate?	-Document review -Survey questions
21. Should ACT-A have also been mandated to serve as a central financing pool – accepting funds and allocating across the partnership according to need (instead of indicating need to donors and tracking actual financial contracts and disbursements)?	
Way forward	
22. What are the main lessons/ learnings from ACT-A?	-KIIs and survey questions on lessons learnt, functions to be performed at global level and at regional and national level, medical countermeasures platform
23. If such a model would be replicable, what improvements could be made, and what functions should be	-Triangulation of all conducted analyses to arrive at concrete and actionable lessons learned

institutionalized permanently for a future pre-negotiated end-to-end platform for medical countermeasures, including enabling a broad and sufficient level of contributions?

24. How can the experiences and learnings from ACT-A with regards to collaboration and coordination between the relevant global health agencies also be used to inform other aspects of the global health architecture?

Annex 2: Selected key documents

Table of results from an initial literature search (peer-reviewed literature)

Publication	Date	Journal/Source	Link
Emanuel EJ, et al.: An ethical framework for global vaccine allocation. Science. 2020 Sep 11;369(6509):1309-1312.	3 Sep. 2020	Science	https://www.science.org/doi/10.1126/science.abe2803
International Collaboration to Ensure Equitable Access to Vaccines for COVID-19: The ACT-Accelerator and the COVAX Facility.	2 March 2021	Milbank Quarterly	https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8014072/
Governing the Access to COVID-19 Tools Accelerator: towards greater participation, transparency, and accountability.	11 December 2021	Lancet	https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8797025/
Health systems neglected by COVID-19 donors.	7 January 2021	Lancet	https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7836267/
Health systems in the ACT-A.	25 March 2021	Lancet	https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7993938/
The ACT-Accelerator: Two years of impact.	26 April 2021	WHO	https://www.who.int/publications/m/item/the-act-accelerator--two-years-of-impact
2 years of the Access to COVID-19 Tools-Accelerator.	22 June 2022	Lancet Infectious Disease	https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9221369/

Health leaders criticize limited ACT-A review.	19 August 2021	Lancet	https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8376241/
The governance of personal data for COVID-19 response: perspective from the Access to COVID-19 Tools Accelerator.	31 May 2021	BMJ Global Health	https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8169217/
Risky business: COVAX and the financialization of global vaccine equity.	20 September 2021	Globalization and Health	https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8451387/
The ACT Accelerator: heading in the right direction?	15 April 2021	Lancet	https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8049588/
COVAX and the rise of the 'super public private partnership' for global health	22 October 2021	Global Public Health	https://pubmed.ncbi.nlm.nih.gov/34686103/
Analysis of the institutional landscape and proliferation of proposals for global vaccine equity for COVID-19: too many cooks or too many recipes?	29 November 2021	Journal of Medical Ethics	https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8635883/
COVID-19 vaccine equity: a health systems and policy perspective	25 November 2021	Expert Review of Vaccines	https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8631691/
The Responsibility-Sharing of Nation-States and the ACT-Accelerator	5 May 2021	Int. Journal of Health Policy & Management	https://pubmed.ncbi.nlm.nih.gov/34060271/
Calls for independent evaluation of ACT-A welcomed	28 May 2022	Lancet	https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9135373/
COVAX: more than a beautiful idea	31 July 2021	Lancet	https://pubmed.ncbi.nlm.nih.gov/34273295/
COVAX and the many meanings of sharing	22 October 2021	BMJ Global Health	https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8611232/
Access to COVID-19 vaccines: looking beyond COVAX	13 March 2021	Lancet	https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7952094/

Equitable and Feasible Distribution of SARS-CoV-2 Vaccines for All in Africa	1 August 2021	American Journal of Tropical Medicine and Hygiene	https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8437166/
A beautiful idea: how COVAX has fallen short	19 June 2021	Lancet	https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8494620/
Vaccine shortages prompt changes to COVAX strategy	21 October 2021	Lancet	https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8530464/
The Politics of Covid-19 Vaccine Distribution and Recognition	29 October 2021	Public Health Review	https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8589007/
Sanctioned countries in the global COVID-19 vaccination campaign: the forgotten 70%	17 September 2021	Conflict and Health	https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8446724/
Covax must go beyond proportional allocation of covid vaccines to ensure fair and equitable access	5 January 2021	BMJ	https://pubmed.ncbi.nlm.nih.gov/33402340/
Allocating a COVID-19 Vaccine: Balancing National and International Responsibilities	9 December 2020	Milbank Quarterly	https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8241277/
Brief communication international cooperation in a non-ideal world: the example of COVAX	21 December 2021	Cadernos Ibero-Americanos de Direito Sanitário	https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8691259/
COVAX and equitable access to COVID-19 vaccines	25 March 2022	Bulletin of the WHO	https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9047429/
WHO's allocation framework for COVAX: is it fair?	9 April 2021	Journal of Medical Ethics	https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8042584/
Expert Views on COVAX and Equitable Global Access to COVID-19 Vaccines	31 December 2021	International Journal of Public Health	https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8758559/
COVAX can still end COVID-19 vaccine apartheid	6 February 2021	Nature Human Behavior	https://pubmed.ncbi.nlm.nih.gov/35102357/

A vaccine tax: ensuring a more equitable global vaccine distribution	15 November 2021	Journal of Medical Ethics	https://pubmed.ncbi.nlm.nih.gov/34782418/
Incentivising wealthy nations to participate in the COVID-19 Vaccine Global Access Facility (COVAX): a game theory perspective	30 November 2021	BMJ Global Health	https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7705419/
COVAX, vaccine donations and the politics of global vaccine inequity	5 March 2022	Globalization and Health	https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8897760/
Charity or empowerment? The role of COVAX for low and middle-income countries	20 March 2022	Developing World Bioethics	https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9111754/
Global impact of the first year of COVID-19 vaccination: a mathematical modelling study	23 June 2022	Lancet Infectious Disease	https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9225255/
Pharmaceutical Industry's Engagement in the Global Equitable Distribution of COVID-19 Vaccines: Corporate Social Responsibility of EUL Vaccine Developers	15 October 2021	Vaccines	https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8539183/
Inequitable COVID-19 vaccine distribution and the intellectual property rights prolong the pandemic	27 January 2022	Expert Review of Vaccines	https://pubmed.ncbi.nlm.nih.gov/34878957/

Selected documents by ACT-A and ACT-A partners

Publication	Date	Source	Link
"The ACT-Accelerator: Two years of impact" (impact report)	26 April 2022	WHO	https://www.who.int/publications/m/item/the-act-accelerator--two-years-of-impact
Access to COVID-19 tools funding commitment tracker	27 June 2022	WHO	https://www.who.int/publications/m/item/access-to-covid-19-tools-tracker
ACT-A: Quarterly Update Q1	22 June 2022	WHO	https://www.who.int/publications/m/item/act-accelerator--quarterly-update-q1--1-january---31-march-2022

10th ACT-A Facilitation Council Meeting – Co-Chairs' Outcome Statement	29 April 2022	WHO	https://www.who.int/publications/m/item/10th-access-to-covid-19-tools-(act)-accelerator-facilitation-council-meeting---co-chairs--outcome-statement
ACT-A Facilitation Council – Terms of reference	21 February 2022	WHO	https://www.who.int/publications/m/item/act-accelerator-facilitation-council---terms-of-reference
ACT-Accelerator 'faire share asks' – by country	9 February 2022	WHO	https://www.who.int/publications/m/item/act-accelerator-fair-share-asks---by-country
WHO ACT-Accelerator Appeal: Supporting the spinal cord of the global COVID-19 response	7 December 2021	WHO	https://www.who.int/publications/m/item/who-act-accelerator-appeal-supporting-the-spinal-cord-of-the-global-covid-19-response-december-2021
ACT-A Strategic Plan & Budget (October 2021 – September 2022)	28 October 2021	WHO	https://www.who.int/publications/m/item/act-accelerator-strategic-plan-budget-october-2021-to-september-2022
ACT-A Strategic review	8 October 2021	Dalberg Advisors	https://www.who.int/publications/m/item/act-accelerator-strategic-review

ACT now, ACT together 2020-2021 Impact report	28 April 2021	WHO	https://www.who.int/publications/m/item/act-now-act-together-2020-2021-impact-report
ACT-A prioritized strategy and budget for 2021	12 April 2021	WHO	https://www.who.int/publications/m/item/act-a-prioritized-strategy-and-budget-for-2021
ACT-A: An economic investment case & financing requirements	24 September 2020		
ACT-A: Humanitarian Situation Report No.1	31 March 2022	UNICEF	https://www.unicef.org/media/121506/file/COVID-19-SitRep-31-March-2022.pdf
ACT-A Therapeutics Partnership: COVID-19 Therapeutics Investment Case		UNITAID	https://unitaid.org/assets/Therapeutics-Partnership-Investment-Case.pdf
ACT-A Diagnostics Partnership: Investing in Diagnostics	May 2020	UNITAID	https://unitaid.org/assets/ACT-A-Dx_Investment-Case.pdf
ACT-A Diagnostics Partnership: Investment Case Summary for monoclonal antibodies and small molecules		UNITAID	https://unitaid.org/assets/ACT-Accelerator-Therapeutics-Partnership_investment-case-summary-for-monoclonal-antibodies-and-small-molecules.pdf
ACT-A Investment Case	26 June 2020	UNITAID	https://unitaid.org/assets/act-consolidated-investment-case-at-26-june-2020-vf.pdf
COVAX calls for urgent action to close vaccine equity gap	20 May 2022	CEPI	https://cepi.net/news_cepi/covax-calls-for-urgent-action-to-close-vaccine-equity-gap/

Mapping global genomic sequencing activities from the ACT-A Diagnostics Partnership	20 December 2921	FIND	https://www.finddx.org/sequencing/mapping-act-a-sequencing-activities/
ACT-A Diagnostics Pillar: Progress		FIND	https://www.finddx.org/covid-19/act-accelerator-progress/
Q4 2021 Quarterly Update	21 December 2021	FIND	https://www.finddx.org/wp-content/uploads/2022/03/20220321_rep_acta_dx_impact_q4_EN.pdf
Q3 2021 Quarterly Update	30 September 2021	FIND	https://www.finddx.org/wp-content/uploads/2021/10/act-accelerator-q3-update.pdf
Q2 2021 Quarterly Update	30 June 2021	FIND	https://www.finddx.org/wp-content/uploads/2021/08/ACT-A-Q2-2021-v9.pdf
Accelerating COVID-19 Vaccine Deployment	20 April 2022	WHO	https://www.who.int/publications/m/item/accelerating-covid-19-vaccine-deployment
COVAX Key Strategic Issues – Board document	22-23 June, 2022	Gavi	https://www.gavi.org/governance/gavi-board/minutes/22-23-june-2022
Gavi's potential role in pandemic preparedness and response – Board document	22-23 June, 2022	Gavi	https://www.gavi.org/governance/gavi-board/minutes/22-23-june-2022
COVAX Data Brief	16 June 2022	Gavi	https://www.gavi.org/sites/default/files/covid/covax/COVAX-data-brief_6.pdf
Consolidated Financing Framework for ACT-A Agency & In-Country Needs	9 February 2022	WHO	https://www.who.int/publications/m/item/consolida

		25		ted-financing-framework-for-act-a-agency-in-country-needs
Update on Monitoring Vaccination, Testing, Treatment and PPE Targets for COVID-19	31 May 2022	ACT-A		https://www.act-a.org/_files/ugd/93f6ed_d3c61354 7c5a4898bab429 34c5850307.pdf
Global COVID-19 Access Tracker	Last update on 24 June 2022	Global COVID-19 Access Tracker		https://www.covi d19globaltracker. org/
The COVID-19 Health Funding Tracker	28 June 2022	The Economist		https://covidfund ing.eiu.com/explo re/
Global Fund contributions to health security in ten countries, 2014–20	February 2021	The Lancet		https://www.thel ancet.com/journa ls/langlo/article/P IIS2214-109X(20)30420-4/fulltext

Other documents

Publications	Date	Source	Links
Transforming or Tinkering? Inaction lays the groundwork for another pandemic:	May 2022	IPPPR	https://theindepe ndentpanel.org/w p-content/uploads/ 2022/05/Transfor ming-or-tinkering_Report_ Final.pdf
IPPPR background papers	Various	IPPPR	https://theindepe ndentpanel.org/d ocuments/ https://theindepe ndentpanel.org/ mainreport
BMJ series	Nov. 2021	IPPPR	https://www.bmj. com/covid-19-preparedness-and-response

Independent Oversight and Advisory Committee for the WHO Health Emergencies Program	May 2021	WHO	https://www.who.int/publications/m/item/a74-16-independent-oversight-and-advisory-committee-for-the-who-health-emergencies-programme
ROME DECLARATION Global Health Summit 21 May 2021	May 2021	European Commission	https://global-health-summit.europa.eu/rome-declaration_en
Letter: Civil Society & Community Engagement in the ACT Accelerator (ACT-A)	5 June 2020	Global Fund Advocates Network	https://www.globalfundadvocatesnetwork.org/wp-content/uploads/2020/06/Civil-Society-Community-Engagement-in-the-ACT-Accelerator-ACT-A.pdf
Letter: Inclusive representation of civil society and communities across the whole ACT-Accelerator structure	17 June 2020	Platform for ACT-A Civil Society and Community Representatives	https://covid19advocacy.org/wp-content/uploads/2022/07/2.-Letter-Inclusive-representation-of-civil-society-and-communities-across-the-whole-ACT-Accelerator-structure-17-June-2020.pdf

FIND Test Tracker		27	FIND	FIND's test tracker: https://www.finddx.org/covid-19/test-tracker/ Next-generation sequencing capacity mapping dashboard: https://www.finddx.org/covid-19/covid-19-genomic-surveillance/
Another triumph of science, but defeat for access? DNDi COVID-19 Policy Report	August 2021	DNDi	https://dndi.org/wp-content/uploads/2021/08/DNDi-COVID-19-Policy-Report-2021.pdf
COVAX- A broken promise to the World	21 December 2021	MSF	https://msfaccess.org/covax-broken-promise-world
Lessons learned and recommendations to ensure access to vaccines, medicines and diagnostics in the COVID-19 pandemic response and beyond	October 2021	MSF	https://msfaccess.org/lessons-learned-and-recommendations-ensure-access-vaccines-medicines-and-diagnostics-covid-19
Open letter to WHO & ACT-A	23 June 2021	MSF	https://msfaccess.org/open-letter-ambisome-WHO
"Ahead of Gavi's board meeting, MSF urges critical look at COVAX shortcomings – 22 June 2021"	22 June 2021	MSF	https://msfaccess.org/ahead-gavis-board-meeting-msf-urges-critical-look-covax-shortcomings
White Paper: Community-based Test-and-Treat	February 2022	Platform for ACT-A Civil Society and Community Representatives	https://covid19advocacy.org/wp-content/uploads/2022/02/FINAL-White-paper-Feb2-2022.pdf

Putting the Health Workforce at the Centre of the Health Systems Investments in COVID-19 and beyond		Family Medicine and Community Health	https://fmch.bmj.com/content/10/2/e001449
Build the Health Workforce back Better	April 2022	PSI	https://www.psi.org/2022/04/build-the-health-workforce-back-better/
Health Workers need to be at the centre of the Vaccine rollout	16 June 2021	VITAL	https://www.intrahealth.org/vital/health-workers-need-be-center-our-global-vaccine-rollout
Global health and health workforce development: what to learn from COVID-19 on health workforce preparedness and resilience	May 2021	The International Journal of Health Planning and Management	https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8206822/
The Impact of COVID on health and care workers- a look at deaths	September 2021	WHO	https://apps.who.int/iris/handle/10665/345300
Measuring the availability of human resources for health and its relationship to universal health coverage: estimates for 204 countries and territories from 1990 to 2019	23 May 2022	The Lancet	https://www.healthdata.org/research-article/measuring-availability-human-resources-health-and-its-relationship-universal-health https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(22)00532-3/fulltext
Health Workforce in the COVI-D Response		WHO	https://cdn.who.int/media/docs/default-source/nursing/who-healthworkforce-in-the-covid-19response.pdf?sfvrsn=62d228b02

Governing Health Workforce During COVID-19	2021	Eurohealth	https://apps.who.int/iris/handle/10665/344948
Is COVID-19 A turning Point for Health Workforce	August 2020	PAHO	https://iris.paho.org/handle/10665.2/52590
Health Systems in the ACT-A	27 March 2021	The Lancet	https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(21)00442-6/fulltext
A Review Says ACT-A Should Continue- Experts Warn of Changes	14 October 2021	DEVEX	https://www.devex.com/news/a-review-says-act-a-should-continue-experts-say-changes-are-needed-101830
COVID-19 Vaccine Equity- A health Systems and Policy Perspective	27 May 2021	Expert Review of Vaccines	https://www.tandfonline.com/doi/full/10.1080/14760584.2022.2004125
Invest in Health Systems to Effectively Respond to COVID-19	June 2020	WEMOS	https://www.wemos.nl/en/invest-in-health-systems-strengthening-to-effectively-respond-to-covid-19/
COVID-19 and the Rural Health Workforce: The Impact of Federal Pandemic Funding to Address Workforce Needs	March 2022	Center for Health Workforce Studies	https://familymedicine.uw.edu/chws/wp-content/uploads/sites/5/2022/03/Covid-19-and-the-Rural-Health-Workforce-PB-2022.pdf
How can we Optimize the Health Workforce During COVID-19	28 July 2021	Chemonics	https://www.chemonics.com/blog/part-2-how-can-we-optimize-the-health-workforce-during-covid-19-and-beyond/
Letter: Civil Society & Community Engagement in the Access to COVID-19 Tools-Accelerator (ACT-A)	22 February 2021		

Briefing: briefing by the ACT-A Civil Society and Community Representatives (22 February 2021)	22 February 2021		
Statement on Global COVID-19 Summit from ACT-A Civil Society Representatives: Current targets and strategies must be corrected to respond adequately to COVID-19 emergency			
Statement on the ACT-Accelerator Strategic Review	12 October 2021		
Key issues to be addressed in the updated ACT-A strategy	October 2021	Platform for ACT-A Civil Society and Community Representatives	https://covid19advocacy.org/key-issues-to-be-addressed-in-the-updated-act-a-strategy-october-2021/
Financing Vaccine Equity : Funding for Day-Zero of the Next Pandemic. World Bank		World Bank	https://documents.worldbank.org/en/publication/documents-reports/documentdetail/099500105262228687/idu0cdc5294e039a8045fb0aa670908d56a28371
"No Regrets" Purchasing in a pandemic: making the most of advance purchase agreements		Globalization and Health	