

# CEO Board report

***Seth Berkley, MD***  
***Chief Executive Officer***

*GAVI Alliance Board meeting*  
*Geneva, Switzerland*  
*18-19 June 2014*



# Remembering **Ciro de Quadros (1940–2014)**, a giant in public health and immunisation



Sabin Vaccine Institute 20<sup>th</sup> anniversary, 25 April 2014

*GAVI Alliance Board meeting  
18–19 June 2014*

# GAVI Alliance replenishment launch, Brussels, 20 May 2014



GAVI Alliance Board meeting  
18-19 June 2014



# Team GAVI kicks off replenishment

TEAM: GAVI ALLIANCE  
POSITION: VACCINE SUPPORTER



Career Saves: 6 million lives | 2016-2020 Season: Salary needed: \$7.5 billion  
Projected saves: 5 million +

ONE #BigGoal  
one.org/vaccines



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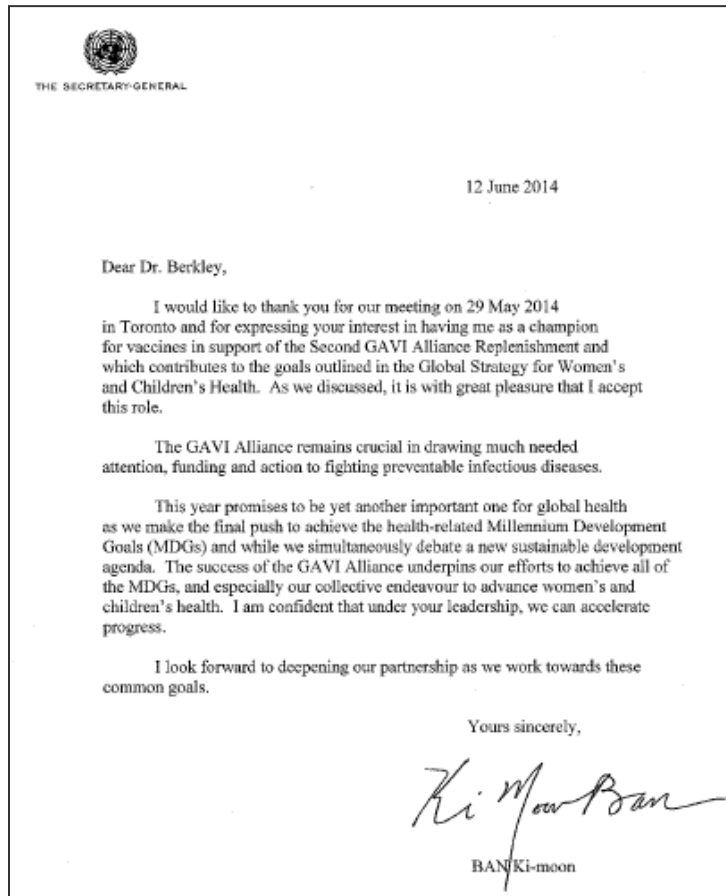
# High-Level meeting of the Global Partnership for Effective Development Co-operation, Mexico City, 15 April 2014



*“ We have many successful examples of truly global partnerships that are delivering specific results, such as the GAVI Alliance. ”*

UN Secretary-General  
Ban Ki-moon

# UN Secretary-General Ban Ki-moon commits as GAVI Champion



“Thank you for expressing your interest in having me as a **Champion**... It is with great pleasure that I accept.”

“**GAVI Alliance remains crucial** in drawing much needed attention, funding and action to fighting preventable infectious diseases”

“The success of the GAVI Alliance **underpins our efforts to achieve all of the MDGs**”

# African leaders pledge support to immunisation: Leaders' Declaration, WEF Africa 8 May 2014



**President Macky Sall** of the Republic of Senegal

**Kofi Annan**, Nobel Peace Laureate and former Secretary-General of the UN

**President John Dramani Mahama** of the Republic of Ghana

**President Mulatu Teshome** of Ethiopia

**President Ellen Johnson Sirleaf** of the Republic of Liberia

**President Jakaya Kikwete** of the United Republic of Tanzania

**Dr Richard Sezibera**, Secretary General, East Africa Community

**Dr Donald Kaberuka**, President of the African Development Bank

# Health Ministers, World Health Assembly, Geneva, 22 May 2014



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# Launch of the End Cervical Cancer Now campaign, London, 4 June 2014

First Lady of Ghana HE Lordina Dramani Mahama, First Lady of Mozambique HE Dr Maria da Luz Dai Guebuza, Baroness Northover



*GAVI Alliance Board meeting  
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# G7 Summit Declaration, 5 June 2014



*“We recognise the impact of the GAVI Alliance and welcome its efforts to expand access to vaccines to an additional 300 million children during 2016-2020. We welcome Germany’s offer to host the second replenishment in early 2015, **reaffirm our commitment, and call on other public and private donors to contribute to the replenishment of the GAVI Alliance.**”*

# Celebrating 40 years of the Expanded Programme on Immunization



Celebrating forty years of the  
Expanded Programme on Immunization



Dr Ciro de Quadros  
Executive Vice President  
Sabin Vaccine Institute



Dr Margaret Chan  
Director-General, WHO



Dr Mercy Ahun  
Special Representative to  
GAVI Eligible Countries

# International Aid Transparency Initiative Annual Report, May 2014

*“Recognising how critical transparency is to effective cooperation, GAVI is now focusing... on ensuring its data is available in formats that are easy to access, analyse and reuse.”*



# New GAVI Alliance reports



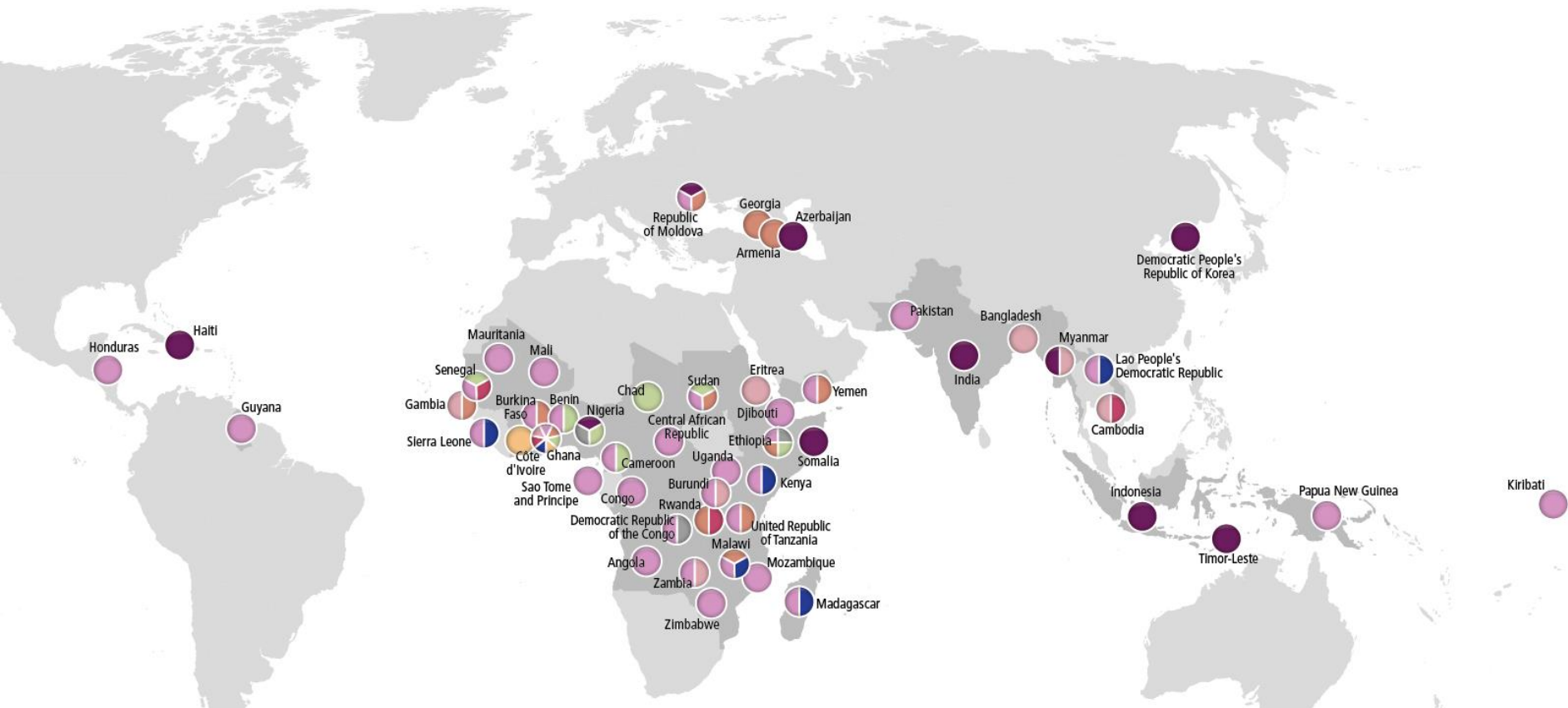
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18-19 June 2014



# Accelerated roll-outs

# GAVI-supported vaccine introductions and campaigns

1 Jan 2011 – Nov 2013 Board: 86 introductions and campaigns

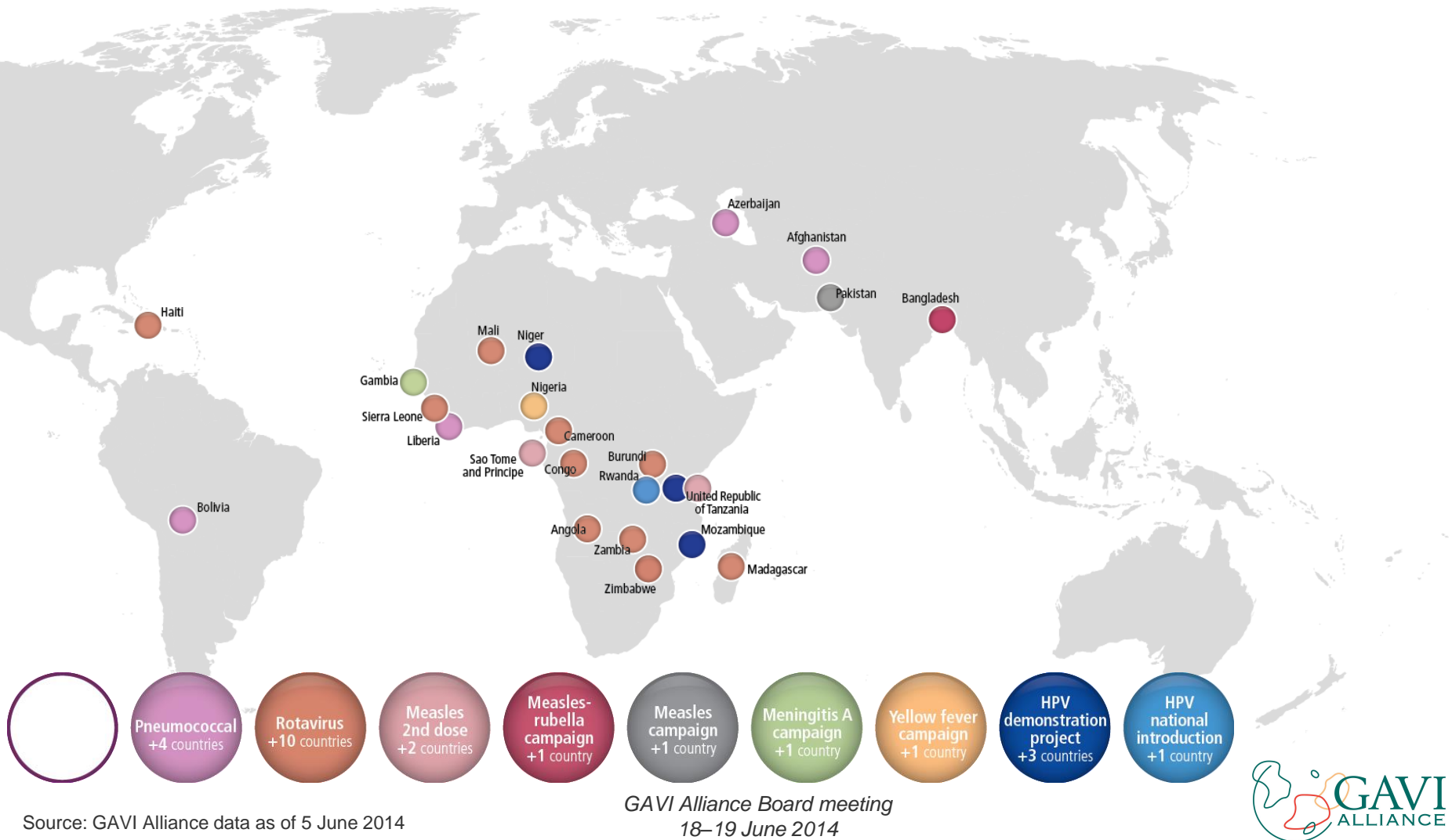


Source: GAVI Alliance data

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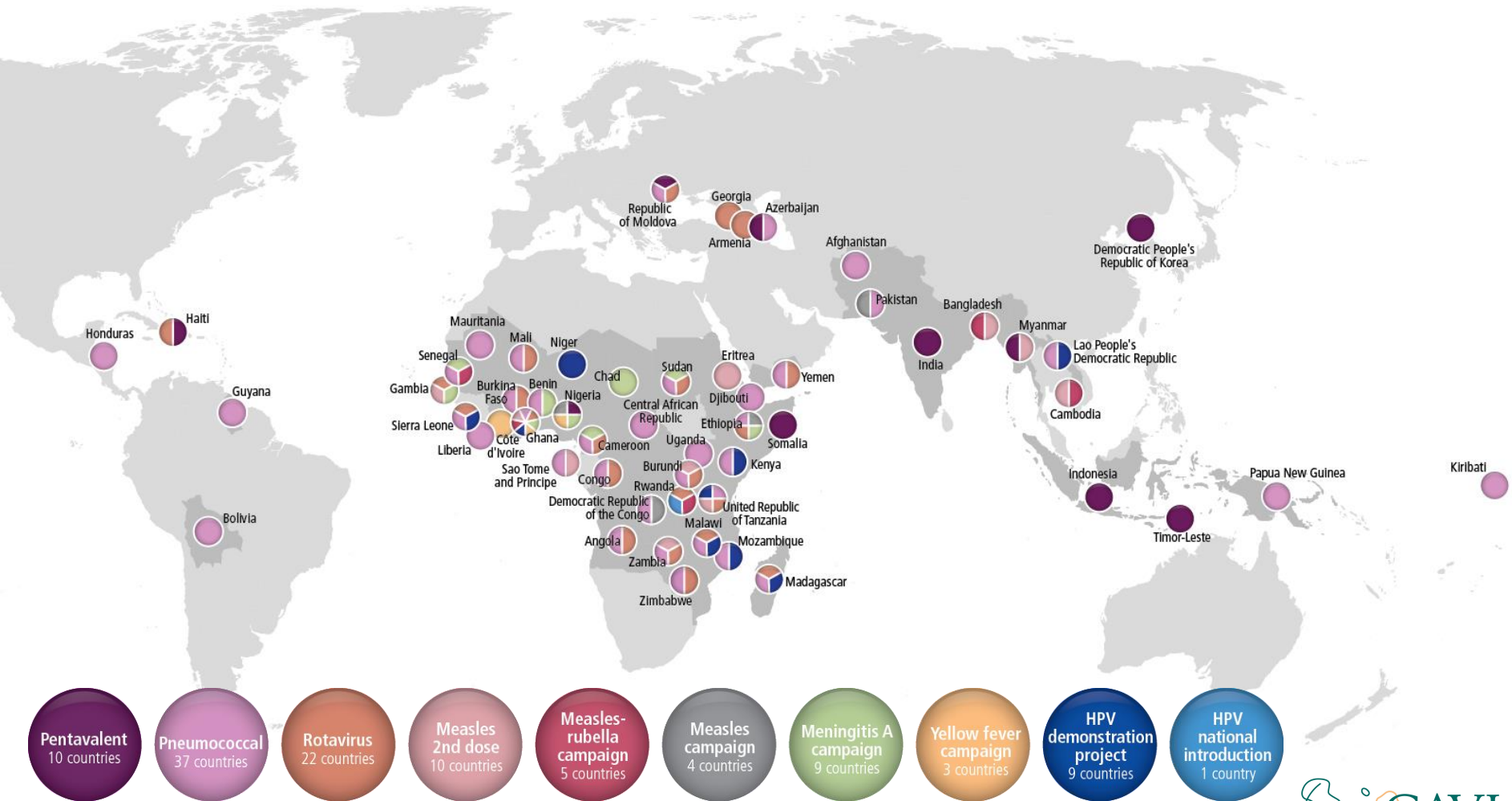
# 24 GAVI-supported vaccine introductions and campaigns since the last Board meeting





# GAVI-supported vaccine introductions and campaigns

1 January 2011 – 5 June 2014: 110 introductions and campaigns



Source: GAVI Alliance data as of 5 June 2014

GAVI Alliance Board meeting  
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A close-up photograph of a young child, likely a toddler, wrapped in a white cloth with blue polka dots. The child is looking slightly to the right. The child is being held by an adult wearing a blue garment with a yellow and white floral pattern. The background is blurred, showing a red wall and some indistinct objects.

***Mali***  
***Rotavirus vaccine***

*Liberia*

*Pneumococcal vaccine*





**Bangladesh**  
*Measles-rubella campaign*



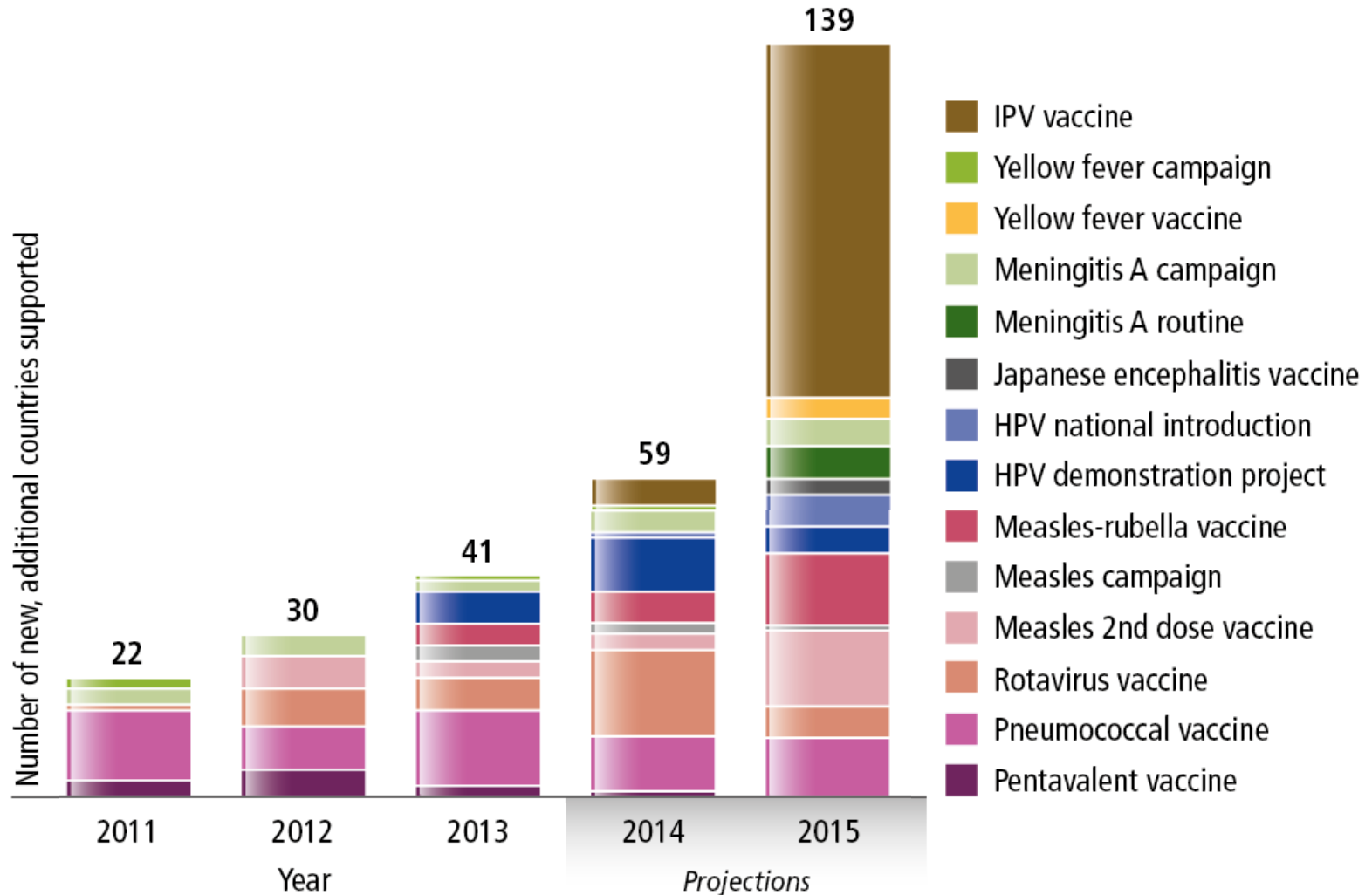
*Niger  
HPV demonstration project*

*Rwanda*

*GAVI support for HPV national programme*



# New GAVI vaccine support, 2011–2015: routine programme introductions and campaigns

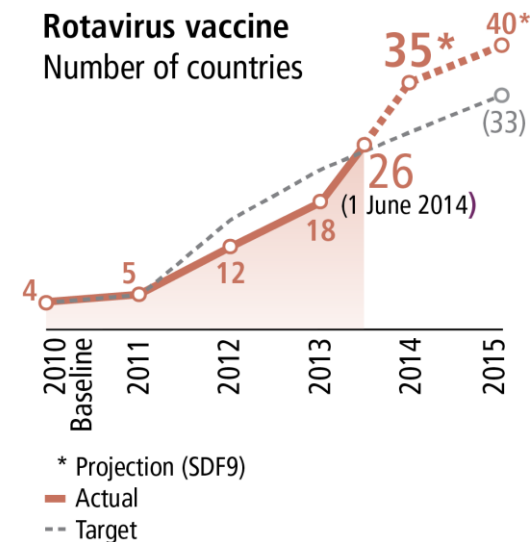
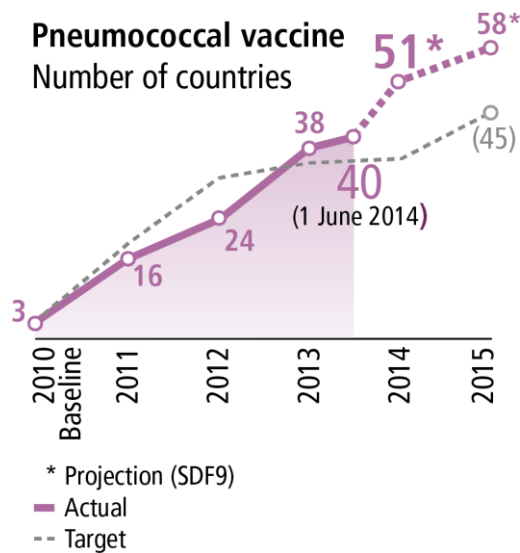
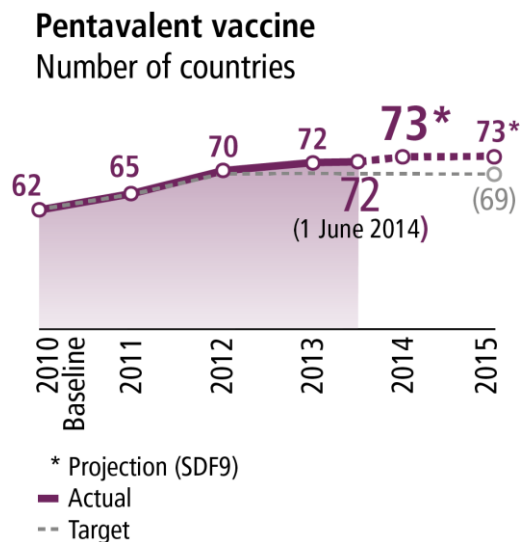


Source: GAVI Alliance data as of June 2014.

Note: Only the first phase of introductions and campaigns is included. IPV projections are only partially based on country input.

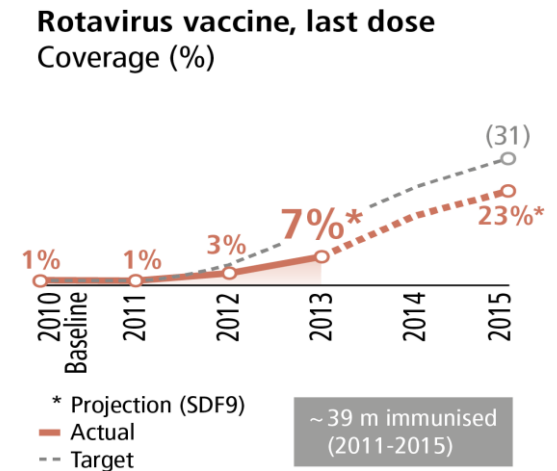
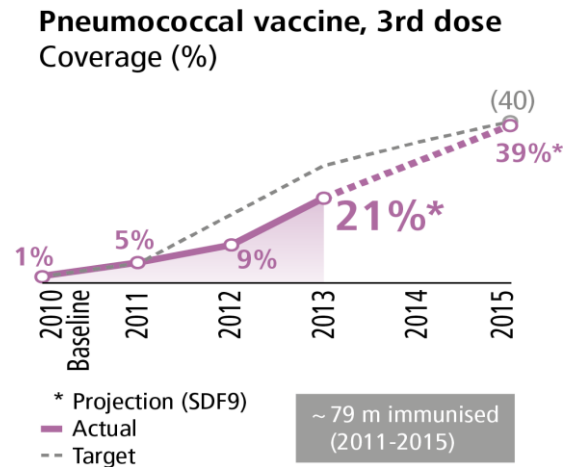
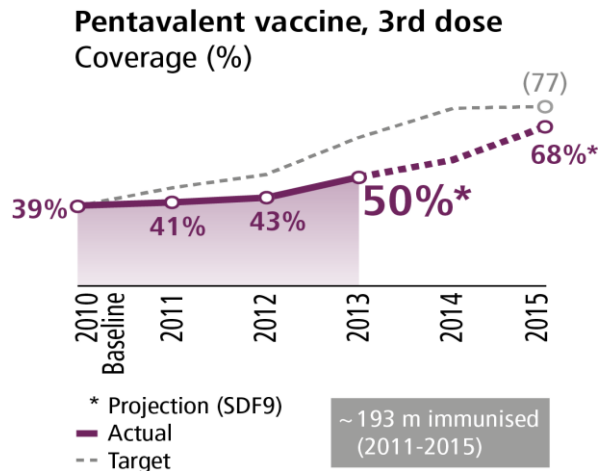
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# Vaccine introductions expected to exceed targets by the end of 2014





# ...but coverage is still below expectations



## Key factors to ensure targets are met:

- Successful scale-up of pentavalent vaccine in India and Indonesia
- Supply continuity for pneumococcal and rotavirus vaccines

# HSS – no longer a data-free zone

## Nigeria

- Supply chain redesign pilots in Lagos and Kano, partly funded by GAVI, led to an increase in districts with adequate stock from **27%** to **68%** within 4 months
- 35 states trained with GAVI support

## Yemen

- GAVI funded outreach services in 64 districts
- In 2007, only **58%** of these districts had DTP3 coverage of >80%. In 2013, this had increased to **94%\*** - even though national coverage had decreased.

## Liberia

- Functional M&E units established at county level
- Data quality improved: percentage of counties submitting timely and complete reports increased from **30%** to **82%** 2007–2012\*

## Honduras

- matches 10% of the total HSS grant amount every year
- Proportion of municipalities achieving over 80% DTP3 coverage increased from **80%** in 2007 to **93%** in 2012\*

# Full country evaluations: new learning tool

## Evaluation of pneumococcal vaccine introductions in Mozambique, Uganda and Zambia showed:

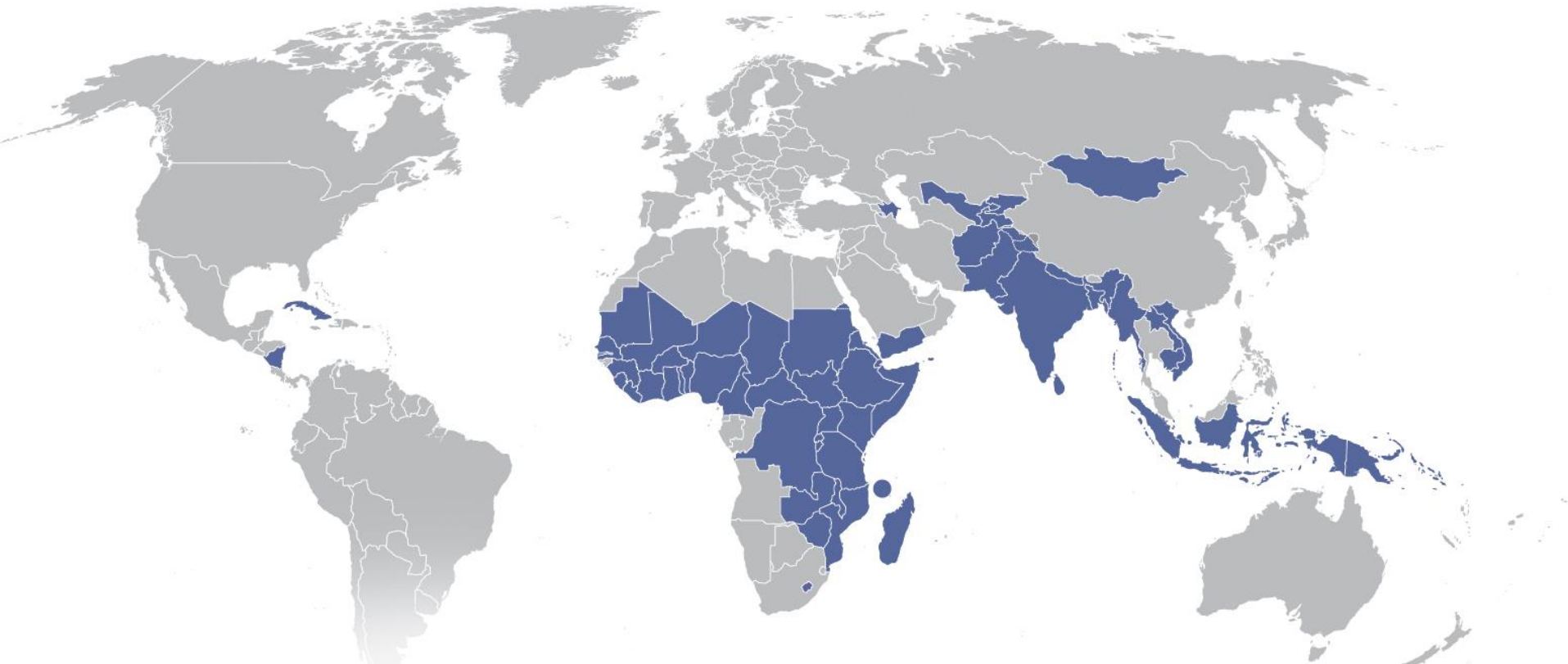
- Delayed introductions in all three countries
- Mixed experience with partnership
- Problems with timing and adequacy of funding (eg introduction grants)
- Lack of adequate monitoring, evaluation and supervision systems
- Weak coordination of social mobilisation efforts
- The introductions were better planned and managed than previous introductions in the three countries
- High demand for pneumococcal vaccines among communities and caretakers
- Improvements in GAVI's CRO model noted and appreciated

# New approach to grant review



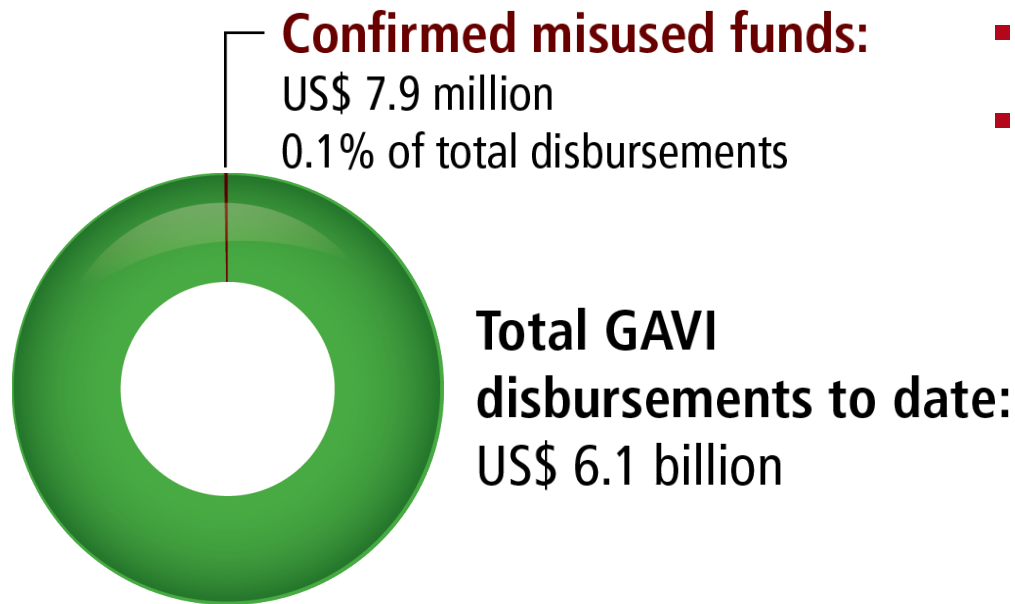
- High-level Review Panel replaces Monitoring Independent Review Committee (IRC)
- Composition: UNICEF, WHO, GAVI Secretariat and IRC representatives
- Labour intensive but higher level of Alliance engagement and accountability than ever before
- Decisions grounded in country context and owned by in-country stakeholders
- Piloted May 2014, will meet 3 times/year to align with country planning cycles
- Process for new applications unchanged, via New Applications IRC

# Programme Fiduciary Oversight update (formerly known as TAP)



- 60 financial management assessments conducted in 58 countries
- 13 monitoring reviews and 7 cash programme audits conducted since 2013
- Since 2000, 8 cases of misuse identified – 7 investigations already concluded

# Putting it in perspective:



- 70% reimbursed so far
- All countries have agreed to reimburse confirmed misused funds.

# — New impact data and broader landscape

# New impact data: meningitis A

# 153 million people immunised

## Impact:

*Number of men A cases:*

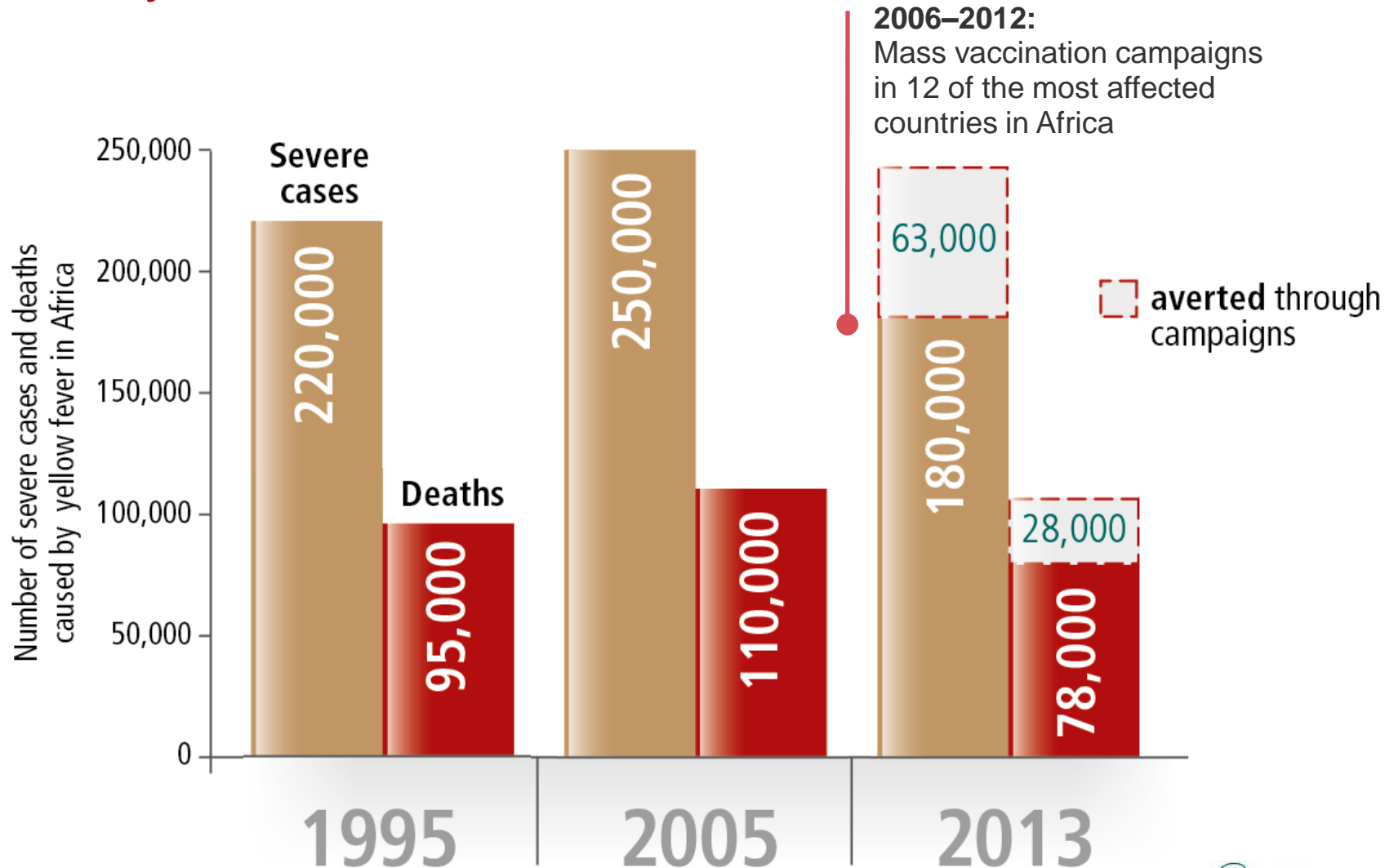
	2008	2012	2013
Niger	842	0	0
Burkina Faso	156	0	0
Mali	16	0	0

Source: Meningitis A Conjugate Vaccine  
Immunization Campaign. Joint WHO/UNICEF  
Progress Report January to December 2013.





# Vaccination campaigns reduce burden of yellow fever in Africa



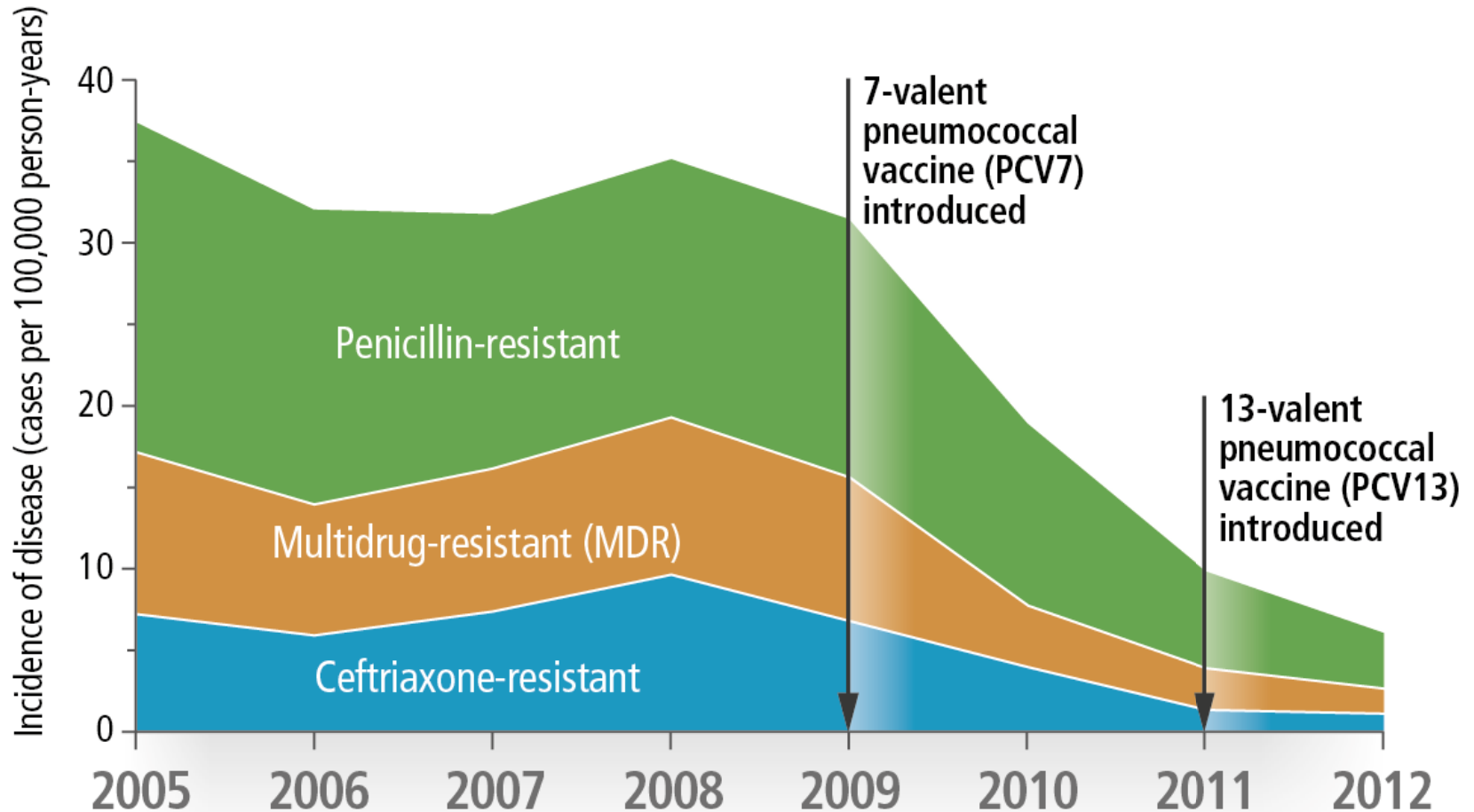
Source: Garske T, Van Kerhove MD, Yactayo S et al. Yellow Fever in Africa: Estimating the Burden of Disease and Impact of Mass Vaccination from Outbreak and Serological Data. *PLoS Medicine*, 6 May, 2014.

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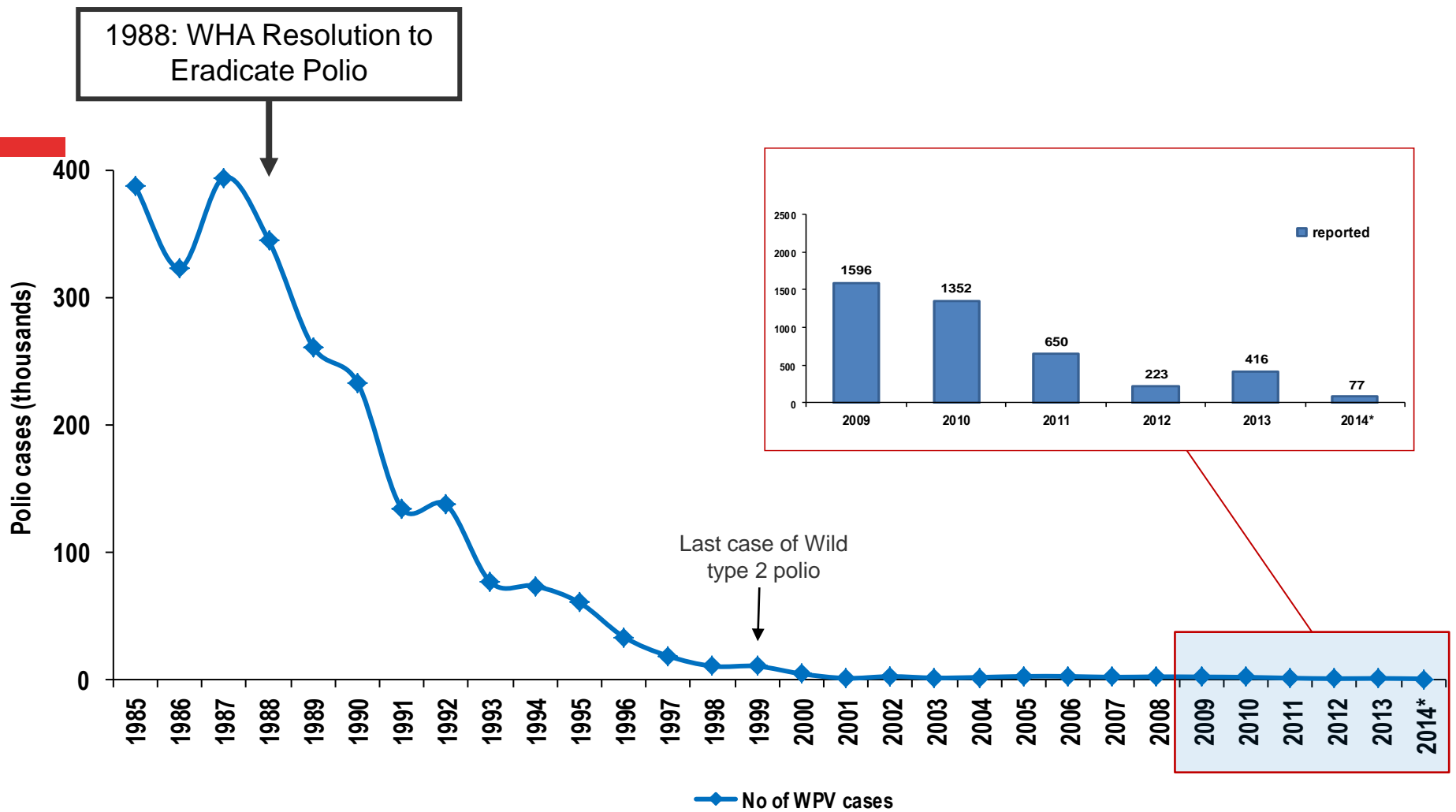


# Vaccines reduce antibiotic resistance

*Incidence of antibiotic-resistant invasive pneumococcal disease in children < 2 years of age in South Africa*

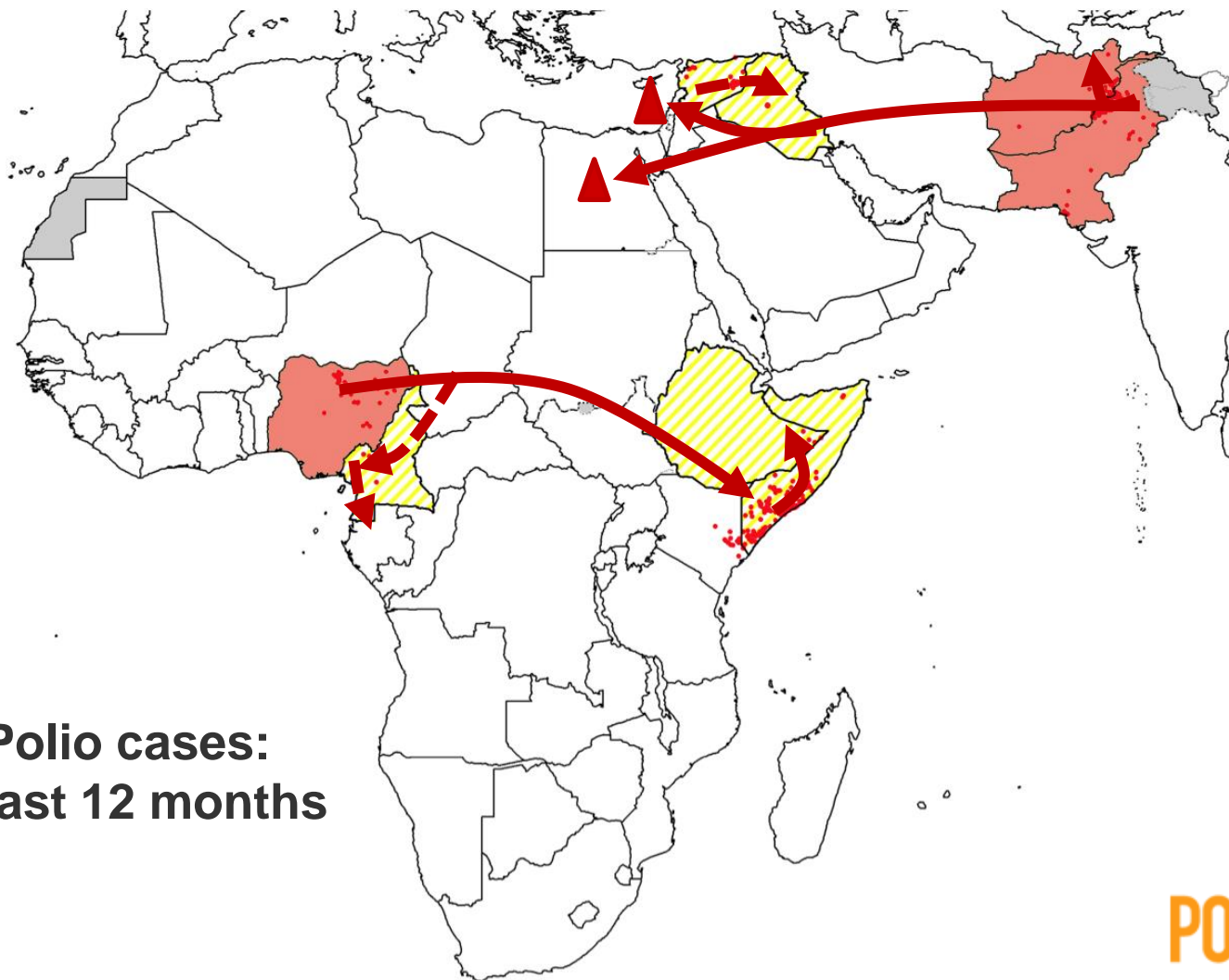


# Wild polio cases, 1985-2014\*



\* Source: WHO/Polio database, data as of 14 May 2014

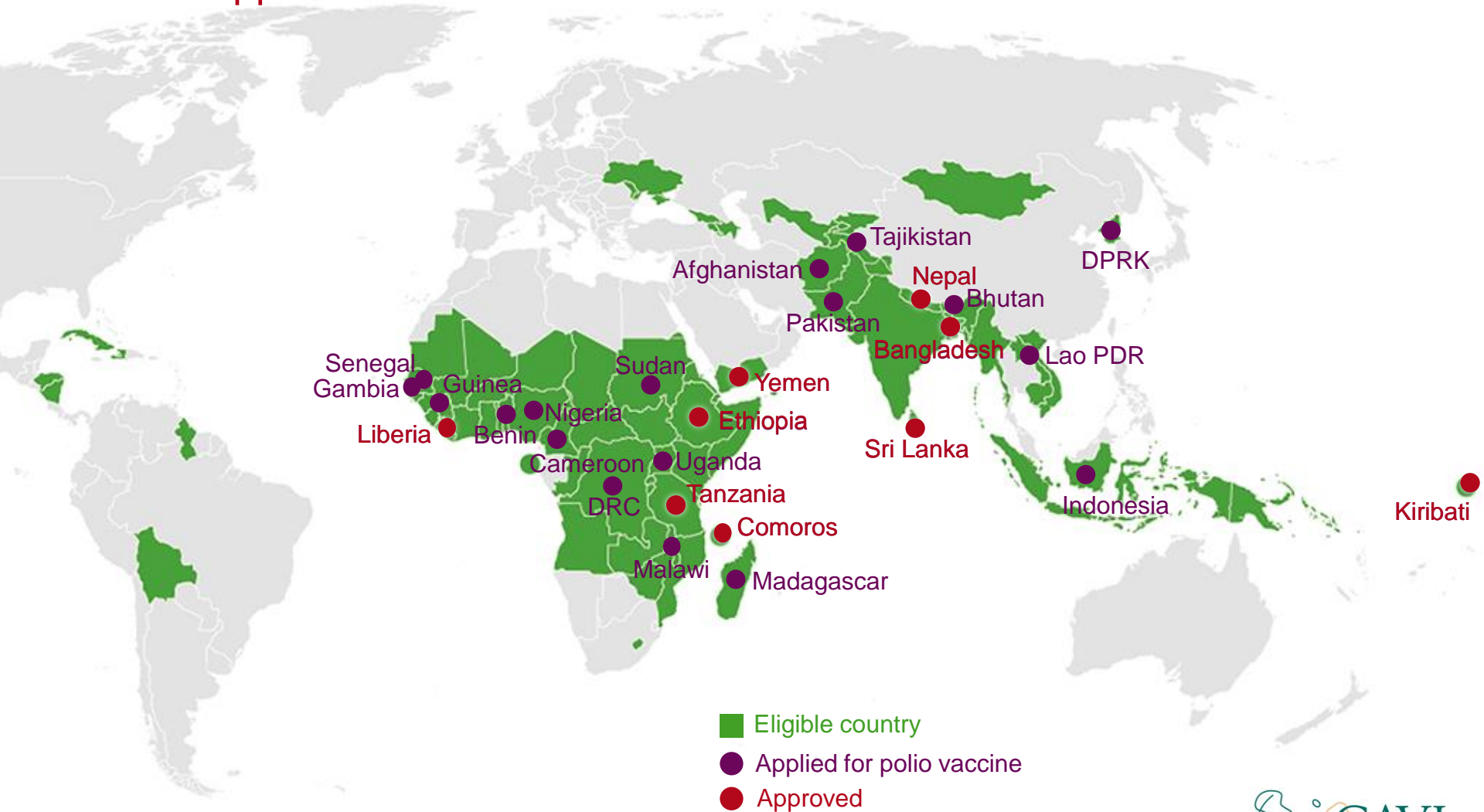
# Polio – endemic country reductions but virus export outbreaks



# 27 countries applied for IPV as of May 2014

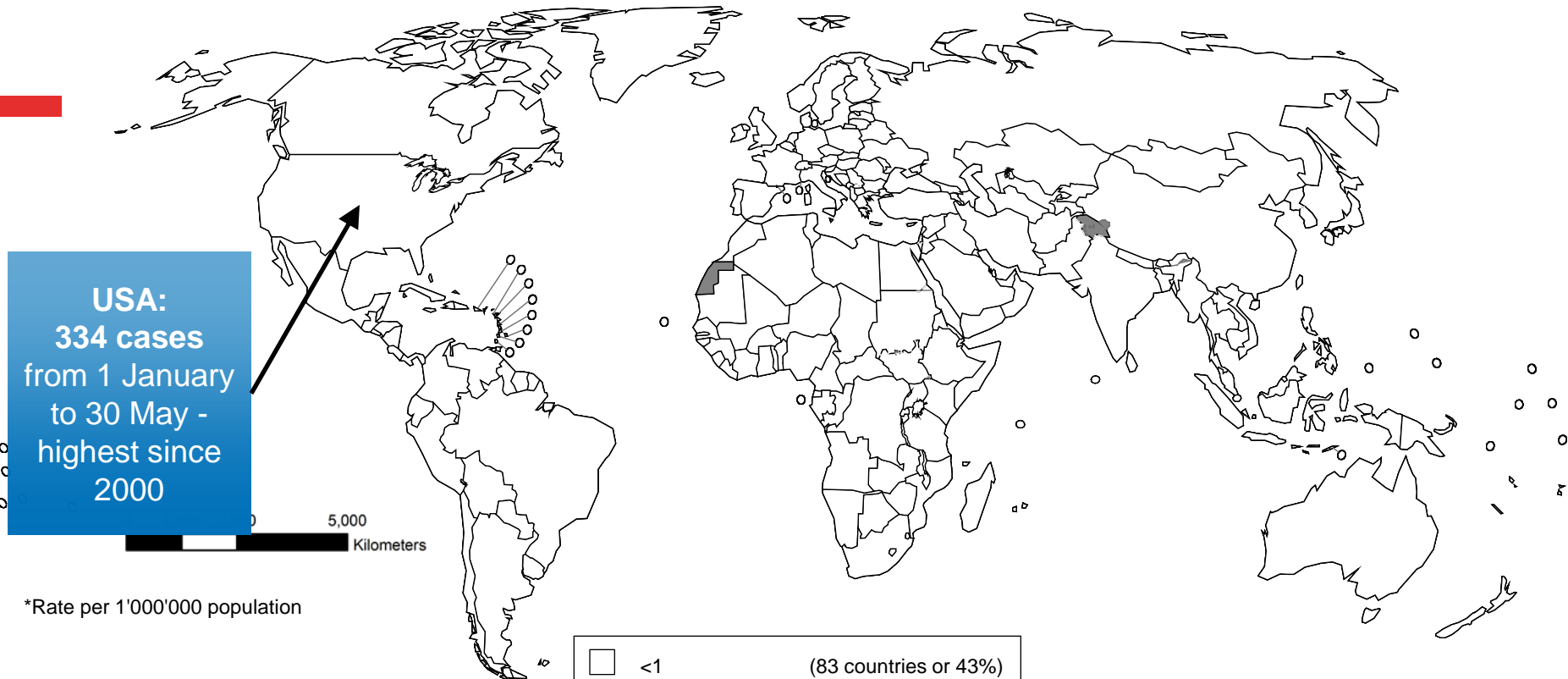
38% of GAVI countries applied in < 5 months,

9 approved in the first round



# Reported measles incidence rate

April 2013 – March 2014



**USA:**  
334 cases  
from 1 January  
to 30 May -  
highest since  
2000

5,000  
Kilometers

\*Rate per 1'000'000 population

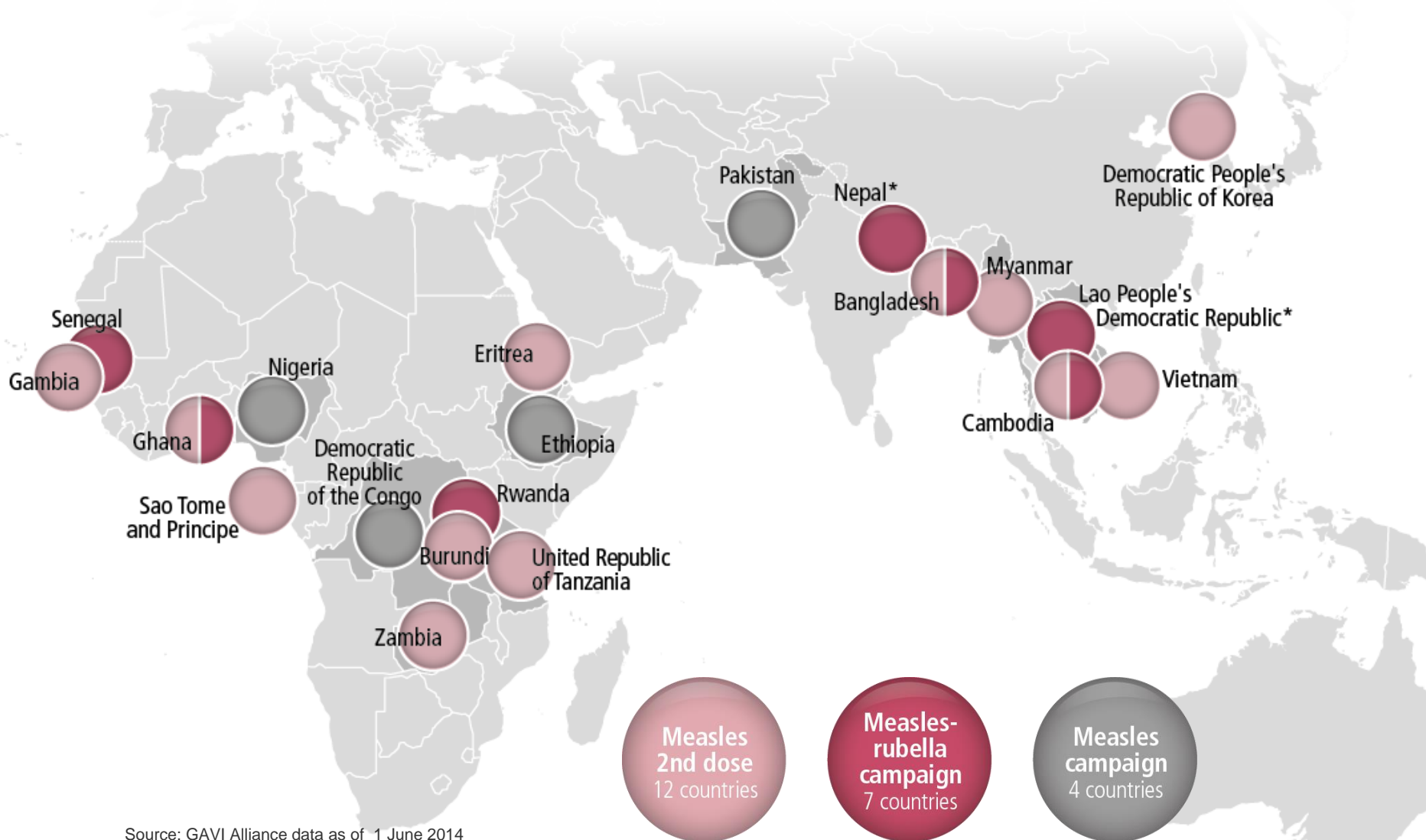
	<1	(83 countries or 43%)
	≥1 - <5	(30 countries or 15%)
	≥5 - <10	(11 countries or 6%)
	≥10 - <50	(42 countries or 22%)
	≥50	(13 countries or 7%)
	No data reported to WHO HQ	(15 countries or 8%)
	Not applicable	

Data source: surveillance DEF file  
Data in HQ as of 5 May 2014

The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted lines on maps represent approximate border lines for which there may not yet be full agreement. ©WHO 2014. All rights reserved.



# GAVI-supported measles and measles-rubella programmes have reached 20 countries



Source: GAVI Alliance data as of 1 June 2014

\*GAVI supported introductions into the routine immunisation system through vaccine introduction grants



# Challenges



# Priority challenges



# Reaching the unreached: definitions matter



**139** million children

100% of the world's surviving infants

# Reaching the unreached: definitions matter



Nearly **10%**  
of the world's  
children are  
unimmunised  
with any vaccine

# Reaching the unreached: definitions matter



17%

of the world's children are under-immunised with 3 doses of DTP vaccine

# Reaching the unreached: definitions matter



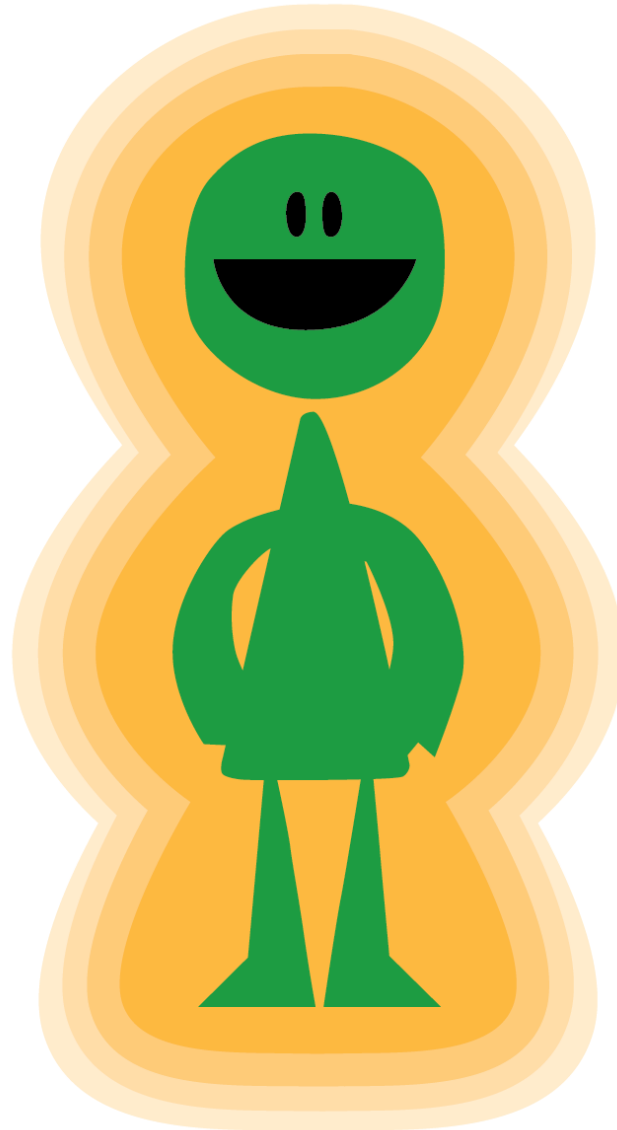
Over **95%**  
of the world's  
children are  
under-immunised  
with the 11 vaccines  
recommended  
by WHO for  
universal use

Less than **5%**  
of the world's children  
are fully immunised today

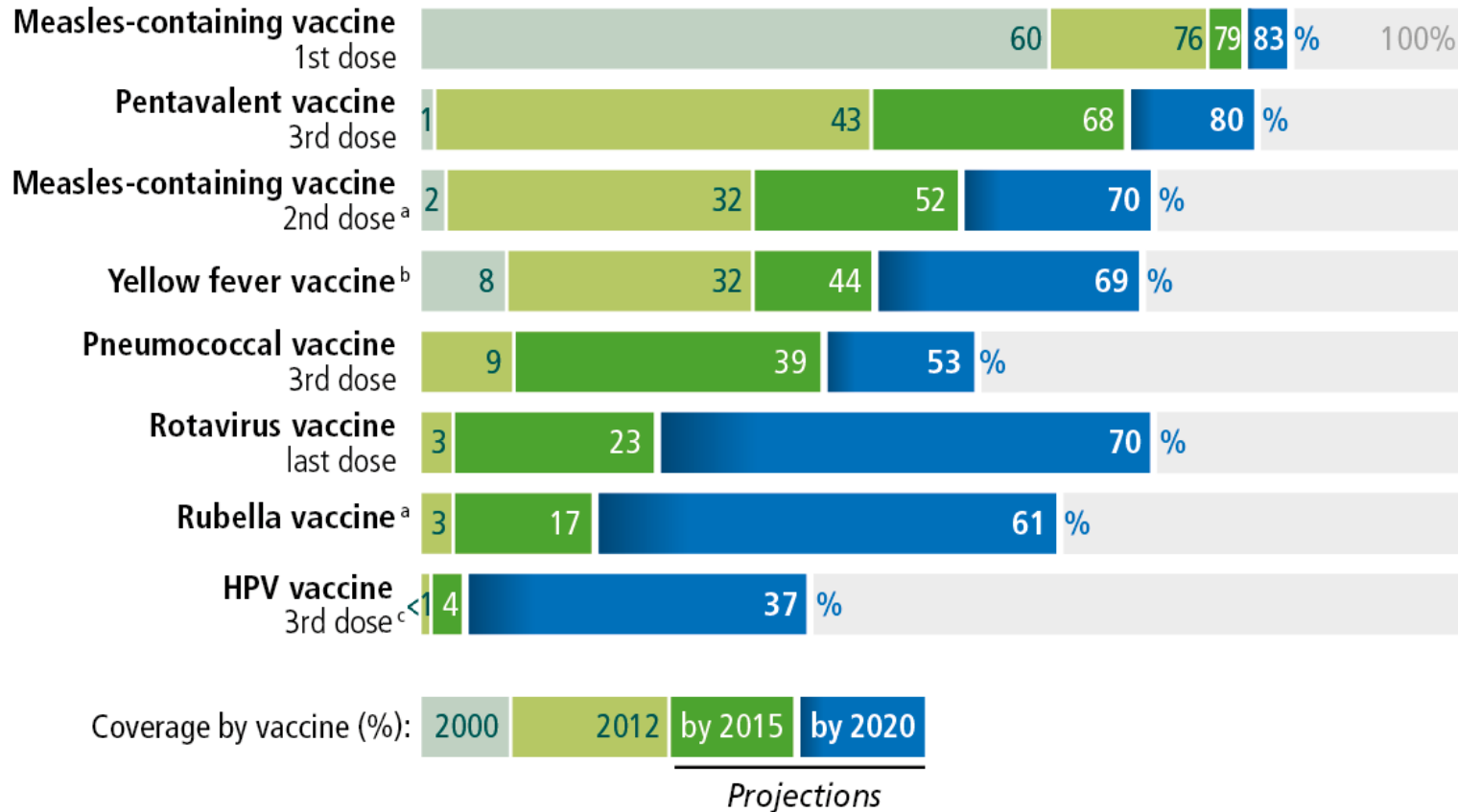
Note: coverage estimates refer to routine immunisation only. Sources: WHO/UNICEF national coverage estimates, World Population Prospects: The 2012 Revision



Where we want to be:  
the fully protected child



# Closing the immunisation gap: vaccine coverage in GAVI-supported countries by 2020

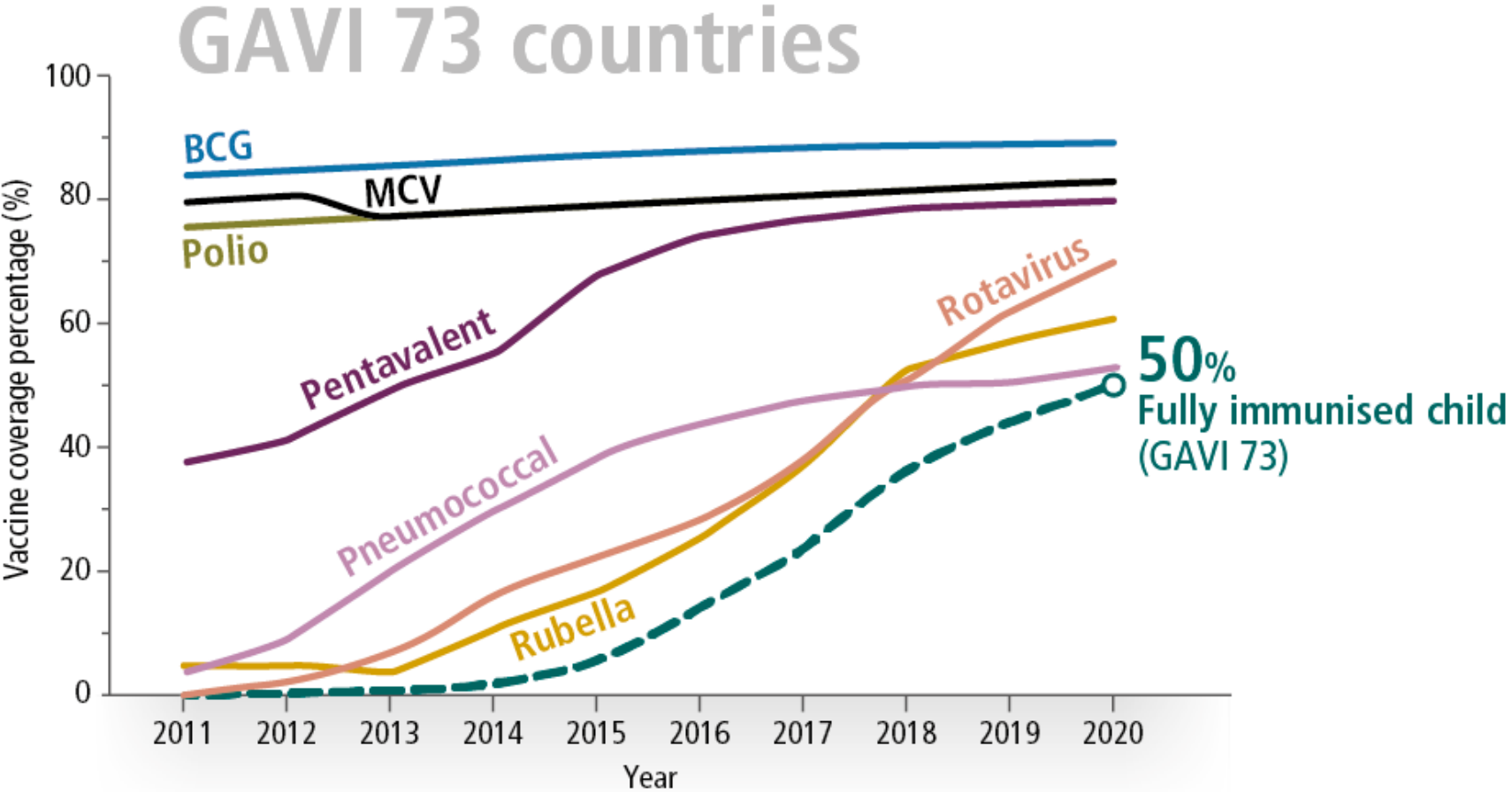


<sup>a</sup> 2012 coverage estimates are based on country official reported figures.

<sup>b</sup> Target population and coverage estimates are based on 32 yellow fever-endemic GAVI-supported countries in Africa.

<sup>c</sup> Target population for HPV3 is 9-13 year old girls, 2012 coverage estimates derived from SDF projections about scale-up.

# Investment opportunity: half of all children in GAVI countries fully immunised by 2020



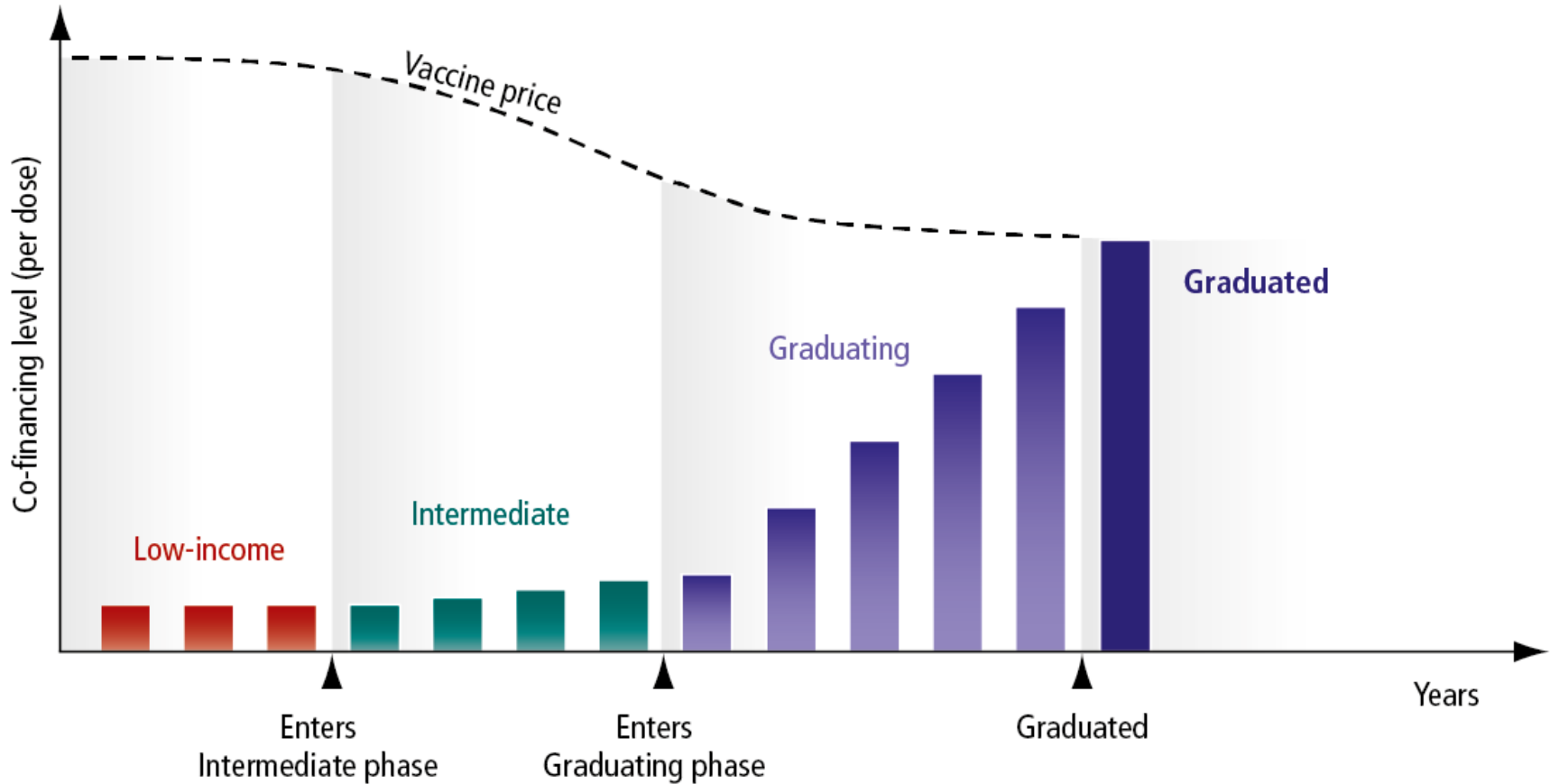
Source: Preliminary GAVI projections based on WHO and UNICEF coverage estimates and Strategic Demand Forecast version 9.

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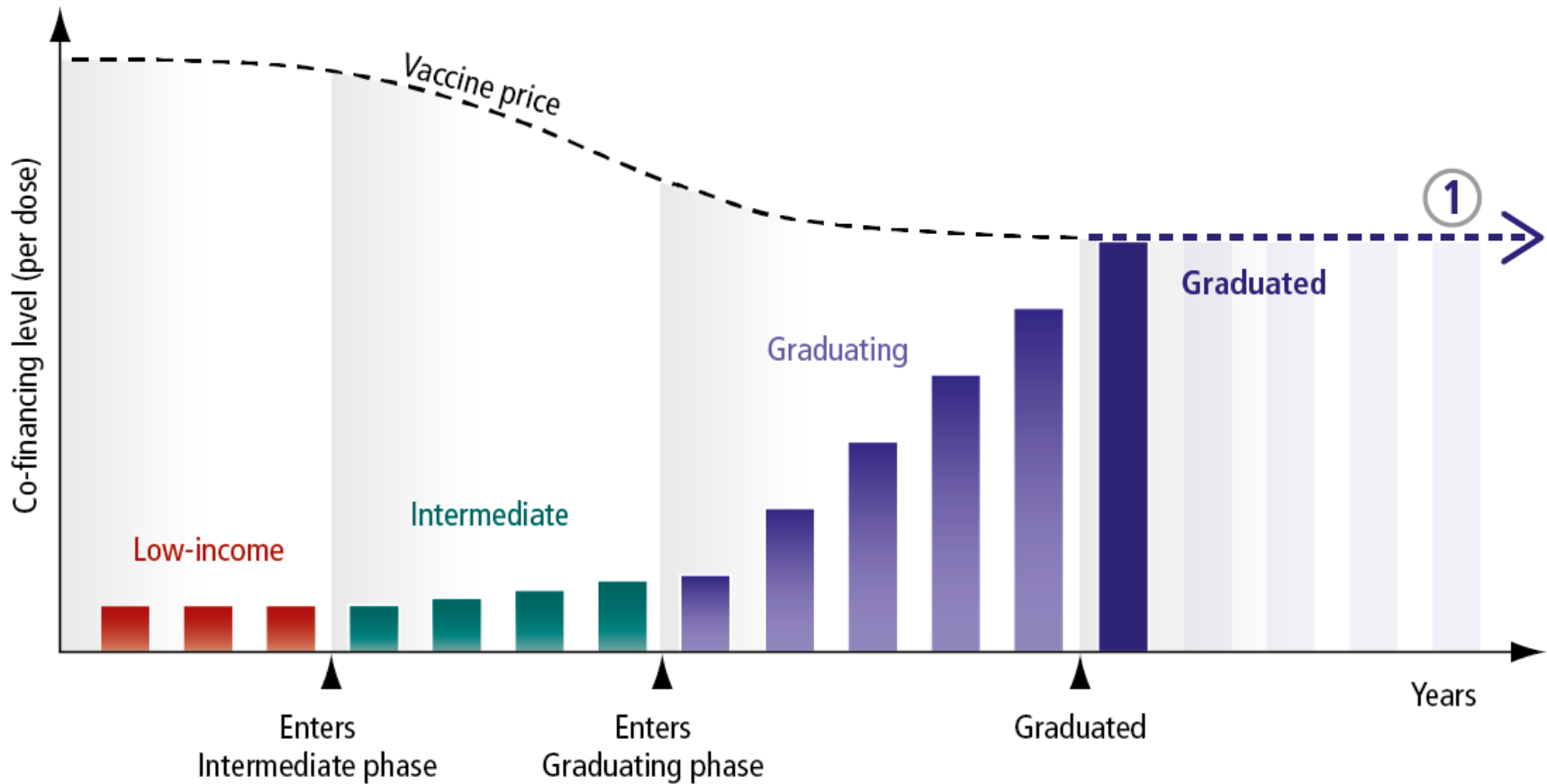




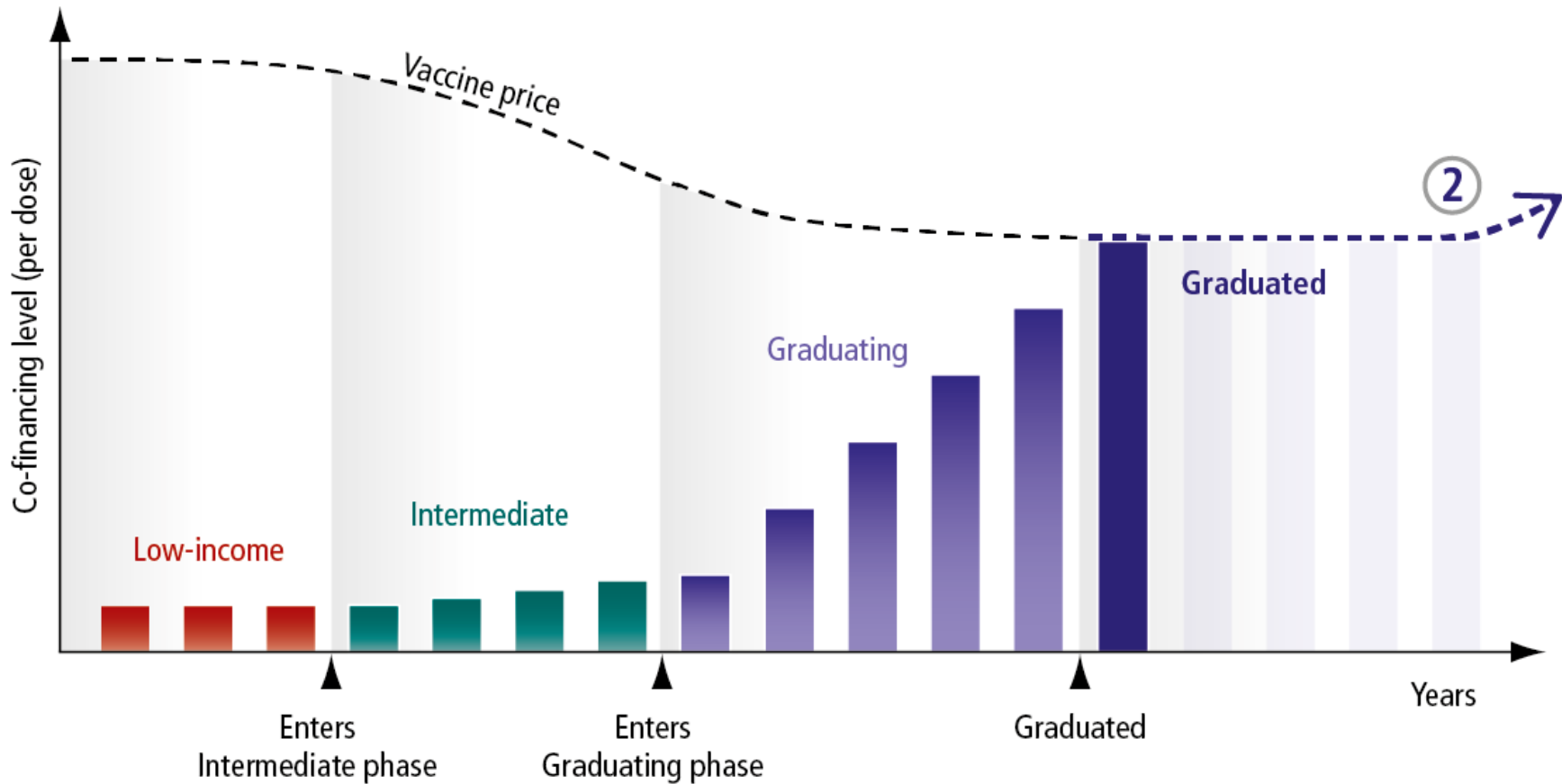
# What happens after graduation?



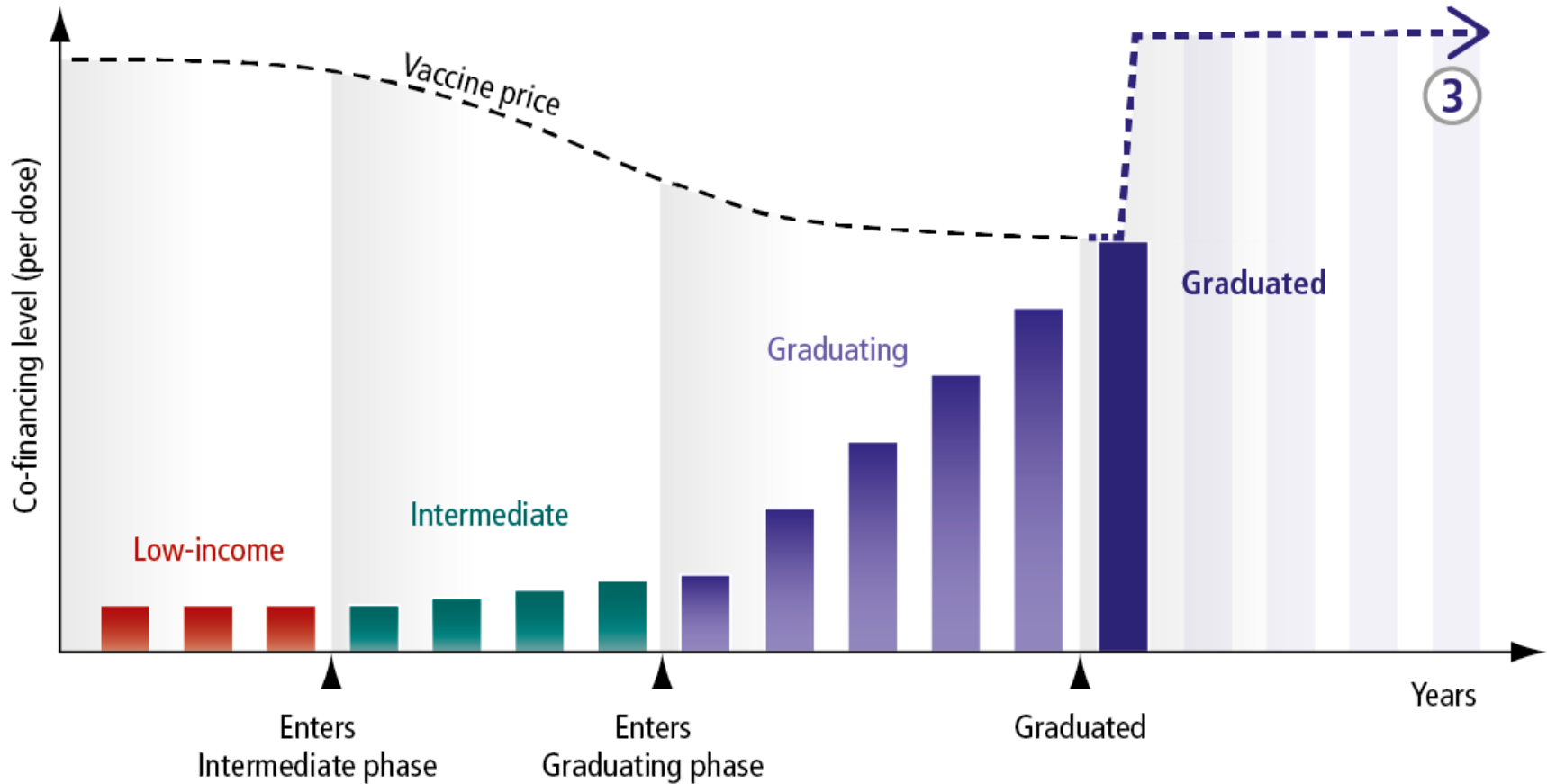
# What happens after graduation?



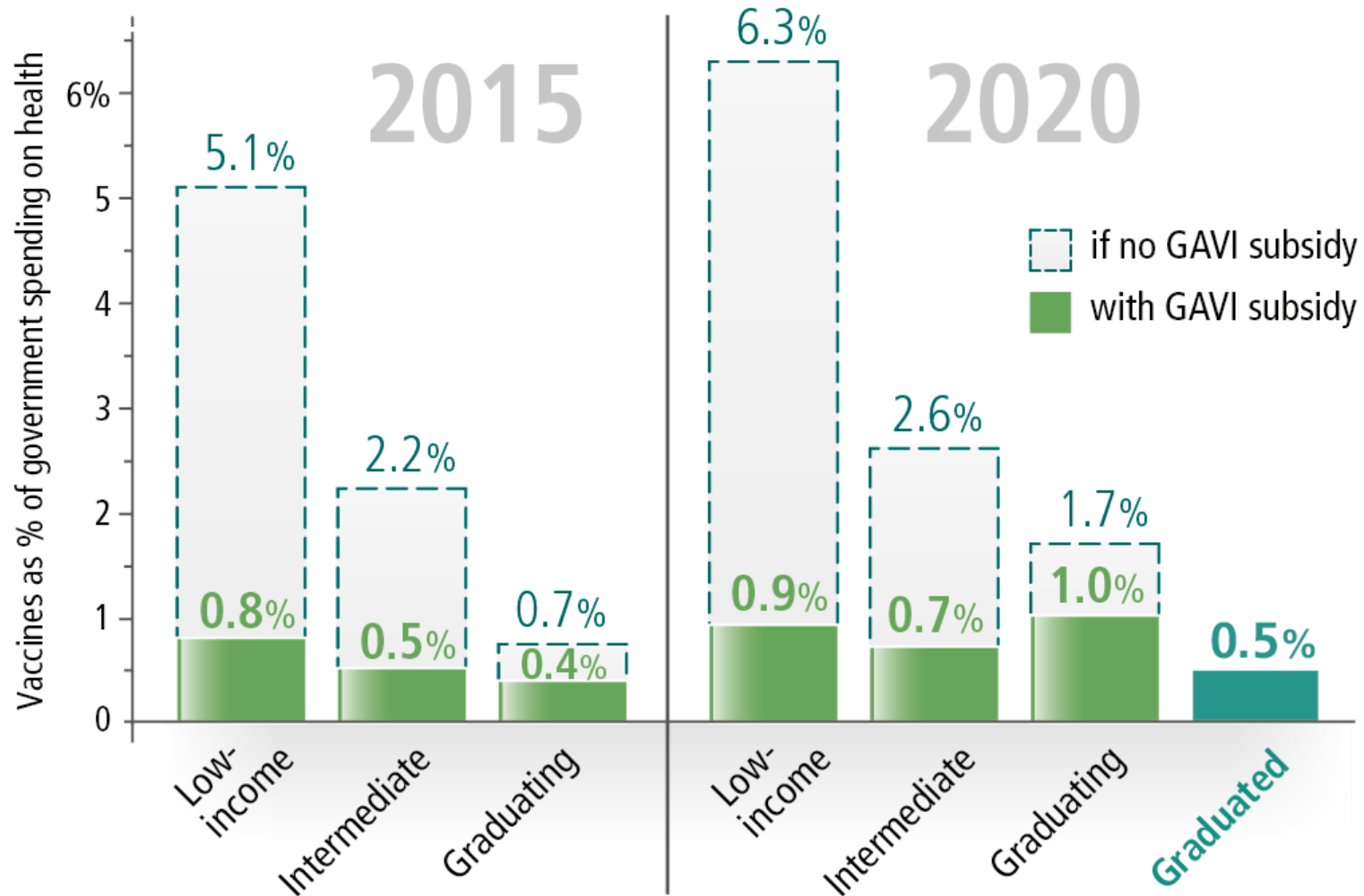
# What happens after graduation?



# What happens after graduation?



# Affordable = sustainable: vaccines as percentage of government spending on health



Note: Vaccines for routine immunisation only. India, DPR Korea, Somalia and Zimbabwe excluded from analysis. Sources: World Bank/ WHO National Health Accounts/ GAVI Demand Forecast, data as of November 2013.

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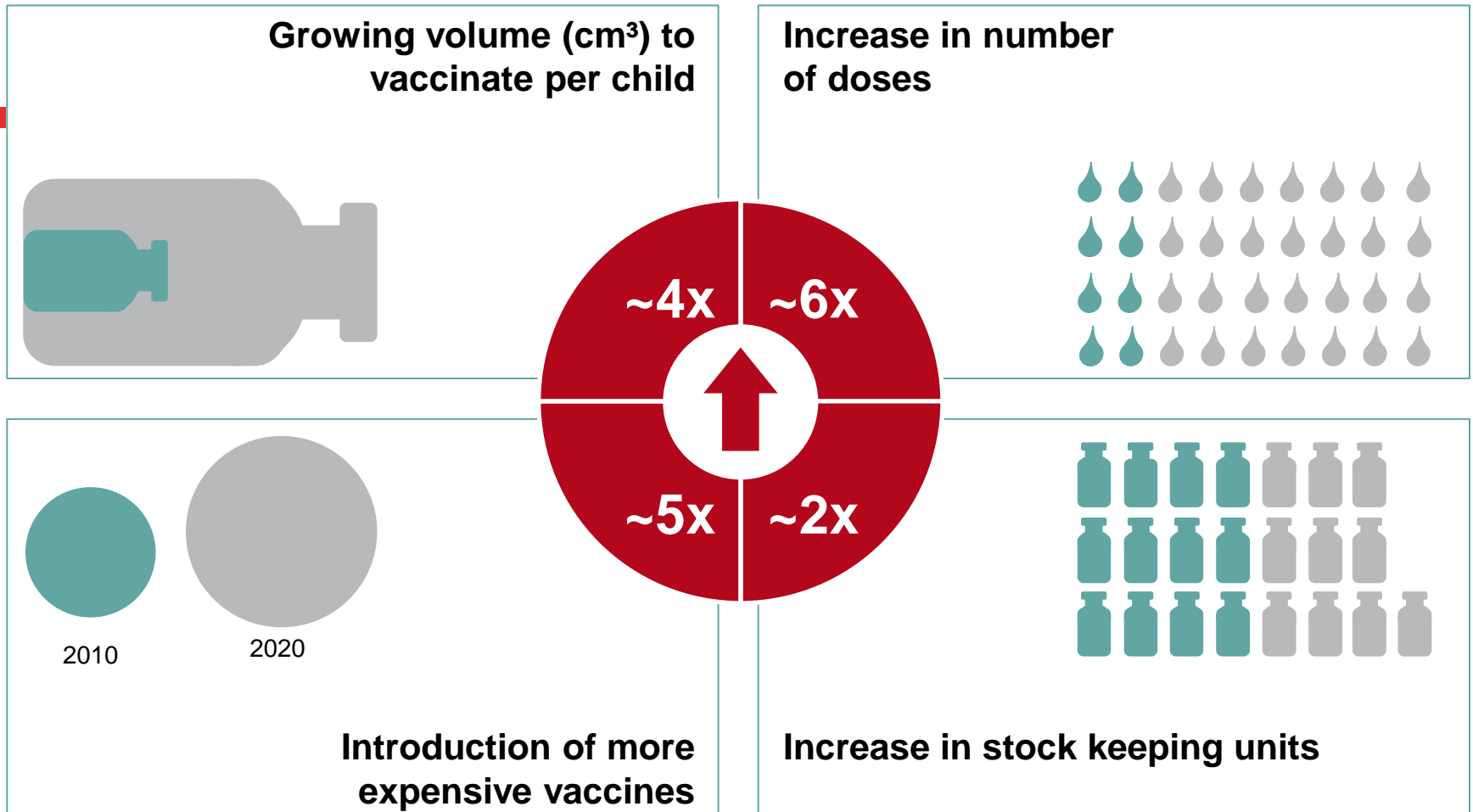
# GAVI support for access to appropriate pricing for GAVI graduates and LMICs

- The GAVI Alliance Programme and Policy Committee requested the Secretariat, working closely with Alliance partners....
- .....to conduct consultations and analyses to develop proposal(s) for a pooled procurement facility. This may include tiered pricing, a revolving fund, demand guarantees...
- .....would apply to GAVI graduated countries and potentially to non-GAVI lower middle income countries.....
- Requested that a technical briefing session be held before the June 2014 Board meeting.

# Data quality and availability – improvements under way

- New HSS application guidelines require countries to:
  - have routine mechanisms to independently assess quality of administrative data and track changes in data quality over time
  - have at least two household surveys every five years to assess immunisation coverage and equity
  - budget for an end-of-grant evaluation. Countries are also encouraged to budget for a mid-term evaluation.
- 10 data quality assessments concluded, more than 10 in pipeline

# Challenge to the immunisation supply chain: higher volumes, doses and vaccine cost



Supply chain requirements

2010 2020

Note: All figures relate to GAVI-funded vaccines

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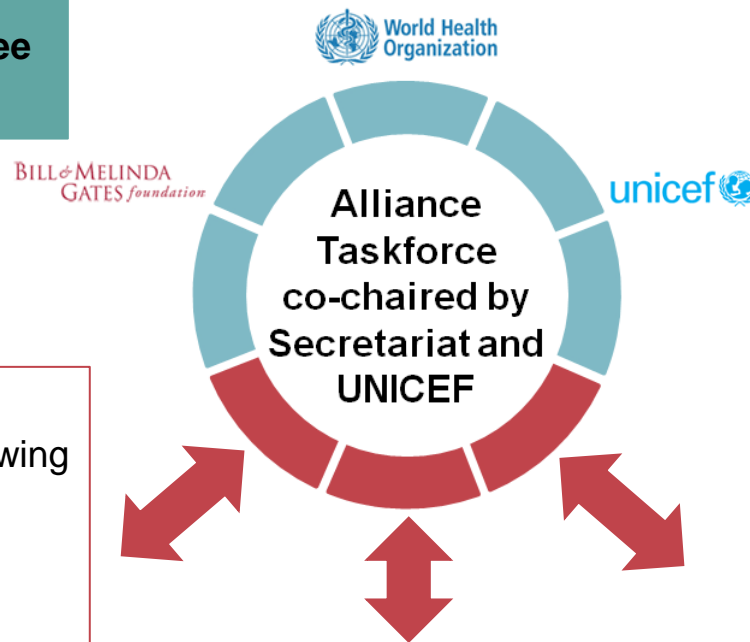




# Supply chain strategy developed in a collaborative Alliance process

Review of strategy in eight Steering Committee workshops

Consultations with PPC and board members



## Countries

- Baseline analysis drawing on discussion with 25 country level experts
- Surveyed >25 EPI managers
- Presentations at regional EPI managers meetings
- Direct consultations

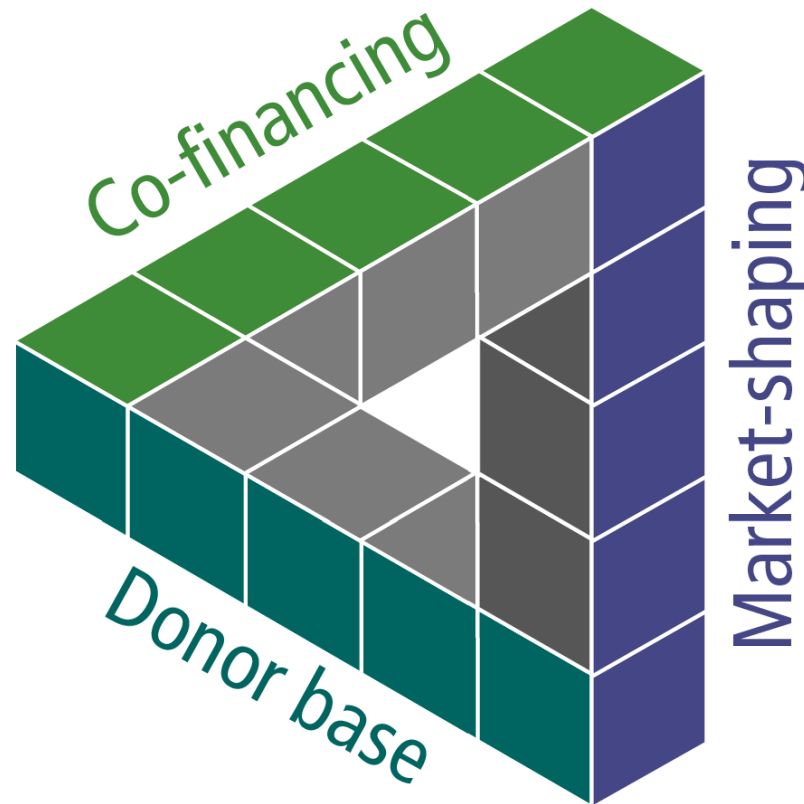
## Private sector/other partners

- Consulted on strategy with ~35 private sector and other partners
- Presentation at World Vaccine Congress

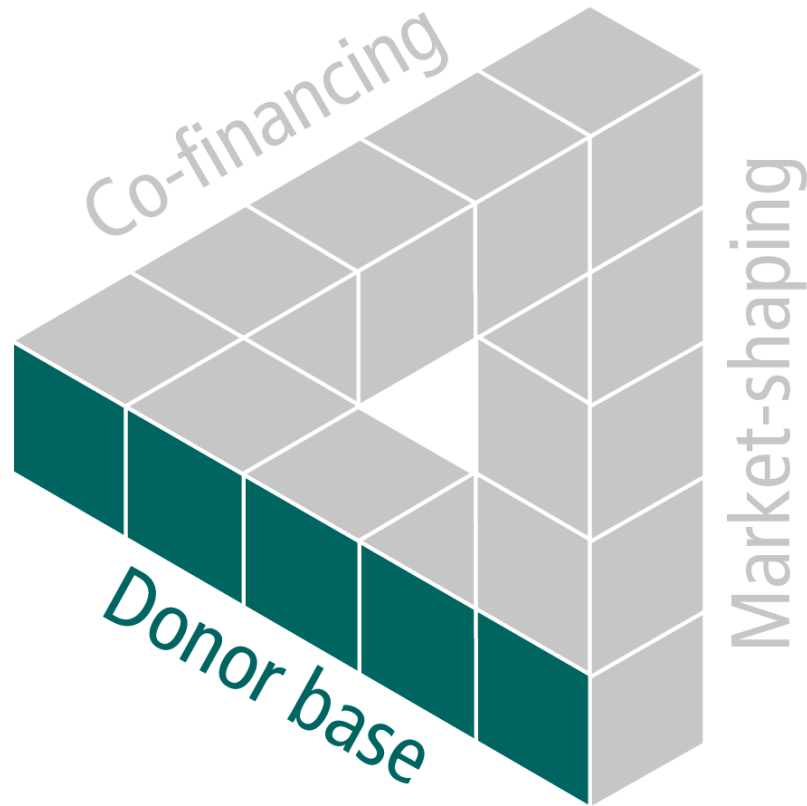
## Global health community

- 67 members actively involved through working groups
- Presentation at workshops and conferences

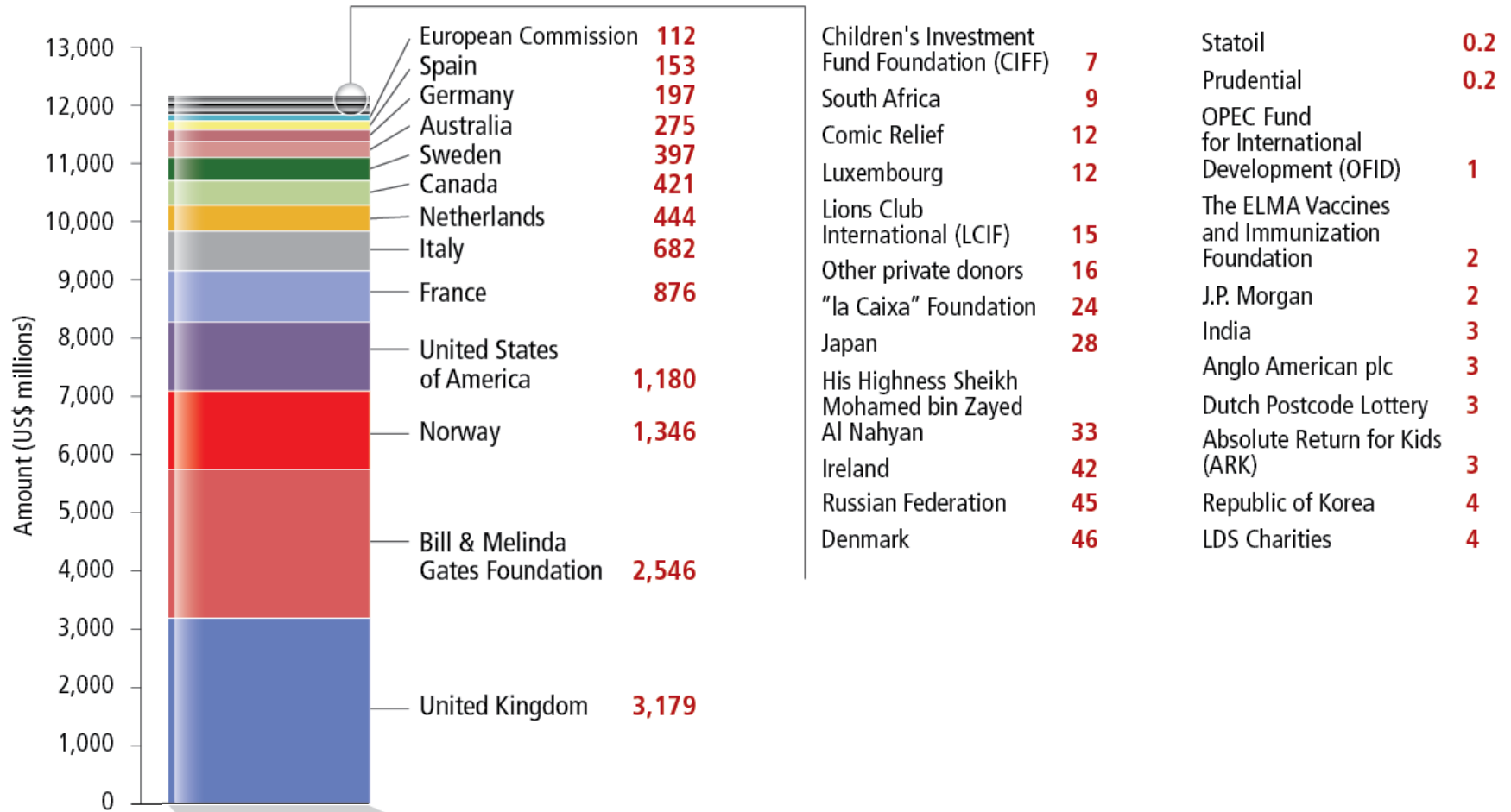
# GAVI's resource mobilisation model



# Donor base



# 2000–2015 donor contributions and pledges to GAVI: US\$ 12.1 billion



\* Comprised of total contributions received and outstanding pledges to GAVI on a proceeds basis as of March 31, 2014  
Total figures above do not include in-kind contributions.

# New pledges since the November Board meeting

## Sovereign donors:

- **EC:** new pledge of **€175m** (US\$ 242.3m) for 2014–2020
- **Germany:** additional pledge of **€8m** (US\$ 11.1m) for 2014
- **Canada:** new pledge of **CA\$ 40** (US\$ 36.7m) for 2014
- **India:** new pledge of **US\$ 4m** for 2013–2016

## Private sector donors:

- **Comic Relief:** new pledge of **£3m** (US\$ 5m) for 2014
- **Children's Investment Fund Foundation (CIFF):** new pledge of **US\$ 25m** for 2014–2018
- **ELMA Vaccines and Immunization Foundation:** new pledge of **US\$ 2m** for 2014
- **Alvaro and Ana Sobrinho Foundation (A&A Foundation):** new pledge of **US\$ 1.5m** for 2013–2015

# New commitments to support human papillomavirus and inactivated polio vaccines

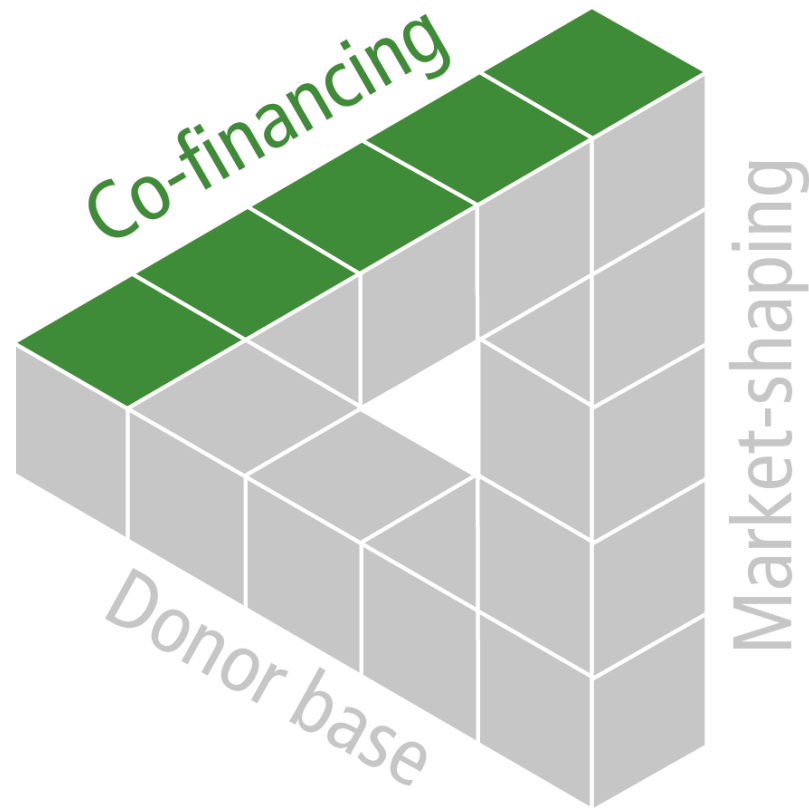


*Norway: US\$ 190 million contribution to IPV introductions*

*UK: US\$ 25 million to match CIFF support for HPV vaccine*

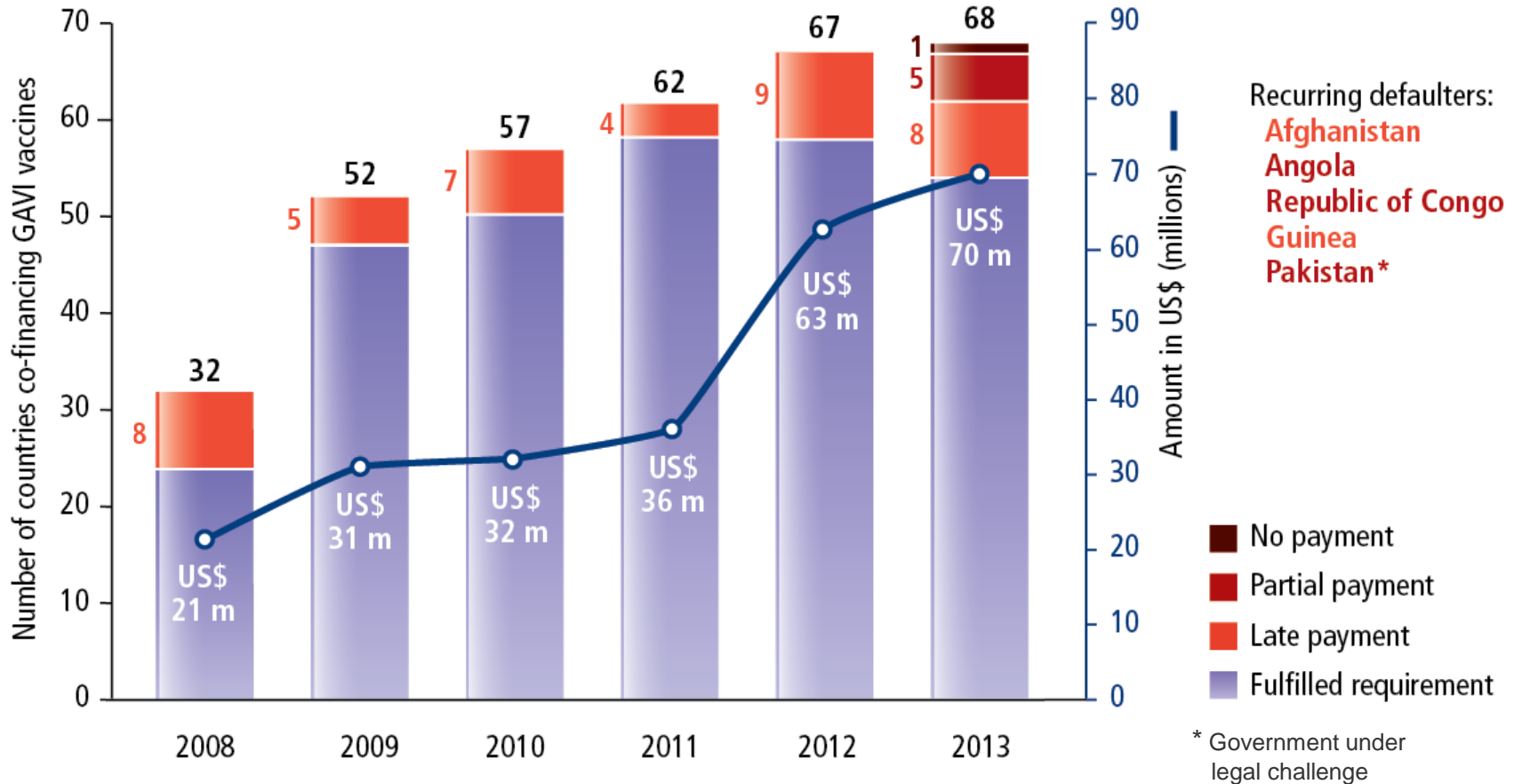


# Co-financing



# Co-financing: countries taking ownership

Source: GAVI Alliance



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Source: GAVI Alliance data as of June 2014





# Market-shaping



# GlaxoSmithKline freezes prices for graduating countries

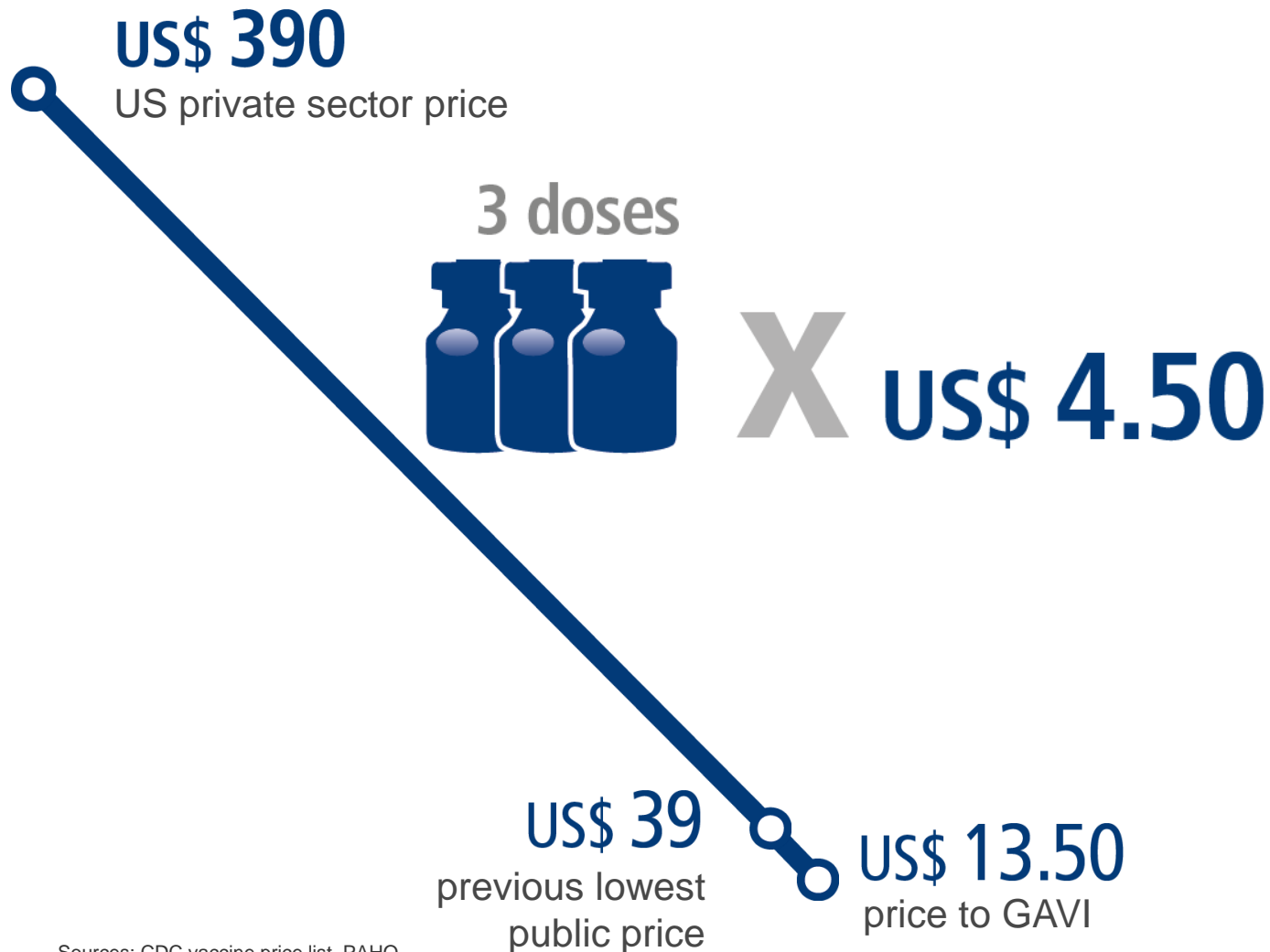


- Freezes prices for at least five years for all GSK vaccines: rotavirus, pneumococcal and HPV vaccines
- Calls on competitors to do the same
- Embraces tiered pricing
- Endorses GAVI model to maximise access

Sir Andrew Witty,  
CEO GlaxoSmithKline

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# Two-dose recommendation for HPV vaccine impacts cost and sustainability



Sources: CDC vaccine price list, PAHO revolving fund prices, UNICEF Supply Division

# Two-dose recommendation for HPV vaccine impacts cost and sustainability

2 doses

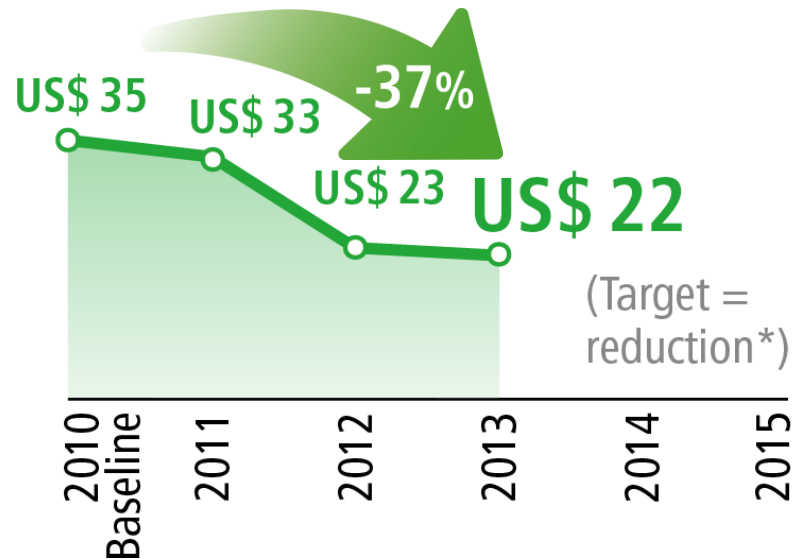


X US\$ 4.50

○ US\$ 9  
price to GAVI

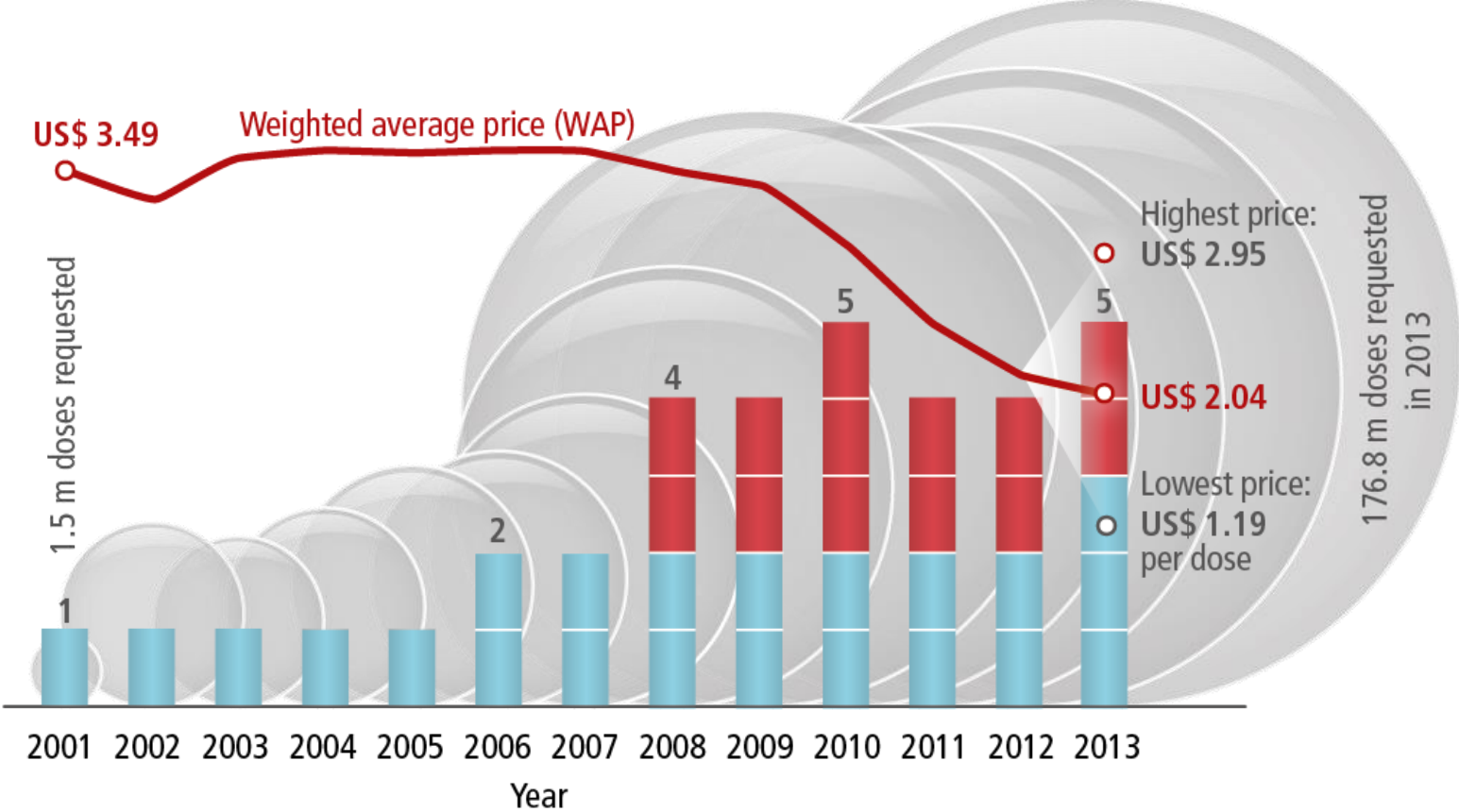
# Price of vaccine package continues to fall

**Change in the total cost to fully immunise a child with pentavalent, pneumococcal and rotavirus vaccines**  
Selected vaccine package price (US\$)



\* Future targets are not publicised to avoid setting a minimum price.

# Pentavalent vaccine: increasing volumes, growing number of suppliers, lower price



**Manufacturers from which GAVI procured vaccines:**  
■ based in low-/middle-income country  
■ based in high-income country

**Approved number of doses requested:**  
 1 million

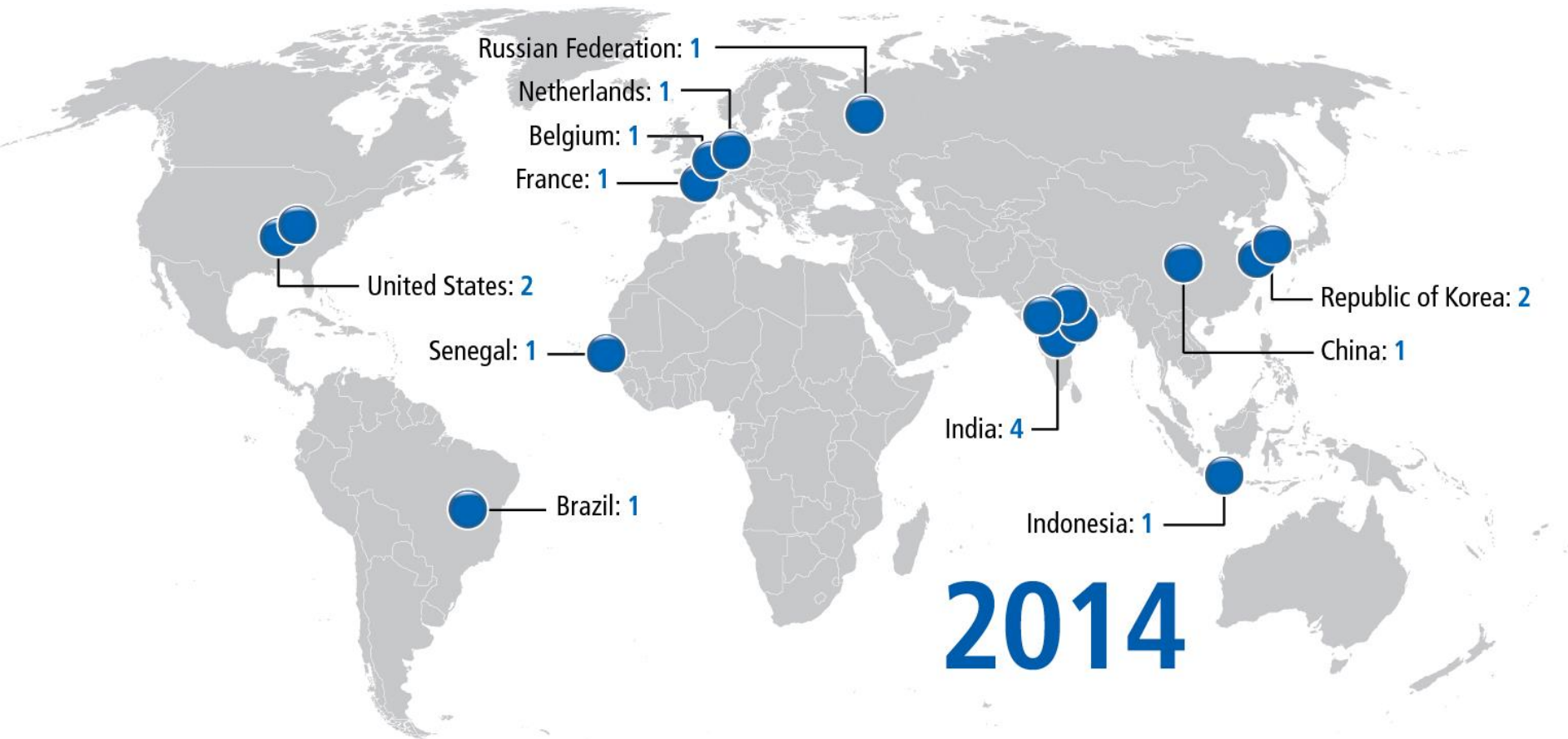
Sources: UNICEF Supply Division 2014, country annual progress reports 2012 (requested doses)



# Inactivated polio vaccine: new UNICEF tender brings down price

- Tender concluded in February
- Record low price of €0.75 (US\$ 1) per dose for GAVI-supported countries
- Middle-income countries can buy the vaccine through UNICEF at €1.49–2.40 per dose (US\$ 2.04–3.28)

# Vaccine production: greatest diversity ever of manufacturers of GAVI-supported vaccines



2014



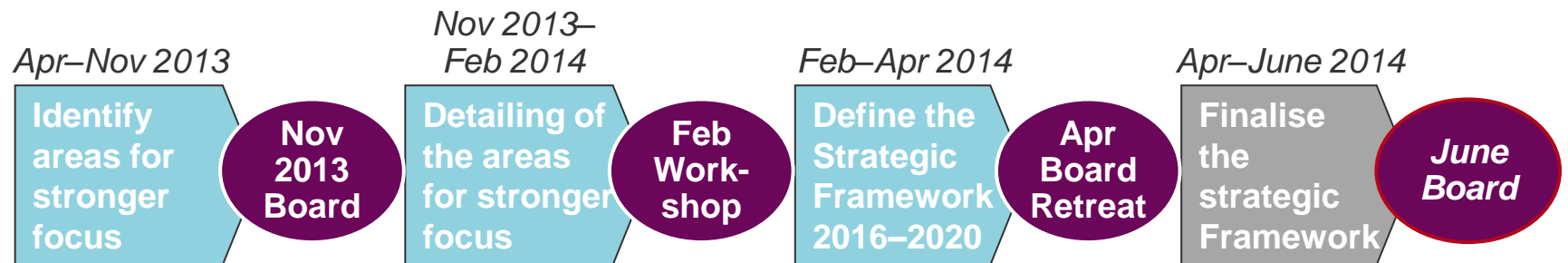


# Going forward

# GAVI Alliance Strategy 2016–2020: strategic goals defined

- Accelerate equitable uptake and coverage of vaccines
- Increase effectiveness and efficiency of immunisation delivery as an integrated part of strengthened health systems
- Improve sustainability of national immunisation programmes
- Shape markets for vaccines and other immunisation products

# GAVI Alliance Strategy 2016–2020: a broad and inclusive process



**Individual Board members** consultations (25+)

**3 Board teleconferences**

**Country** consultations (through WHO regional committee meetings)

**EPI managers and Special Advisers** 2 teleconferences\*

**CSO constituency** feedback (2 rounds + CSO consultation report)

**Public consultation** via online survey (80+ responses \*\*)

**Development partners** consultation through the MTR

Consultation with **Gates Foundation**

**Industry** consultations (IFPMA and DCVMN)

**WHO, UNICEF** technical teams

Consultations with **technical teams** (SG Management teams)

\* EPI managers and Special Advisers from Board-representative countries

\*\*Incl. feedback by some countries



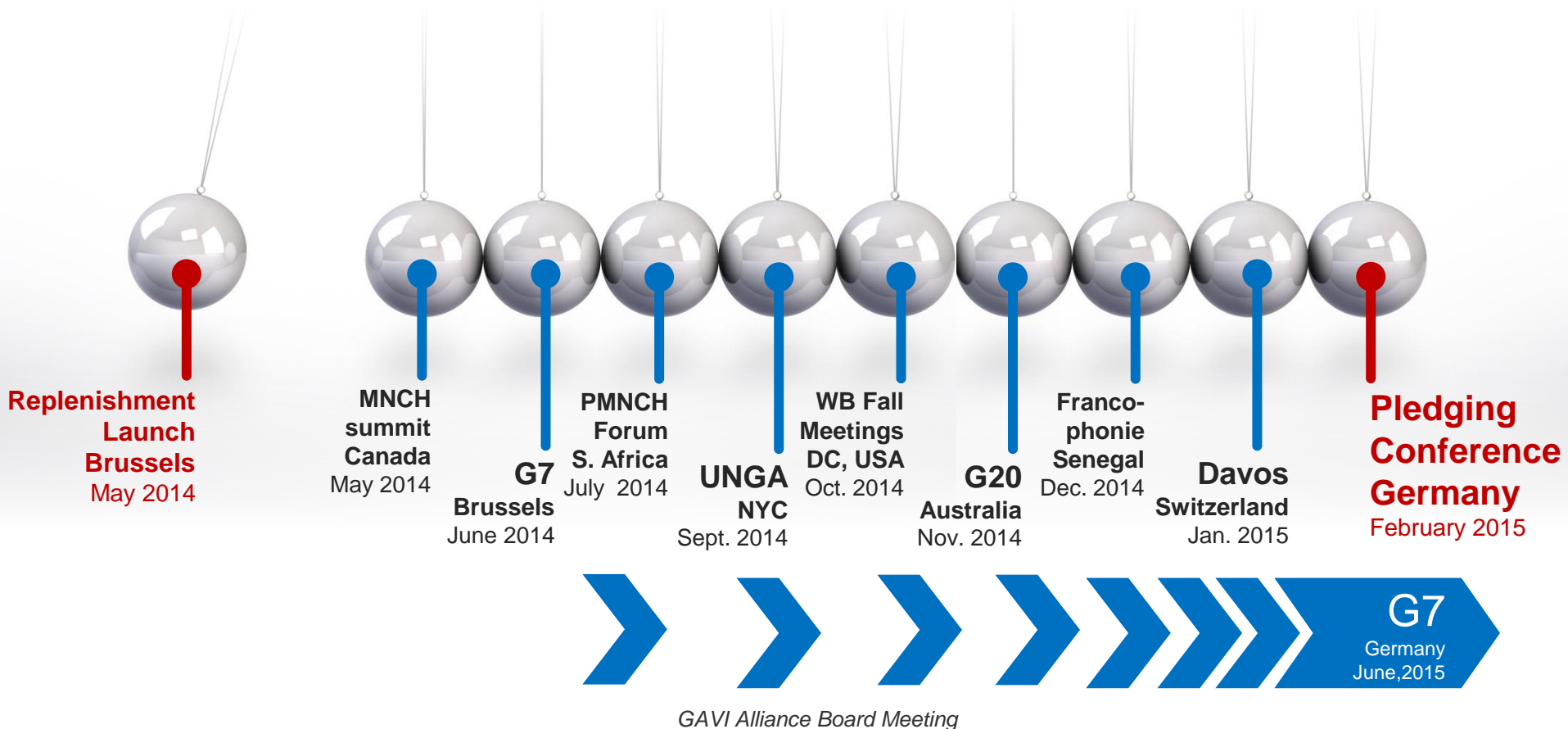
**2016-2020**

Investment  
opportunity

# Building strong momentum to Germany

## Select key moments

Culminating at GAVI pledging conference hosted by Germany in February 2015





*GAVI Alliance Board meeting  
18–19 June 2014*

SPORT  
RELIEF  
GAMES

Sainsbury's

SPORT  
RELIEF  
GAMES

START

SPORT  
RELIEF  
GAMES

Sainsbury's

1:136:59



GAVI  
ALLIANCE



SPORT  
RELIEF  
GAMES

Sainsbury's

SPORT  
RELIEF  
GAMES

SPORT  
RELIEF  
GAMES

SPORT  
RELIEF  
GAMES

Sainsbury's

SPORT  
RELIEF  
GAMES

SPORT  
RELIEF  
GAMES







KEY BUSINESS  
SERVICES  
OF CHARGE  
G VACCINATIONS

DRESSING -  
DISPENSARY -









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