



**COVID-19
RESPONSE
VACCINES**

UN SYSTEM-WIDE COVID-19 VACCINATION PROGRAMME

FACTSHEET FOR UN SYSTEM RETIREES

VERSION: 22 OCTOBER 2021

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1. ARE UN SYSTEM RETIREES ELIGIBLE TO RECEIVE VACCINE THROUGH THE UN SYSTEM-WIDE COVID-19 VACCINATION PROGRAMME?

Yes, all individuals in receipt of a pension or disability benefit from the United Nations Joint Staff Pension Fund (UNJSPF) or from the IMF Staff Retirement Plan (SRP), or the World Bank SRP who have established their normal place of residence in a country where the UN System-wide COVID-19 Vaccination Programme is carried out, are eligible for the Programme. Spouses of eligible Retirees living in the same household are also eligible.

Please note that the UN programme is intended to supplement and complement national vaccination programmes and the COVAX initiative. As such, UN system retirees are expected in the first instance to receive vaccinations through the respective host country national programmes when available, and individuals who do not fall in the eligible categories would be expected to be covered by those national vaccination programmes. Based on supply of vaccine and changing conditions in countries, this document may be updated as appropriate.

2. ARE SPOUSES OF RETIREES ALSO ELIGIBLE?

Yes, spouses of eligible Retirees living in the same household are also eligible.

3. HOW WILL THE UN PRIORITIZE VACCINATIONS FOR RETIREES IN THE UN SYSTEM-WIDE COVID-19 VACCINATION PROGRAMME?

The UN will base its prioritization roadmap for UN personnel and eligible dependents on the [WHO Strategic Advisory Group of Experts \(SAGE\) Roadmap](#) for prioritizing uses of COVID-19 vaccines in the context of limited supply. This roadmap allows for individuals who are at greater risk of exposure to the virus, or who will likely suffer a more severe course of illness if contracting the virus to receive the vaccine first. Such priority groups include health care



workers and other front-line workers, as well as older adults, and those of any age with underlying health conditions.

Please note that the Programme is primarily a workplace occupational health programme to allow UN Personnel to stay and deliver on mandates with confidence. As such, active workers in high-risk occupations will be prioritized, and retirees may not have access to vaccine in the first rounds.

It should be noted that all UN personnel receiving the vaccines from national authorities should adhere to the local health authorities' directives on prioritization of individuals. While WHO makes recommendations for prioritization, not all countries follow exactly the sequence outlined in the [WHO prioritization roadmap](#).

4. HOW DO I REGISTER FOR MY VACCINATION?

The [UN System-Wide Covid-19 Vaccination Programme](#) uses the Everbridge platform to register eligible retirees for the vaccination rollout in their countries of residence (as on file with their responsible pension plans).

There are two ways in which a retiree can register on the Registration Platform:

- If your data was preloaded by your sponsoring organization/pension plan (e.g. UNJSPF), you will receive an independent link by email to review your information and complete your registration; or
- If you are part of the eligible retiree population, however, your data could not be preloaded by your sponsoring organizations/pension plan, you will be able to self-register on the registration platform. If you are unsure whether your data was preloaded, please [contact the Local Vaccination Deployment Team/ Coordinator](#) in your country of residence, to confirm with them whether self-registration is open for your country and provide you with a link to the self registration platform.

For UNJSPF retirees

Eligible UNJSPF retirees can be registered for vaccination in one of the following two ways:

Retiree Pre-registration by UNJSPF:

For those eligible UNJSPF retirees who have an email address on record with the Fund, the Fund was able to preload their data to the UN vaccination platform Everbridge. Once the UN vaccine deployment starts in their country of residence, they will receive a system-generated email from Everbridge with a link to complete their registration.

Retiree Self-registration:

For those retirees who do not have an email address on file with the Fund, they cannot be pre-registered in the vaccination registration platform but will need to self-register first. Upon local deployment, they will be notified by the Local Vaccination Deployment Team/Coordinator when self-registration is open for their country/duty station and a link will be provided to you. If you are unsure whether your data was preloaded, please [contact the Local Vaccination Deployment Team/Coordinator](#) in your country of residence to confirm with



them whether self-registration is open for your country/duty station and provide you with a link to the self registration platform.

5. WHOM SHOULD I CONTACT IF I HAVE QUESTIONS?

The UN vaccination programme is managed and coordinated by the UN Department of Operational Support. The UNJSPF is merely a data provider for this initiative and does not take part in the decision-making processes pertaining to the vaccination programme. As such, the Fund is **not** in a position to answer queries about the programme.

Eligible UN system retirees should [contact the Local Vaccine Deployment Team/Coordinator in their country/duty station for questions or email covidvaccine@un.org.](#)

6. WILL THE VACCINE BE FREE OF CHARGE / COVERED UNDER THE MEDICAL INSURANCE PLANS?

Yes. Similar to other vaccines, coverage of the vaccine is foreseen under the medical plans when recommended by the local health authorities and/or the WHO, and when vaccines are not offered free of charge by national governments.

7. WHICH VACCINE IS THE UN ADMINISTERING AS PART OF OF THE UN SYSTEM-WIDE COVID-19 PROGRAMME?

All vaccines administered through the Programme have been approved under emergency use listing procedures (EUL) by the World Health Organization, after a rigorous assessment of efficacy and safety.

In particular, the UN has acquired doses of:

- COVISHIELD, the version of AstraZeneca/Oxford COVID-19 vaccine manufactured by the Serum Institute of India, approved under emergency use listing procedures (EUL) by the WHO. **Note: All previous supply has been deployed. The Programme is working to acquire additional supply.**
- JANSSEN Ad26.CoV2.S vaccine against COVID-19 manufactured by Janssen (Johnson & Johnson), approved under emergency use listing procedures (EUL) by the WHO.
- BBIBP-CorV (SINOPHARM) manufactured by the Sinopharm/ China National Pharmaceutical Group, approved under emergency use listing procedures (EUL) by the WHO.

ASTRAZENECA

- See COVISHIELD COVID-19 Vaccine Fact Sheet (external site) [here.](#)

JANSSEN/ JOHNSON & JOHNSON

- See JANSSEN COVID-19 Vaccine Fact Sheet for **recipients and caregivers** (external site) [here.](#)
- See JANSSEN COVID-19 Vaccine Fact Sheet for healthcare providers administering vaccine (vaccination providers) (external site) [here.](#)
- See from the WHO ‘The J&J COVID-19 vaccine: What you need to know’ (external site) [here.](#)



SINOPHARM

- BBIBP-CorV (SINOPHARM) (no fact sheet as of yet) but see from the WHO ‘The Sinopharm COVID-19 vaccine: What you need to know’ (external site) [here](#).

8. ARE COVID-19 VACCINES SAFE?

The World Health Organization (WHO) and its partners are committed to accelerating the development of COVID-19 vaccines while ensuring that all vaccines are as safe as possible. All clinical trials are rigorously evaluating vaccines for safety.

- [More WHO information on the COVID-19 vaccines.](#)
- [More information from the UN Medical Directors regarding COVID-19 vaccines.](#)

As for all COVID-19 vaccines, the COVID-19 vaccines should be given under health care supervision, with the appropriate medical treatment available in case of allergic reactions. A history of anaphylaxis to any component of the vaccine is a contraindication to vaccination. As a precautionary measure, an observation period of 15 minutes after vaccination should be ensured.

In addition, a history of anaphylaxis to any other vaccine or injectable therapy (i.e., intramuscular, intravenous, or subcutaneous vaccines or therapies) is not a contraindication to vaccination. For such persons, a risk assessment should be conducted by a health professional. It is uncertain if there is an increased risk of anaphylaxis, but counselling should be given about the potential risk of anaphylaxis and the risks should be weighed against the benefits of vaccination. Such persons should be observed for 30 minutes after vaccination in health care settings where anaphylaxis can be immediately treated.

Anyone with an acute febrile illness (body temperature over 38.5 °C) should postpone vaccination until they are afebrile. However, the presence of a minor infection, such as a cold, or low-grade fever should not delay vaccination.

For the COVID-19 vaccines that need more than one dose, (i.e. Oxford-AstraZeneca vaccine, COVISHIELD, Sinopharm) if you had a severe allergic reaction (rapid heartbeat, difficulty breathing, swelling of the throat, or a generalized rash or hives) after getting a COVID-19 vaccination, you should not receive another dose of that vaccine. Consult with your physician about safe alternatives and future COVID-19 vaccination plans.

9. IS THE OXFORD-ASTRAZENECA/COVISHIELD VACCINE SAFE?

The available science indicates that the Oxford-AstraZeneca (AZ) vaccine is highly effective and safe to take. It prevents severe disease, hospitalization, and is saving lives.

As of 9 April, almost 200 million individuals had received the AZ vaccine. Among those, a small number of individuals (reportedly, 1 in 100,000) has experienced rare types of thromboembolic events (unusual blood clots with low blood platelets). Reported incidence is variable, ranging from 1 /100,000,000 to 1/100,000 vaccination. This is an area of ongoing study to understand true risk. These rare events have prompted a thorough assessment of all available data by WHO’s Global Advisory Committee on Vaccine Safety (GAVCS) and the European Medicines Agency (EMA) with a view to ascertain whether a causal link with the AZ vaccine can be established.



On 7 April 2021, the GACVS and the EMA as well as other national health authorities in Europe all issued statements indicating that:

1. A causal relationship between the vaccine and the occurrence of these thromboembolic events is considered plausible but is not confirmed.
2. The events are very rare and therefore, if there is a causal link, the risk is extremely low. In comparison, as of 7 April 2021, at least 2.86 million people worldwide have died of COVID-19, and infections continue to rise.
3. The benefits of taking the AZ vaccine far outweigh the very rare potential risks. Specialized studies are needed to fully understand the potential relationship between vaccination and possible risk factors, such as gender or age as well as comorbidities or other factors which so far have not been identified. However, out of an abundance of caution, some countries decided to restrict the vaccine to certain categories of population.

See full GAVCVS statement [here](#).

In sum, while the vaccine may cause severe blood clotting events, such events were deemed by all health experts as very rare, and not altering the risk/benefit balance, which remains overwhelmingly in favour of getting the AZ vaccine, if and when available. In case of doubt, you are advised to consult with your health care provider.

10. IS THE JOHNSON & JOHNSON (JANSSEN AD26.COVID-19) VACCINE SAFE?

The Johnson & Johnson (Janssen Ad26.COVID-19) vaccine has been shown to be safe in patients over the age of 18 years, including those with known medical conditions associated with increased risk of severe disease, such as hypertension, chronic lung disease, significant cardiac disease, obesity, and diabetes.

SAGE has thoroughly assessed the data on quality, safety and efficacy of the vaccine and has recommended its use for people aged 18 and above.

This vaccine has also undergone review by the European Medicines Agency (EMA) and the U.S. Food and Drug Administration (FDA) and found to be safe for use.

The GACVS COVID-19 subcommittee met virtually on 11 May 2021 to review available information and data on thromboembolic events (blood clots) and thrombocytopenia (low platelets) after vaccination with the adenoviral vectored J&J vaccine. This condition is referred to as thrombosis with thrombocytopenia syndrome (TTS). Current evidence suggests a plausible causal association between the J&J COVID-19 vaccine and TTS.

See the full GACVS statement [here](#).

Based on a careful scientific review of the available information, the subcommittee came to the following conclusions and recommendations:

- The benefits of the J&J COVID-19 vaccine continue to outweigh the risks of TTS. As the only single dose COVID-19 vaccine approved for use to date, the vaccine may be an important tool for accessing difficult-to-reach populations, thus playing a key role in preventing infections and reducing deaths across the world.



- Reports of TTS following vaccination with the J&J vaccine have a similar clinical picture to those reported following vaccination with the AstraZeneca COVID-19 vaccine. On 16 April 2021 the GACVS COVID-19 subcommittee issued an updated statement on blood coagulation events and the AstraZeneca COVID-19 vaccine
- When setting their immunization policies, the risk of TTS from use of the J&J vaccine should be assessed against the benefits. Countries should perform such a benefit-risk analysis taking into account local epidemiology (including incidence and mortality from COVID-19 disease), age groups targeted for vaccination, and the availability of alternative vaccines.

As part of making an informed decision on whether to receive the Janssen vaccine, in particular, individuals should read the vaccine JANSSEN COVID-19 Vaccine Fact Sheet for recipients and caregivers, found at <https://www.fda.gov/media/146305/download> and consult their medical practitioner.

11. IS THE SINOPHARM VACCINE (BBIBP-CORV) SAFE?

SAGE has thoroughly assessed the data on quality, safety and efficacy of the vaccine and has recommended its use for people aged 18 and above.

Safety data are limited for persons above 60 years of age (due to the small number of participants in clinical trials). While no differences in safety profile of the vaccine in older adults compared to younger age groups can be anticipated, countries considering using this vaccine in persons older than 60 years should maintain active safety monitoring.

No severe hypersensitivity and anaphylaxis reactions caused by the vaccine have been recorded in clinical trials but were occasionally observed post-introduction. The most frequently reported adverse reactions in clinical trials included injection site pain, headache, fatigue, myalgia, arthralgia, diarrhea, nausea, cough, dyspnea, pruritus and fever (axillary temperature ≥ 37.5 °C). The most common adverse reactions from post-licensure safety monitoring are induration, redness and swelling at injection site, fever.

More information can be found here: <https://www.who.int/news-room/feature-stories/detail/the-sinopharm-covid-19-vaccine-what-you-need-to-know>

12. WILL I BE OFFERED A CHOICE OF VACCINE?

At this time, in most countries, people will not be able to choose the kind or the brand of vaccine they want. This, however, could change as other vaccines are authorized for use and vaccine supplies increase.

13. WHAT IF I DO NOT WANT TO RECEIVE THE SPECIFIC TYPE OF VACCINE OFFERED TO ME?

It will be up to the individual to decide if they want to be vaccinated or not and whether they want to accept the type of vaccination being offered by the national/ host country or the UN. It is also important to remember that UN personnel are also expected to comply with all requirements mandated by the host country and national authorities.



14. WHAT IF I HAVE MORE QUESTIONS?

- For questions please contact [the Local Vaccine Deployment Coordinator](#) in your location.
- You may also write to covidvaccine@un.org
- Please see UN System-wide COVID-19 Vaccination Programme FAQs in English [here](#), and in French [here](#).
- Additional information about the Programme on un.org [here](#).