

HOW TO REQUEST NEW GAVI SUPPORT

Financial support: Health System and Immunisation Strengthening (HSIS) support

Vaccine support: New Vaccine Support (NVS)

Cold chain equipment support: Cold Chain Equipment Optimisation Support (CCEOP)



Reach Every Child
www.gavi.org

How to request new Gavi support

How to navigate this document.....	1
Introduction	1
1. What do I need to do before submitting a request?	1
1.1. Check that you are eligible for the support	1
1.2. Begin planning for the support.....	2
1.2.1. Bring stakeholders together in a participatory and transparent manner	2
1.2.2. Understand the specific programme elements and requirements	3
1.2.3. In need of technical assistance?	3
1.2.4. Use realistic timelines for planning	3
1.2.5. Application dates	4
1.3. If requesting CCEOP: Identify the source of joint-investment	4
1.4. Specific process steps for countries requesting new HSS support.....	4
1.4.1. Preparatory steps and analysis	5
1.4.2. Iterative country dialogue	5
1.4.3. Roles and responsibilities of stakeholders in planning	5
2. How do I submit?	6
3. How do I prepare for the independent review?	6
3.1. What do I need to do after submission?	6
3.2. Who will review my request?	7
3.3. What are the possible outcomes of the review?	7
3.4. What happens <i>immediately</i> after the review?	7
4. When will I get the official approval from Gavi?	8
4.1. Who provides final approval?	8
4.2. What happens after Gavi approval?	8
5. How can we make changes to initial plans?	9
5.1. The vaccine introduction is delayed.....	9
5.2. Changes to vaccine introduction and/or coverage plans	9
5.3. Changes to an existing HSS grant.....	10
Annex 1: Additional conditions per type of support.....	10
Annex 2: Country information status in 2018	12

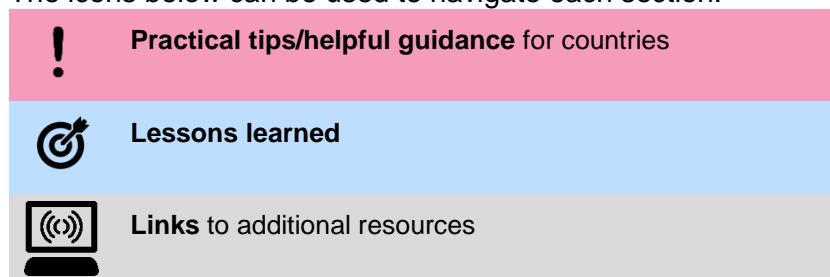
How to navigate this document

This document outlines the various Gavi eligibility criteria and the application and review process for requesting new Gavi support. For guidelines on the programmatic elements of available support to countries, refer to [“Application guidelines”](#).

References

All Gavi-related **documents referenced in this guideline can be found on the “Support guidelines” webpage**, accessed via: www.gavi.org/support/process/apply/

The icons below can be used to navigate each section:



Introduction

Countries implement a portfolio consisting of four different types of available support from Gavi:

- **Health System Strengthening (HSS) support:** to strengthen the capacity of integrated health systems to deliver immunisation programmes and support sustainable improvement in coverage and equity of immunisation.
- **New Vaccine Support:** Gavi supports funding for **nine vaccines** in the form of actual vaccines, associated supplies and financial support.
- **Cold Chain Equipment Optimisation Platform (CCEOP):** through which Gavi jointly invests with countries in the purchase, deployment and installation of higher performing cold chain equipment.
- **Targeted Country Assistance (TCA):** providing technical assistance delivered by Gavi Alliance core and expanded partners and planned each year through the Partners’ Engagement Framework (PEF).

It is important for countries to set requests for new support within the context of their broader portfolio of Gavi support when applying for new support. Where practical, countries are encouraged to group applications to ensure coordination and complementarity between the above various types of Gavi support.

When a country is ready to request new HSS support, Gavi will work with the country to develop this portfolio view intended to facilitate longer term predictability, visibility on complementarities and more integrated grant planning and budgeting.

1. What do I need to do before submitting a request?

1.1. Check that you are eligible for the support

General Gavi eligibility criteria

The main eligibility criterion to access new Gavi support is the World Bank’s estimate of Gross National Income per capita (GNI pc). In 2019, countries are eligible for Gavi support if their average

GNI pc over the past three years is equal to or below the threshold amount of US\$1,580. This eligibility threshold is revised annually to adjust for inflation¹.

Based on a country's GNI pc, Gavi classifies all eligible countries into "transition" phases, for which specific criteria may apply (additional criteria may also apply for accessing different types of support; these are listed in the table below). These phases are:

- **Initial self-financing phase:** for countries with GNI pc equal to or below US\$1,005
- **Preparatory transition phase:** for countries with GNI pc between US\$1,005 and US\$1,580
- **Accelerated transition phase:** for countries with GNI pc above the US\$1,580 threshold²
- **Fully self-financing countries:** these are countries that have completed the accelerated transition phase and are paying 100% of the cost of vaccines.

If a country surpasses the threshold for its current phase following the release of World Bank GNI pc data (in July of that year), the country will be informed by Gavi in September (of the same year). During the first year in a new phase the criteria (e.g. co-financing rules) from the previous phase still apply.

In line with the [November 2017 Gavi Board decision](#)³ a country in accelerated transition (GNI surpasses the US\$1,580 threshold) can apply for new vaccine support during the full five years of accelerated transition and would need to co-finance the vaccine in line with the co-financing policy.

The full list of country information status and transition phase is provided in [Annex 2: Country information status](#). Additional conditions apply to various types of support (including minimum level of immunisation coverage, financing of first dose of measles etc.) Details on the specific conditions to access various types of support are listed in [Annex 1: Additional conditions per type of support](#).

1.2. Begin planning for the support

Countries are encouraged to begin planning well in advance of a submission to ensure that all requisite information is available to inform evidence-based investments. Specifically for countries requesting new Health System Strengthening (HSS) support and planning for the portfolio of Gavi support for the upcoming 3-5 year period, this planning should ideally be during the development of the national health sector strategy or multi-year immunisation plan.

1.2.1. Bring stakeholders together in a participatory and transparent manner

The key priorities, issues and bottlenecks should be discussed in a participatory, transparent and inclusive manner. It is important for the national [Coordination Forum](#) (ICC, HSCC or equivalent body) to coordinate this process to ensure inclusiveness, strategic direction and oversight, and complementarity and harmonisation across Gavi and other government or donor partner investments.

¹ Gavi uses World Bank GNI data (based on the Atlas method) released in July of each year. This data is for the annual GNI of a country in the previous year (i.e. in July 2018, the World Bank releases GNI data for 2017). Thus, for eligibility to apply in 2019, Gavi will consider the GNI data for 2015, 2016 and 2017.

² That is: When a country's reported average GNI pc over the past three years is above this threshold, Gavi will inform the country that it will enter the accelerated transition phase effective January 1 2019.

³ Refer to: Decision 12b, part a.

1.2.2. Understand the specific programme elements and requirements

Information pertaining to each specific type of support available from Gavi can be found in the Application Guidelines available [here](#).

1.2.3. In need of technical assistance?

Gavi relies on its core partners (WHO, UNICEF, CDC⁴ and the World Bank) and expanded partners (including local institutions) to support countries in planning and implementing Gavi grants. Gavi supports these partners through the Partners' Engagement Framework (PEF). Central to this process is the 'One Technical Assistance (TA) plan' for each country that lists the support that partners are planning to provide in a given year. If countries are planning to apply for or implement Gavi support in the near future, they are encouraged to ensure that the One TA plan includes specific support from partners to do so. Countries are encouraged to indicate in this plan local institutions through which TA can be leveraged. More details can be found on "[PEF Targeted Country Assistance \(TCA\) process: 2018-2019 guidance note](#)". Countries can contact their Gavi Senior Country Manager (SCM) for further questions on this process.

1.2.4. Use realistic timelines for planning

Vaccines introductions or campaigns: Countries should ensure that their target vaccine introduction (or campaign) date and plans for preparatory activities are compatible with the timelines for the likely receipt of Gavi funds and vaccines. Specifically, planning should take into account the timing considerations in the figure below. In particular, it will usually not be feasible for a country to introduce a vaccine less than 15-18 months after the Gavi application submission deadline.

Countries are encouraged to initiate time-intensive, less costly activities prior to receipt of the financial support from Gavi for introductions/campaigns. Such activities include central-level work planning, informing lower levels, development of materials for social mobilisation and training, revisions of data tool templates, early launch ceremony preparation)

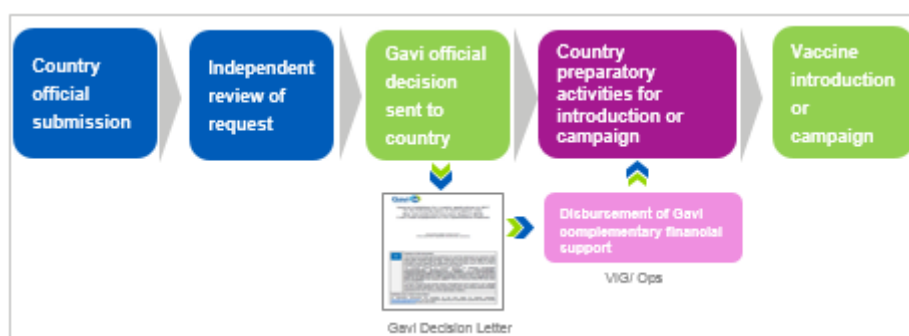


Figure 1: Overview of the process from application submission to vaccine introduction or campaign

Financial support for HSS: Countries are strongly encouraged to begin planning for the request 12-18 months prior to when financial support is needed in country. Refer to [section 1.4](#) for the process of engagement during that timeframe.

Cold chain equipment (i.e. CCEOP): Aligned with planning for financial support (i.e. HSS) requests, countries are strongly encouraged to begin planning for the request 12-18 months prior to when cold chain equipment is needed in country. Specifically, countries should keep in mind that the detailed

⁴ CDC: Centers for Disease Control and Prevention.

operational deployment plan⁵ for at least the first year (i.e. years 1-2) is required to be submitted as part of the application for CCEOP. Refer to [section 4.2](#) for additional timeline considerations.

1.2.5. Application dates

Keeping in mind the approximate timeframes above, countries should target a submission deadline that meets their implementation timelines.

Table 1: Application timelines

	Round 1	Round 2	Round 3
Submission cut-off dates	22 January	1 May	4 September
Review dates (indicative)	11 – 22 March	1 – 12 July	28 Oct – 8 November
Gavi decision	By July 2019	by Nov 2019	by Mar 2020

Note:

1: There is some flexibility in the application timelines above for countries submitting new requests for HSS. Your Gavi SCM will provide more tailored guidance on this.

1.3. If requesting CCEOP: Identify the source of joint-investment

Countries can use of the following options to finance their joint-investment share of platform-eligible equipment:

- National resources (this is the recommended option) or partner resources
- A new or existing HSS grant⁶
- A combination of the above

In case this arrangement requires a reallocation or reprogramming of an existing HSS grant, refer to [section 5.3](#) for specific process steps to do so.

1.4. Specific process steps for countries requesting new HSS support

Gavi has implemented process improvements and strengthened guidance on the important portfolio planning that takes place with new HSS support requests. These steps are described briefly in the sections and figure below. Additional information is available via your relevant Gavi SCM.

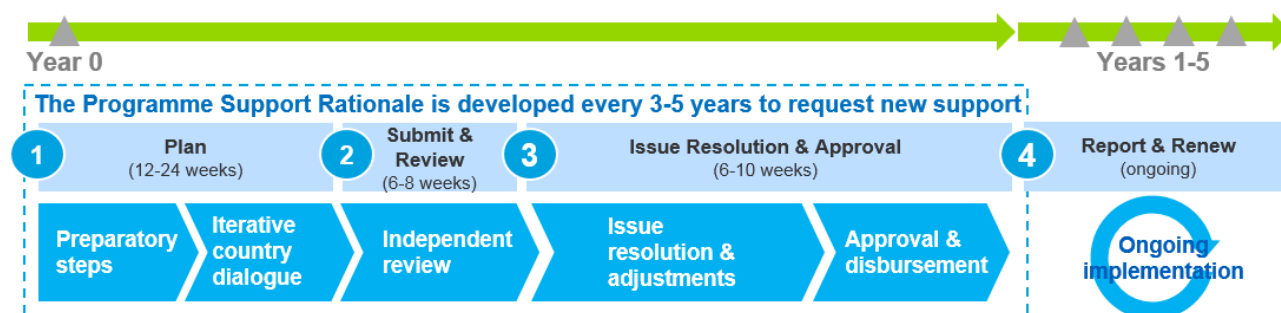


Figure 2: Overview of the key steps for portfolio planning

⁵ Note: the operational deployment plan may need to be finalised with UNICEF Supply Division (SD) following the independent review. Timeframes for the transfer of the joint investment (either with government funds or Gavi funds) to UNICEF SD by the country and/or Gavi (depending on the source of the country's joint investment) should also be taken into consideration.

⁶ Countries may not use Gavi provided Vaccine Introduction Grants (VIGs) or Operational support for campaigns (Ops). Countries may not use an existing HSS grant if the funds were intended to pay for a contract that has been signed with the manufacturer or procuring agency.

1.4.1. Preparatory steps and analysis

A thorough preparatory analysis and review of existing country information/documentation should be based on:

- Updated national health sector and immunisation programme strategic plans
- Thorough review of the status of immunisation financing in the country, including issues related to planning, budgeting, costing, funding, disbursement and execution
- Latest data on the immunisation programme, including coverage and equity situation analysis
- Assessments and reviews of implementation progress (such as joint appraisals)
- Findings from Gavi's Programme Capacity Assessment (PCA), audits, where available

This initial engagement should map out high-level timelines, including detailed roadmap and roles that feed into the iterative dialogue between in-country stakeholders, partners and Gavi Secretariat over the coming months (typically 12-18 months ahead of final submission of documents for the independent review). Guidance for this step is available here: www.gavi.org/support/process/apply/hss/

1.4.2. Iterative country dialogue

This iterative period of dialogue engages all stakeholders in programming Gavi's support for the upcoming 3-5 year period. Including planned vaccine activities and associated health system and cold chain equipment needs. This process can take several months (typically 3-6 months) and replaces the joint appraisal discussions for that year.

The preparatory steps/analysis and iterative dialogue results in the finalisation of the:

- **Programme Support Rationale (PSR)** (see [section 2](#) for more on this);
- **vaccine applications** for introductions or campaigns within 2 years, if applicable;
- detailed operational **1-2 year budget and workplan** ;
- updated **Grant Performance Framework (GPF)**; and
- other mandatory and supplementary documents as provided in the 'document checklist' in the application guidelines

1.4.3. Roles and responsibilities of stakeholders in planning

The national **Expanded Programme on Immunisation (EPI)** team leads the process according to agreed upon timeframes; organises and leads the in-country workshops; shares latest data and country information for evidence-based discussions; and develops the key documents for submission to Gavi.



Alliance partners (e.g. WHO, UNICEF, and others) **can play a critical role in this process by:**

- Participating in initial country engagement & defining high level process milestones
- Supporting government-led national strategic planning processes (multi-year national immunisation plans e.g. cMYPs⁷, national health sector plans), programme reviews, etc.
- Supporting analyses on the coverage and equity situation, or creating other data, or providing surveys/studies to better understand the critical gaps in the immunisation system
- Supporting the dialogue process (e.g. facilitating and providing support to prioritize objectives) and the technical development of the documents (e.g. providing feedback on drafts)

⁷ cMYP: comprehensive multi-year plan.

The Gavi Secretariat, led by the Gavi SCM, provides key guidance and support throughout the entire planning process; briefing the country and relevant stakeholders, stewarding the iterative dialogue. Countries are encouraged to prepare submissions of vaccine applications (introductions or campaigns for the next 15-18 months) at the same time as the PSR. In this case, a single review can endorse all applications. If countries submit an individual vaccine application after the PSR, they will be encouraged to ensure that the planning clearly links to the PSR and, therefore, to the broader 3-5 year strategic plan.

2. How do I submit?

All requests must have the appropriate signatures of relevant ministries and endorsement of the national Coordination Forum prior to the independent review.



Integrated application for requesting HSS support (i.e. PSR):

The PSR also replaces the joint appraisal report for that year and is divided into these main sections:

- Overview of portfolio of support, including both new and existing Gavi support
- Situation analysis on country's immunisation system and review of progress on the implementation of existing Gavi support (i.e. joint appraisal report for that year)
- Planning for future support (strategic approach, coordination and alignment)
- Key objectives and activities for requested support for HSS (including CCEOP) and strategic considerations for planned vaccine introductions and/or campaigns

Vaccine application form:

Countries may easily access vaccine applications from the country portal. The country portal is accessible to registered country portal users. The **vaccine** application form is divided into three main sections:

- country information, status of the national immunisation programme and document repository;
- application specific information on vaccine programme data; and
- sign-off and submission

Additional guidance and helpful tips are provided directly within the application. For any questions or issues related to accessing applications on the portal, contact countryportal@gavi.org or your Gavi SCM.

- **For HSS:** submit the PSR (and all mandatory documents) via email to proposals@gavi.org. The PSR includes a detailed request for HSS support and an overview of the portfolio of support that the country may request from Gavi in the future.
- **For New Vaccine Support:** Countries that apply for both HSS and new vaccine support at the same time will submit the PSR and fill in the vaccine application on the portal. In the case of only a vaccine application, countries will fill in the vaccine application on the portal two months prior to the submission deadline. Access vaccine applications through Gavi's online country portal via <https://portal.gavi.org>.
- **For CCEOP:** Countries that apply for both HSS and CCEOP at the same time will submit the PSR (and all mandatory documents) via email to proposals@gavi.org. In the case of only CCEOP, submit the CCEOP application form (and all mandatory documents) via email to proposals@gavi.org.

3. How do I prepare for the independent review?

3.1. What do I need to do after submission?

Gavi screens applications to ensure that mandatory requirements have been met and reviews the validity and consistency of information submitted. If incomplete, Gavi will work directly with countries to address gaps before proceeding.

Technical pre-review and feedback

WHO “pre-reviews” requests for *new CCEOP* support ahead of formal submission for the independent review to provide feedback to countries to strengthen their request.

3.2. Who will review my request?

A country’s request for new support is reviewed by independent reviewers from the [Independent Review Committee \(IRC\)](#). The IRC is comprised of experts in public health, epidemiology, supply chain, development finance and economics. The reviewers take various aspects into consideration during the review and make a recommendation to Gavi on the extent to which Gavi’s investments in the country are likely to achieve the proposed results and make a significant contribution to achieving sustainable improvements in coverage and equity of immunisation

The independent review assesses the country’s request(s) and will include dialogue between the reviewers and relevant country stakeholders (i.e. country, Alliance partners and Gavi Secretariat)⁸, as needed. Countries requesting new HSS support should contact their Gavi SCM for more information on their review.

3.3. What are the possible outcomes of the review?

The reviewers will make one of the following recommendations to Gavi (to be captured in the independent review report):

Table 2: Review outcomes

For All Gavi Support applied
Recommend Gavi approval: for a situation where there are no issues that require a re-review by the reviewers. For vaccines with implementation greater than 2 years from the portfolio review (i.e. PSR review), only a recommendation for Gavi support ⁹ can be provided.
Recommend the re-review of outstanding issues ¹⁰ : for a situation where there are issues that require a re-review by the independent experts. This implies that there are material issues that need to be met and/or that there are major gaps to be addressed by the country before approval by Gavi should be considered.

3.4. What happens *immediately* after the review?

If recommended for approval

The independent reviewers may identify outstanding issues to be addressed and complementary strengthening actions. These outstanding issues need to be clarified (i.e. either resolved or an action plan should be developed) by the country within a specific time period (typically within 30 working days). The Gavi Secretariat reviews the country’s responses and determines whether the issues have been satisfactorily cleared or not.

⁸ While dialogue between the independent reviewers and country stakeholders is encouraged, the provision of this depends on a number of factors. Countries will be notified by their Gavi SCM, should it be necessary or possible.

⁹ As the implementation details would not have been provided, a subsequent vaccine request for approval would be needed for a possible recommendation for approval.

¹⁰ This implies that there are fundamental issues with the new support requested that cannot be addressed by the Alliance’s grant management processes following the independent review (i.e. operational planning and budgeting for HSIS, operational deployment planning for CCEOP)

During this period, the Gavi Secretariat will work with the country to finalise details that form part of the approval and “Decision Letter” to countries. Countries should note that the financial amounts, target information (for vaccine) and number of cold chain equipment are subject to some change based on new information and/or discussions with the country following the review.

- ! **Flexible timelines for countries requesting new support for HSS:** There is some flexibility in the timelines to clarify outstanding issues coming out of the portfolio review for PSR submissions. The proposed timelines and associated strengthening actions will ideally be discussed and agreed upon with country stakeholders during the independent review.

If recommended for re-review:

The independent reviewers have identified material issues with the request, and subsequently, need to review the country’s response to the identified issues. The country should respond to each issue by providing a detailed summary of the changes made in response to the issues raised. Depending on the nature of the issues identified by the reviewers, it may require a substantial revision of the request and submission of updated/additional information/documents. The resubmitted application and information/ documents requires updated signatures and endorsement by the Ministers of Health and Finance (and Education of HPV) and the national Coordination Forum.

The recommendation from the IRC will be shared with the country and partners via an “Information Letter” within 2-3 weeks following the independent review. Depending on the complexity of the review and next steps, a debrief presentation from the reviewers *may* be scheduled with key country stakeholders. Your Gavi SCM will provide more information as you move through the review process.

4. When will I get the official approval from Gavi?

Countries should note that approval of new support by Gavi should be within a 5-6 month period from the time of submission of the country’s request.

4.1. Who provides final approval?

Gavi’s Chief Executive Officer (CEO) will consider and decide on the final grant documents, based on recommendations from the independent review. Countries and partners are notified of the final outcome through a “Decision Letter”, explaining the vaccine and/ or programmatic financial support amount and terms of the grant, and including the updated agreed performance framework.

4.2. What happens after Gavi approval?

The following are some key steps to be carried out post-Gavi approval. Your Gavi SCM will advise you on the steps relevant to your country status.

- Prior to grant implementation, a Programme Capacity Assessment (PCA¹¹) is conducted by an external contractor appointed by Gavi, if not already completed prior to the independent review. Additional reviews relating to checks on unused funds in a country (if the country has previously received financial support) will also be carried out by the Gavi Secretariat. Key terms are included in a Grant Management Requirement (GMRs) document, which forms an annex to the Partnership Framework Agreement (PFA) between Gavi and the country.¹²

¹¹ The Programme Capacity Assessment (PCA) ensures that a country’s programme, financial, and vaccine and cold chain management are robust and transparent in line with Gavi’s [Transparency and Accountability Policy \(TAP\)](#).

¹² The PFA sets out the terms and conditions by which Gavi provides support and the country undertakes to implement Gavi-supported programmes. Countries should note that requests for new support will not be tabled for review without a valid PFA.

- Gavi will also initiate internal processes for the transfer of funds to countries and/ or vaccine purchase (with UNICEF)¹³. The country should begin to plan activities to prepare for the vaccine introduction, for example discussing with the UNICEF country office regarding shipment plans, ensuring country product licensing requirements are met, etc.¹⁴
- Countries with cold chain equipment should work with UNICEF SD to agree on final pricing, model section by year, and delivery timelines. If financing the joint investment share through national resources or partner resources¹⁵, such countries should also agree on the appropriate US\$ amount and transfer the joint investment to UNICEF SD.¹⁶



Lessons learned from the implementation of CCEOP support: To speed up the implementation process for CCEOP following approval, countries are required to submit their operational deployment plan (ODP) for the initial year, and where feasible year 2, along with their request for support. The ODP includes details such as the expected timeline and proof of country's efforts and readiness to receive the requested equipment and facilitate distribution and installation in a timely fashion, which is the basis for accelerating agreement with manufacturers.

5. How can we make changes to initial plans?

5.1. The vaccine introduction is delayed

The projected date for vaccine introduction must be no later than two years from formal notification of Gavi approval. Following the approval of a country's vaccine application, if there are delays in vaccine introduction the following rules apply:

- If the country delays introduction for more than two years from the formal notification of Gavi approval, Gavi does not require a new application but requires new and updated information from the country on the planned introduction (e.g. including an updated introduction plan, targets and cold chain capacity)¹⁷.
- If the delays are due to supply constraints, once supply is confirmed and discussions have taken place with the country on a new timeline for introduction, the country should send new and updated information on the planned introduction (e.g. including an updated introduction plan, targets and cold chain capacity).
- If in either of the above two situations, the multi-year national immunisation plan (e.g. cMYP) has expired, the country needs to submit a new updated cMYP as soon as possible.

5.2. Changes to vaccine introduction and/or coverage plans

Countries are required to communicate to the Gavi Secretariat and its Partners (e.g. UNICEF SD or WHO) if there are any changes in introduction and/or coverage plans (e.g. accelerated or delayed introduction or increases or decreases in vaccine use). Any changes should be endorsed by the relevant Coordination Forum (ICC, HSCC or equivalent). Revised plans should be communicated through the routine reporting to Gavi, however, in urgent situations, especially those impacting vaccine requirements or shipments, any changes should be brought to the immediate attention of the Gavi Secretariat and its Partners.

¹³ Details on procurement of vaccines, including requirements for self-procuring countries and cold chain equipment can be found here: [Guidance on procurement](#).

¹⁴ Each country may have its own vaccine licensing requirement. The Ministry of Health is responsible for facilitating this process with National Regulatory Authority and the manufacturer of the chosen product. UNICEF SD may provide support.

¹⁵ Gavi will transfer the country's joint investment share directly to UNICEF SD on behalf of countries using an existing HSS grant.

¹⁶ Disbursement of Gavi's joint investment is contingent on UNICEF SD confirming receipt of the country's joint investment share.

¹⁷ For countries in the accelerated transition phase, delays in vaccine introduction due to supply constraints or circumstances outside the control of the country will not impact the country's co-financing.

5.3. Changes to an existing HSS grant

Gavi encourages countries conduct integrated budget planning processes for all Health System and Immunisation Strengthening (HSIS¹⁸) support. As such, countries are encouraged to update the detailed operational budget and work plans regularly (e.g. every 1-2 years) to proactively respond to new evidence (e.g. from programme reviews and assessments), new identified risks, implementation to date and progress towards the agreed targets. Through this, countries may wish to modify or amend their existing HSS grant (i.e. budget) by either a:

- **reallocation** wherein the original HSS objectives are not changed and the new/ revised activities do not create significant changes to the approved budget¹⁹; or
- **reprogramming** wherein there are more significant changes to the original HSS grant with new or substantially revised objectives or activities and/or significant changes to the approved budget²⁰

Countries may **amend their existing HSS grant to finance their joint investment share of platform-eligible equipment for CCEOP support. In such cases, countries should ensure that the Coordination Forum endorses the proposed changes to the existing grant.** Additional information on reallocation/reprogramming is also available in the [Guidelines on reporting and renewal: Section 3.2.](#)

Annex 1: Additional conditions per type of support

Additional conditions for vaccine support (NVS)

All Gavi-eligible countries may request new NVS support if the national WHO/UNICEF (WUENIC) estimate for DTP3²¹ coverage for 2017 (released in July 2018) is greater than or equal to 70%. This coverage criteria applies to:

- Human papillomavirus vaccine
- Measles-Rubella vaccine²²
- Pneumococcal conjugate vaccine
- Rotavirus vaccine
- Typhoid conjugate vaccine

Vaccine	Additional programmatic conditions
Human Papillomavirus (HPV) vaccine	<ul style="list-style-type: none"> • Countries that have introduced HPV vaccine at national scale and are procuring the vaccines directly with vaccine manufacturers using government funds may not apply for Gavi support. <ul style="list-style-type: none"> • Note: If a country has already introduced HPV vaccine at national scale <u>through a donation</u> and plans to apply for Gavi vaccine support to continue the programme, no VIG can be requested. • Countries in accelerated transition phase in 2019 may apply for national introduction if they are not currently implementing (or after completing) a Gavi HPV demonstration programme. Countries may apply for support to vaccinate a multi-age cohort if:

¹⁸ HSIS is an umbrella term that refers to health system strengthening (HSS) support and complementary financial support to countries (i.e. Vaccine Introduction Grants (VIGs), Operation support for campaigns (Ops), Product and Presentation Switch Grants, Operational support for outbreak response campaigns, Transition Grants, Performance Payments (PBF reward), and Operational support for HPV demonstration projects).

¹⁹ The (total) requested budget changes total less than USD 10 million or requested amounts are less than 25% of the overall existing budget, whichever is lower.

²⁰ The (total) requested budget changes total more than USD 10 million or requested amounts are greater than 25% of the overall existing budget.

²¹ This is the same as Penta3 coverage rate.

²² This applies only to applications for the introduction of MR into routine.

	<ul style="list-style-type: none"> Country has been approved for Gavi support of HPV but has not yet introduced HPV nationally; or Country has introduced HPV nationally in 2015 or 2016 with Gavi support
Japanese Encephalitis (JE) vaccine	<ul style="list-style-type: none"> Only at-risk Gavi-eligible countries that have not yet applied for JE support can apply. <i>Countries that have previously conducted campaigns</i> may also apply for support under the following circumstances: <ul style="list-style-type: none"> If the campaign was conducted for a portion of the population over 14 year olds. This includes campaigns done using donated vaccines. <i>The country may apply for the remaining target age group up to 14 years.</i> If based on surveillance data a new area of risk has been identified that has not previously been targeted by a campaign (with or without Gavi support) If the campaign was conducted without incorporating JE into the routine programme afterwards. The country may apply for Gavi support for unreached cohorts (i.e. missed cohorts) within the 9 months through 14 years old age group. Countries in the process of establishing surveillance systems that already have sufficient data to warrant introduction or expansion of JE vaccination are encouraged to apply even though new areas at risk may be identified in the future.
Measles and Measles Rubella	<ul style="list-style-type: none"> For specific conditions, see Application guidelines – Annex 2 available here.
Meningitis A (MenA) vaccine	<ul style="list-style-type: none"> Only countries in the African meningitis belt where the disease is endemic can apply for support.
Pneumococcal Conjugate vaccine (PCV)	<ul style="list-style-type: none"> Countries that meet the following circumstances below are still able to request support for PCV support through Gavi under the terms and conditions of the Advance Market Commitment (AMC). <ul style="list-style-type: none"> <i>Country is fully self-financing</i> (i.e. transitioned out of Gavi support); and Country has not yet introduced PCV. <p>These countries will need to:</p> <ul style="list-style-type: none"> <i>fully fund the costs</i> of the vaccine; and <i>procure the vaccine via UNICEF</i> (i.e. self-procurement is not possible).
Typhoid Conjugate vaccine (TCV)	<ul style="list-style-type: none"> Countries that have previously used typhoid vaccine may also apply for support if, based on data, a new area of risk has been identified that has not been previously targeted by a campaign (with or without Gavi support).
Yellow Fever (YF) vaccine	<ul style="list-style-type: none"> Countries that have not yet introduced YF vaccine into their routine EPI schedules may apply for Gavi support for routine immunisation. Countries currently considered at high risk for YF virus circulation may apply for Gavi support for preventive mass campaigns Countries experiencing a significant YF outbreak of national public health importance, which cannot respond fast enough with local funding (domestic epidemic response funds or donor funding) are may apply for outbreak response.
Countries in accelerated transition phase	<ul style="list-style-type: none"> Countries are now able to apply for new vaccine support during the full five years of accelerated transition. For more information, see Application guidelines – section 5.1 and for specific conditions refer to “FAQ on co-financing rules for country requests for new vaccine support in accelerated transition phase” available here.

Additional conditions for Health System Strengthening (HSS) support

Phases	Additional programmatic conditions
Initial self-financing and preparatory transition countries	<ul style="list-style-type: none"> There are no additional criteria.
Accelerated transition countries	<ul style="list-style-type: none"> All countries may apply for new HSS support in the first year of accelerated transition. From the second year of accelerated transition onward, a country can only apply for new HSS support if the national WHO/UNICEF (WUENIC) estimate for DTP3²³ coverage for 2017 (released in July 2018) is less than 90%.

Additional conditions for Cold Chain Equipment Optimisation Platform (CCEOP)

Phases	Additional programmatic conditions for joint investment from the platform
Initial self-financing countries	<ul style="list-style-type: none"> Countries in this phase may receive up to 80% joint investment from the platform.
Preparatory transition countries	<ul style="list-style-type: none"> Countries in this phase may receive up to 50% joint investment from the platform.
Accelerated transition countries	<ul style="list-style-type: none"> Countries with at least two full years²⁴ from the date of the independent review prior to becoming fully self-financing may receive up to 50% joint investment from the platform.
Countries <u>ineligible</u> for joint investment	<ul style="list-style-type: none"> Accelerated transition countries with less than two full years from the date of the independent review prior to becoming fully self-financing. Countries entering fully self-financing year and phasing out of Gavi support. <p><u>Procurement of cold chain equipment:</u> These countries have access to procurement services supporting the Cold Chain Equipment Optimisation Platform by contacting UNICEF Supply Division directly (i.e. no application to Gavi) to receive a cost estimate of eligible cold chain equipment. Indicative pricing information can be found in the CCEOP budget template.</p>

Annex 2: Country information status in 2018

Country list	Transition phases ¹	Vaccine support	CCEOP Joint Investment
Afghanistan	Initial self-financing	Eligible for NVS	Platform joint investment up to 80%
Bangladesh	Preparatory transition	Eligible for NVS, incl. JE	Recommended for approval
Benin	Initial self-financing	Eligible for NVS, incl. YF, MenA	Recommended for approval
Burkina Faso	Initial self-financing	Eligible for NVS, incl. YF, MenA	Recommended for approval
Burundi	Initial self-financing	Eligible for NVS, incl. MenA	Platform joint investment up to 80%
Cambodia	Preparatory transition	Eligible for NVS	Platform joint investment up to 50%
Cameroun	Preparatory transition	Eligible for NVS, incl. YF, MenA	Recommended for approval

²³ This is the same as Penta3 coverage rate.

²⁴ This period allows at least two years from the time of the independent review to allow a minimum amount of time for implementation prior to the end of Gavi's support to the country.

Country list	Transition phases ¹	Vaccine support	CCEOP Joint Investment
Central African Republic	Initial self-financing	Eligible for NVS, incl. YF, MenA	Recommended for approval
Chad	Initial self-financing	Eligible for NVS, incl. YF, MenA	Recommended for approval
Comoros	Initial self-financing	Eligible for NVS	Platform joint investment up to 80%
Congo DR	Initial self-financing	Eligible for NVS, incl. YF, MenA	Recommended for approval
Congo Republic	Preparatory transition	Eligible for NVS	Platform joint investment up to 50%
Côte d'Ivoire	Preparatory transition	Eligible for NVS, incl. YF, MenA	Recommended for approval
Djibouti	Preparatory transition	Eligible for NVS	Recommended for approval
Eritrea	Initial self-financing	Eligible for NVS, incl. MenA	Recommended for approval
Ethiopia	Initial self-financing	Eligible for NVS, incl. YF, MenA	Recommended for approval
The Gambia	Initial self-financing	Eligible for NVS, incl. YF, MenA	Recommended for approval
Ghana	Preparatory transition	Eligible for NVS, incl. YF, MenA	Platform joint investment up to 50%
Guinea	Initial self-financing	Eligible for NVS, incl. YF, MenA	Recommended for approval
Guinea Bissau	Initial self-financing	Eligible for NVS, incl. YF, MenA	Platform joint investment up to 80%
Haiti	Initial self-financing	Eligible for NVS	Recommended for approval
India	Accelerated transition	Per India Strategy	Not eligible for joint-investment share
Kenya	Preparatory transition	Eligible for NVS, incl. YF, MenA	Recommended for approval
Korea DPR	Initial self-financing	Eligible for NVS, incl. JE	Platform joint investment up to 80%
Kyrgyzstan	Preparatory transition	Eligible for NVS	Recommended for approval
Lao PDR	Accelerated transition	Eligible for NVS	Platform joint investment up to 50%
Lesotho	Preparatory transition	Eligible for NVS	Platform joint investment up to 50%
Liberia	Initial self-financing	Eligible for NVS, incl. YF	Recommended for approval
Madagascar	Initial self-financing	Eligible for NVS	Recommended for approval
Malawi	Initial self-financing	Eligible for NVS	Recommended for approval
Mali	Initial self-financing	Eligible for NVS, incl. YF, MenA	Platform joint investment up to 80%
Mauritania	Preparatory transition	Eligible for NVS, incl. MenA	Recommended for approval
Mozambique	Initial self-financing	Eligible for NVS	Recommended for approval
Myanmar	Preparatory transition	Eligible for NVS, incl. JE	Recommended for approval
Nepal	Initial self-financing	Eligible for NVS	Recommended for approval
Nicaragua	Accelerated transition	Eligible for NVS	Platform joint investment up to 50%

Country list	Transition phases ¹	Vaccine support	CCEOP Joint Investment
Niger	Initial self-financing	Eligible for NVS, incl. YF, MenA	Recommended for approval
Nigeria	Accelerated transition	Eligible for NVS, incl. YF, MenA	Recommended for approval
Pakistan	Preparatory transition	Eligible for NVS, incl. JE	Recommended for approval
Papua New Guinea	Accelerated transition	Eligible for NVS	Recommended for approval
Rwanda	Initial self-financing	Eligible for NVS, incl. MenA	Recommended for approval
Sao Tome and Principe	Accelerated transition	Eligible for NVS	Platform joint investment up to 50%
Senegal	Initial self-financing	Eligible for NVS, incl. YF, MenA	Recommended for approval
Sierra Leone	Initial self-financing	Eligible for NVS, incl. YF	Recommended for approval
Solomon Islands	Accelerated transition	Eligible for NVS	Recommended for approval
Somalia	Initial self-financing	Eligible for NVS	Recommended for approval
South Sudan	Initial self-financing	Eligible for NVS, incl. YF, MenA	Recommended for approval
Sudan, Republic of	Preparatory transition	Eligible for NVS, incl. YF, MenA	Platform joint investment up to 50%
Syria	Initial self-financing	Eligible for NVS	Platform joint investment up to 80%
Tajikistan	Initial self-financing	Eligible for NVS	Recommended for approval
Tanzania	Initial self-financing	Eligible for NVS, incl. MenA	Recommended for approval
Togo	Initial self-financing	Eligible for NVS, incl. YF, MenA	Recommended for approval
Uganda	Initial self-financing	Eligible for NVS, incl. YF, MenA	Recommended for approval
Uzbekistan	Accelerated transition	Eligible for NVS	Recommended for approval
Vietnam	Accelerated transition	Eligible for NVS	Recommended for approval
Yemen	Initial self-financing	Eligible for NVS	Platform joint investment up to 50%
Zambia	Preparatory transition	Eligible for NVS	Recommended for approval
Zimbabwe	Initial self-financing	Eligible for NVS	Recommended for approval

Notes:

1: The following countries are fully self-financing: Angola, Armenia, Azerbaijan, Bhutan, Bolivia, Congo Republic, Cuba, Georgia, Guyana, Honduras, Indonesia, Kiribati, Moldova, Mongolia, Sri Lanka, Timor-Leste, and Ukraine.