

Gavi's 2016–2020 strategic framework 22 June 2016



Gavi 2000-2015

Gavi 2.0

200 million children immunised

Gavi 3.0

250 million children immunised

Gavi 1.0

90m children immunised

2000 2005

- Support for 3 vaccines
- Immunisation services support, injection safety

2006

4 vaccines added, incl

2010

- 4 vaccines added, inci rotavirus, pneumococcal
- Health system strengthening programme started
- Innovative finance
- First co-financing policy

2011

2015

- 12 vaccines in Gavi portfolio
- Acceleration of vaccine introductions
- · Proactive market shaping
- First graduation policy



Achievements and challenges 2000-2015





- Immunisation coverage is at the highest level ever
- Number of under-immunised children in Gavisupported countries down by 46% since 2000 – 52% if accounting for population growth

- But 15 million children miss out on even the most basic vaccines, only ~ 5% are fully immunised
- Our challenge now is to reach every child while continuing rollouts of new vaccines



Gavi 4.0

300 million children immunised

New mission:

To save children's lives and protect people's health by increasing equitable use of vaccines in lower-income countries

Stronger focus on coverage, equity and sustainability to reach every child and ensure immunisation programmes can continue after our financial support ends



Gavi, the Vaccine Alliance strategy, 2016-2020

 Disease dashboard —— Aspiration 2020 -To save children's lives and protect 10% reduction Actual decrease in disease burden: people's health by increasing 5-6 million Hepatitis B equitable use of vaccines in >250 million • Rotavirus diarrhoea lower-income countries >300 million Measles Country-led Globally engaged Integrated Collaborative Community-owned Catalytic & sustainable Innovative Accountable Increase effectiveness and Improve sustainability Accelerate equitable uptake and Shape markets for vaccines and efficiency of immunisation of national immunisation coverage of vaccines delivery as an integrated part of other immunisation products programmes strengthened health systems A. Increase coverage and equity of A. Contribute to improving integrated A. Enhance national and sub-national A. Ensure adequate and secure supply of immunisation and comprehensive immunisation political commitment to immunisation quality vaccines programmes, including fixed, outreach B. Support countries to introduce and B. Ensure appropriate allocation and B. Reduce prices of vaccines and other and supplementary components scale up new vaccines management of national human and immunisation products to B. Support improvements in supply financial resources to immunisation an appropriate and sustainable level C. Respond flexibly to the special needs chains, health information systems, through legislative and budgetary of children in fragile countries C. Incentivise development of suitable demand generation and gender-sensitive means and quality vaccines and other approaches C. Prepare countries to sustain immunisation products C. Strengthen engagement of civil society, performance in immunisation private sector and other partners in after graduation immunisation · Reach of routine coverage: · Supply chain: % countries meeting · Co-financing: % countries fulfilling Sufficient and uninterrupted supply: pentavalent 3rd dose, measles 1st dose Effective Vaccine Management co-financing commitments % vaccine markets where Gavi supply · Breadth of protection: benchmarks Country investments: % countries with meets demand average coverage across supported · Data quality: difference between increasing investments in routine · Reduction in price: reduction in vaccines administrative coverage and surveys immunisation per child weighted average price of fully vaccinating · Access, demand and service delivery: · Programmatic sustainability: a child with pentavalent, pneumococcal Equity of coverage and barriers % countries on track for successful based on: pentavalent 1st dose coverage and and rotavirus vaccines - geography · Innovation: number of vaccines and wealth quintiles • Integration: % countries meeting Institutional capacity: % countries immunisation products with improved - education of mothers/female benchmark for integrated service meeting institutional capacity benchcharacteristics procured by Gavi marks for national decision making, · Healthy market dynamics: % vaccine caretakers - fragile state status · Civil society: % countries meeting management and monitoring markets with moderate or high health benchmark for civil society engagement for improved coverage and equity Country leadership, management & coordination Advocacy Resource mobilisation Monitoring & evaluation

Putting the strategy into operation: ALREADY IN PLACE





Putting the strategy into operation: AT THIS BOARD MEETING





Putting the strategy into operation: STILL TO COME





Foundational support: roles of our main partners

Principles

- Predictability / long term funding
- Enable to play a lead role on critical programmatic areas
- Focus on areas of comparative advantage

Roles (non exhaustive)

- WHO: Norms and standards in vaccine introduction, HSS, data quality
- UNICEF: Leadership in social mobilisation; Vaccine supply chain; equity
- CSOs: Engagement in Gavi governance processes
- World Bank: Sustainable financing for immunisation
- CDC: Surveillance/data quality
- Expanded partners: Competitive selection as needed

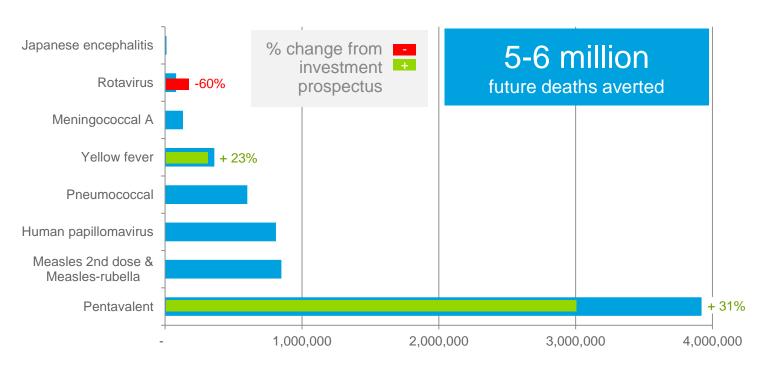


Close to 200 Gavi-funded staff in country offices



Gavi impact 2016-2020: by vaccine

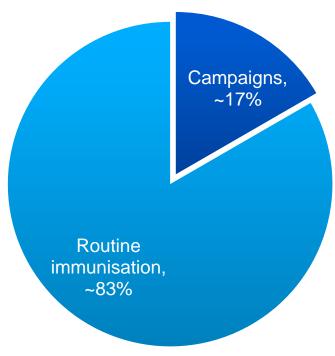
Forecasted impact towards preventing future deaths





Gavi impact 2016-2020: routine immunisation vs campaigns

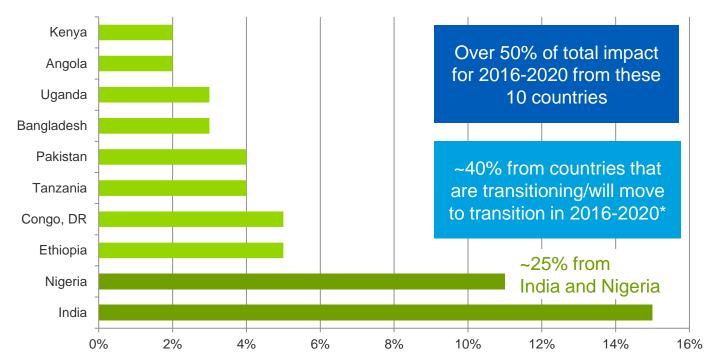
Forecasted impact towards preventing future deaths





Gavi impact 2016-2020: top-10 countries

% of deaths averted by country



^{*} Includes India.

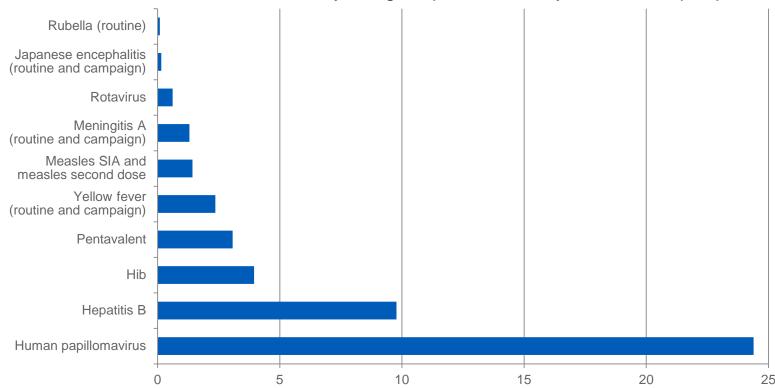
Source: strategic demand forecast v12.



Gavi impact 2001-2020

Source: strategic demand forecast v12.

Forecasted deaths averted by antigen, per 1,000 fully vaccinated people





Coverage and equity in action

Madagascar



India



Pakistan





Nigeria



Democratic Republic of the Congo



Kenya



DRC: cold chain equipment optimisation

6,591 health facilities: cold chain equipment coverage

75% of health facilities (6,591): with CCEOP support

51% of health facilities (4,504): with HSS 2 Support

25% of health facilities (2,192): (2013 (baseline)





