

**Programme and Policy Committee (PPC) Meeting
4 June 2009
Washington, D.C.**

Participants

Committee Members : Sissel Hodne Steen (Chair), Joan Awunyo Akaba, George Bickerstaff, John Clemens, Suresh Jadhav, Rama Lakshminarayanan, Steve Landry, Ahmed Magan, Susan McKinney, Jean-Marie Okwo-Bele, Olga Popova, David Salisbury (non-voting), Aldo Tagliabue

Observers: Ondrej Simek, Anahit Tadevosyan

Secretariat: Helen Evans, Nina Schwalbe, Mercy Ahun, Lisa Jacobs, Carole Presern (for HSS), Craig Burgess (for HSS), Gian Gandhi (for Eligibility), Susie Lee

With regrets: Ashutosh Garg, Majid Al-Gunaid

Introduction and Review of Agenda

The Chair welcomed the Committee and introductions were made. She gave an overview of the agenda and noted that the Board acknowledged the hard work of the PPC.

1. Board Meeting Review

The Chair requested feedback regarding follow up on items discussed at the Board meeting, including expected engagement related to the Harmonising Health Systems architecture and funding (see bullet point 1 below)

Discussion:

- ***Resource mobilisation strategy:*** Resource mobilisation will affect the eligibility task team. This is something the eligibility task team is aware of and it is guiding the team in eligibility criteria.
- ***GAVI Alliance strategy:*** Concern was raised around the timeframe in shaping GAVI Alliance strategy for 2011-2015, which will require considerable engagement from the PPC. The Secretariat is asked to start examining this. Some process issues regarding the development of the strategy include allowing enough time for constituency representatives to obtain feedback from their respective colleagues and aligning priorities with SAGE.
- ***Updates around confidentiality and conflict of interest policy:*** The Board approved a conflict of interest policy at its meeting, with which all PPC members need to familiarise themselves. The Governance Committee is working on a confidentiality policy for presentation at the November Board meeting.

2. Engagement on Harmonising Health Systems Funding (Carole Presern, Craig Burgess)

The Chair gave a brief overview of the discussion at the board meeting on HSS and noted GAVI's role in the global health architecture and its role in the H8. The Board overall had welcomed the

work of GAVI and GAVI engagement in harmonising health systems funding and asked to be presented with options on how GAVI should effectively engage taking into account its organizational mission.

Carole Presern gave a presentation summarizing the document, which had been provided, and updating the PPC on work related to date on harmonising health systems funding. She noted that the intention is not to “reinvent the wheel” and acknowledged the existing processes. Carole noted that iterative information from the high level task force on innovative financing and IHP+ ministers review will be provided to the PPC and requested guidance on three issues in particular:

- Common monitoring and evaluation
- Common appraisal
- What a common funding platform will look like.

General discussion:

- **General:** Removing HSS barriers to reach the unimmunised is a high priority. The main questions are around the ‘what’ and the ‘how’ of GAVI’s engagement. Financial implications and prioritisation are important to keep in mind while conducting the work around HSS.
- **Monitoring and results:** HSS has always been linked to GAVI goals: improving immunisation coverage and addressing MDG 4. A tracking study and evaluation are in progress. As HSS is a relatively recent programme, it is too early to expect significant results, but it is important that any results are factored into the work that will be done in preparation for the November Board meeting. The Committee agreed that ‘building on experiences’ of HSS is more appropriate language than ‘building on success’.
- **Mapping of HSS actors and GAVI role:** GAVI began investing in health systems to help countries overcome health systems bottlenecks, however there are many players in the field. The Secretariat will map out the various actors on HSS harmonisation, including the GFATM, WHO, World Bank, and the respective committees in these other organisations that may be analogous to the PPC. The PPC requested that the Secretariat also include in their effort to mapping of investments in health systems investments by some bilateral programmes, such as the Presidents Emergency Plan on AIDS Relief (PEPFAR). It was noted that by mapping the actors and restating HSS objectives, GAVI can find its space in the HSS harmonisation discussion.
- Some PPC members stated their view that there are many donors engaged in HSS and that GAVI HSS investments are relatively small compared to other donors (e.g. US). It was pointed out that there will be 25 agencies represented at a harmonisation meeting at the end of June¹.

Options on how the PPC will work on HSS

The PPC discussed how they will engage on this issue and guide the Board.

- The current HSS task team has been critical in guiding the design and implementation of the existing GAVI HSS investment, and lessons learned from the HSS task team will be incorporated into the ongoing work. Looking to GAVI’s future role in HSS, the PPC will

¹ Health Systems Strengthening: a technical workshop. 25-27 June, Washington DC

require additional skills and expertise related to health systems, health architecture and policy/strategy.

- The Chair will work with the Committee and the Secretariat to identify a number of special short-term advisers to support the work from now until November. While materials on HSS will be shared widely with the entire PPC, there will be a sub-set of the PPC (“core group”) that is willing to engage closely with the advisers on behalf of the PPC (Sissel Hodne Steen and Aldo Tagliabue volunteered.)
- A major role of the PPC is to keep a focus on immunisation and raising immunisation coverage through strengthening health systems. Clear deliverables need to be defined as the timeline is very tight.

Action items:

- The Secretariat will, in consultation with the Chair, define a concrete work plan and deliverables for the Secretariat as basis for the work in the PPC in the coming weeks.
- The Secretariat will support the Chair in identifying the PPC advisers and keeping the Committee informed.
- PPC members wishing to participate in the PPC core group on joint programming should contact the Chair.

3. Eligibility Policy Revision and Update from Eligibility Task Team (Rama Lakshminarayanan, Gian Gandhi)

Rama Lakshminarayanan, Chair of the Eligibility Task Team, and Gian Gandhi, from the Secretariat, provided an update on the task team’s process and progress to date and sought guidance from the PPC. Areas of discussion included strategic drivers of eligibility, financial constraints and their implications for eligibility, and the role of co-financing and other policies.

Strategic drivers of eligibility policies

The task team asked for guidance regarding the following strategic drivers:

- Primary driver: Focus on poorest countries using consistent, reliable and valid indicators. GNI capita has been used and should continue to be used given its high correlation with other measures of need such as under-5 mortality and measures of poverty, because of the lack of coverage across countries of other indicators (e.g. again, measures of poverty).
- Other potential drivers: Reducing overall disease burden, system performance, political will, equity within countries, and the size of each country’s birth cohort will be explored.
- Not considered as a driver: Making vaccines more affordable in the poorest countries. The impact of eligibility on market forces will be considered within the analysis, but not as the end itself.
- The task team has requested the consultant group, Results for Development, conduct further analysis before the task team makes a specific recommendation.

Discussion:

- The Committee agreed that the primary driver for defining eligibility criteria should be the focus on the poorest countries, using the indicator of GNI per capita to identify those countries.
- The PPC agreed that other secondary drivers such as under 5 mortality and overall mortality should be further explored.

GAVI's financial constraints and their bearing on eligibility

The task team suggested that GAVI should not consider options that increase costs significantly. The task team also requested PPC guidance on whether it could explore options that split eligibility and resource allocation decisions, enabling allocation decisions to take account of uncertainty and variability in resource envelope over time.

Discussion:

- Members of the PPC pointed out that the task team needs to develop a number of scenarios in considering eligibility together with financial constraints. This exercise offers a good opportunity to link to other issues such as being used as part of the resource mobilisation strategy and fundraising. For example, it could stimulate the countries to increase their co-financing.
- GAVI must work within the reality of current circumstances. This is consistent with the request to explore options that split eligibility from resource allocation decisions. However, it was noted that in splitting eligibility from funding, the team has to be careful not to create a large pool of countries who are nominally eligible but who have little chance of getting funding.
- Care should be taken not to develop criteria that are complex. The criteria should be as simple as possible while remaining relevant and flexible.
- The Task Team is also looking at making 'graduation' criteria explicit and the PPC endorsed the importance of clarifying the specifics of countries graduating from GAVI support.
- The Task Team also informed the PPC that GAVI, unlike other agencies, does not currently have a regular policy for updating eligibility criteria and that this was also an issue that is being examined. The PPC agreed that a more flexible mechanism for updating the criteria be explored by the task team.

Intersection of eligibility and co-financing policy reviews**Discussion:**

- The PPC agreed with the task team recommendation that the issue of fragile states should not be part of the discussions on eligibility. The main issue associated with fragile states is the level of co-financing expected of countries (since fragile states are expected to pay a lower level of co-financing than other countries).
- Issues related to the co-financing policy may surface when eligibility criteria are assessed. This should not delay recommendations by the PPC regarding changing eligibility criteria.

However, eligibility criteria which have implications for co-financing need to be taken into account when the co-financing policy is revised next year.

Additional comments:

- One member of the PPC requested that all presentations to the PPC would benefit from a clearer definition of objectives, actions, indicators and risks.
- Cost implications are important to consider. Other issues included thinking about incentives that GAVI may want to create as well as those that might result from eligibility policies, and the importance of the birth cohort size in certain countries.
- The process to decide to fund applications to GAVI is a multi-step process. There is the general eligibility determination, the various filters for each window and then the IRC decision. New policies should not further complicate the situation.

Action items:

- The task team was commended for its work to date and asked to keep the PPC informed as it moves forward.
- The consultants, R4D should work closely with the finance and resource mobilisation teams at the Secretariat to be fully informed of relevant work that is being done in this area.

4. Conclusion

The Chair closed the meeting, noting that time did not allow the Committee to cover the agenda item of taking stock of the Committee's work to this point. In summary, she noted that:

- A decision will be made on HSS advisers by the week of 22 June.
- The Secretariat's concrete work plan and deliverables should be finalised by the week of 22 June.
- It was Ahmed Magan's last meeting as he has accepted a post as the UNICEF representative in Lesotho. She thanked him for his contribution to GAVI and the PPC.