

Report of the Chief Executive Officer

27 November 2024

Dear Members of the Board,

It has been an eventful six months since we last met. Before we meet for the final time in 2024, I am happy to share this report to help guide our deliberations.

Your deep knowledge, commitment and experience as Board Members give me confidence that, as always, we will resolve the questions before us in a manner that will leave the Alliance not only more resilient to the challenges presented by an increasingly uncertain world, but also better able to seize new opportunities to advance vaccine equity in the months and years ahead. I remain extremely grateful for your dedication, and for the support you have given me over my first six months as CEO.

I would also like to take this opportunity to thank our gracious and accommodating host, the Government of Indonesia. The government has done so much, and extended such warm hospitality, to ensure that we are able to come together not only to complete our core agenda, but also to witness the rapid progress on immunisation that Indonesia has made since their transition from Gavi support. I very much look forward to welcoming you all in person in Indonesia.

The report is structured into three main sections. In this first part of the report, I reflect on the prevailing operating context and key challenges faced by Gavi and Gavi implementing countries over the past six months. The second part of the report briefly summarises Gavi's programmatic results and risks, according to the most recent data available. The third and final part of the report sets out the strategic and operational shifts that are planned or already under way for 2025 and beyond into our next strategic period.

As we look ahead to 2025, the Alliance remains on track with most of its Gavi 5.0/5.1 targets, with the exception of the target on zero-dose children and the coverage targets for the third dose of diphtheria, tetanus and pertussis-containing vaccine (DTP3) and first dose of measles-containing vaccine (MCV1). We are operating in an increasingly complex environment, with increasing numbers of children living in conflict and humanitarian settings. Looking ahead and following on the important lessons of Gavi 5.1, we have approved the Gavi 6.0 strategy and have now started in earnest to plan for operationalisation in 2026.

Of course, a top priority for me since the launch of our Investment Opportunity in June has been our replenishment campaign and ensuring Gavi has the resources we need to deliver against our ambitious 6.0 strategy. We have an exceptional case to put forward, and I have seen firsthand how our mission and track record for delivery



resonate with our key donors and stakeholders as the campaign continues to gather momentum. Over the coming months, we will continue to need the help of all Board Members to make the case for the resources Gavi needs to deliver over the coming strategic period.

The implementation period of my initial 180-day plan ended in September, having either completed or otherwise set in train a number of important reforms and new initiatives across the Secretariat's structure, policies and culture, in addition to driving the delivery of key priorities.

There is, however, no room for complacency. As I reflect on in more detail below, Gavi's success and the commitment of implementing countries to immunisation have led to a forecast of unprecedented demand from countries for our support during 2025. The options to address this increased demand will continue to be an important subject of discussion when we meet, including the repurposing of additional resources in the first instance, and the updating of the Board-approved prioritisation mechanism as a tool of last resort.

These considerations will be important parts of a packed agenda that will also include key sessions on our progress on the road to replenishment; Gavi 6.0 operationalisation, including the future of the Eligibility, Transition and Co-financing (ELTRACO) model and the Gavi 6.0 Health Systems Strategy; a review of Gavi's response to mpox to date; and an overview of finance, risk and funding.

The operating context in 2024: challenges and opportunities

Our work throughout 2024 has taken place against an unpredictable backdrop of elevated global and regional geopolitical risk and conflict, a mixed global economic picture, and the continuation of long-term trends that, taken together, have a compounding effect on vulnerability and fragility in many of the countries that Gavi supports. Conversely, there have also been new avenues for engagement on replenishment, new prequalifications, and new innovations that have presented opportunities for strengthening vaccine delivery and equity, as well as how we work in the Secretariat, both in the near term and over the coming years.

Key developments and overarching trends impacting the work of the Alliance include:

Escalation and proliferation of conflicts and associated fragility and vulnerability
The past six months have seen an escalation and proliferation of conflicts
globally, and a consequent increase in humanitarian need and fragility.
According to the most recent edition of the Global Peace Index, there are now
more countries in conflict than at any other time since World War II. Gavi has
responded with agility when our intervention has been required, including
through the recent mobilisation of US\$ 20 million of new funding to facilitate
access to essential vaccines for thousands of conflict-afflicted people living in
the Gaza Strip, the West Bank, and Palestinian refugee camps in Lebanon. We



have also finalised comprehensive packages of fragility support for Ukraine and Sudan totalling more than US\$ 30 million. This funding has been mobilised through the fragility mechanism of our Middle-Income Countries (MICs) Approach and the Fragility, Emergencies and Displaced Populations (FED) Policy. Current trends suggest these will continue to be important mechanisms for emergency responses in the year ahead. The continued escalation and proliferation of conflicts globally gives added impetus to our efforts to continually strengthen our capacity to respond in contexts affected by fragility, conflict and vulnerability (see Doc 06, Annex B).

• High incidence of infectious disease outbreaks

The escalation and evolution of the global mpox outbreak into a Public Health Emergency of International Concern (discussed below) is the most high-profile example of a continued increase in the incidence of outbreaks of vaccinepreventable diseases. In addition to the impact of proliferating conflict, as discussed above, other key and interrelated drivers of this trend include health system fragility, gaps in routine immunisation coverage, climate change and consequent extreme weather events, urbanisation, and displacement.

Measles cases globally in 2023 increased by 20% to over 10.3 million, highlighting global gaps in vaccine coverage. Over the same period, African countries, which account for the majority of Gavi-supported countries, have actually increased vaccine coverage by 2 percentage points to 70%, despite a rising birth cohort. Gavi has focused on strengthening routine immunisation through the introduction of a second dose of measles-containing vaccine (MCV2), as well as on implementing timely, quality preventive campaigns to further reduce the risk of outbreaks. So far in 2024, Gavi has supported governments, communities and partners in 24 countries to roll out preventive catch-up and follow-up campaigns to reach up to 100 million children with vaccines that protect against measles.

In response to the continuation of large-scale cholera outbreaks in multiple countries and subsequent pressure on the strategic stockpile of oral cholera vaccine (OCV), the WHO prequalification of Euvichol-S this year is expected to help increase the overall supply of OCV to 50 million doses by the end of 2024, compared with 38 million in 2023. Overall, the global OCV stockpile is on track to surpass the record set in 2023 for the number of doses shipped in a calendar year. This underscores the need in 2024 for continued investments in prevention and rapid detection.

• Mpox Public Health Emergency of International Concern

On 13 August 2024, the Africa Centres for Disease Control and Prevention (Africa CDC) declared the mpox outbreak in the Democratic Republic of the Congo (DRC) and a number of other African countries a Public Health Emergency of Continental Security. The following day, following the advice of



the IHR Emergency Committee, the WHO Director-General declared the mpox outbreak a Public Health Emergency of International Concern (PHEIC).

We had followed the evolution of the outbreak for several months, including via regular updates at the Daily Blitz, our morning meeting, prior to the declaration of the PHEIC. Additionally, under pillar 5 of 180-day plan execution we had worked to further define and refine Gavi's role in the global health emergency preparedness, prevention and response architecture, which is under the overall coordination of WHO. We were therefore prepared with <u>a statement</u> when the PHEIC was declared; <u>communicated our understanding of our role more broadly</u>; and initiated our own emergency procedure on 15 August, in order to rapidly reprogramme funds to the emergency response and mobilise internal teams and processes within 48 hours of the PHEIC declaration.

Gavi's response to date is described in detail in Doc 07. Briefly, Gavi's rapid internal response and close collaboration with our partners, including daily situation briefings to the Senior Leadership Team (SLT), regular and collaborative contact with partners through global coordination calls and meetings of the interim Medical Countermeasures Coordinating group, enabled us to <u>articulate our commitment</u> and contribution to phase I of the WHO Global Strategic Preparedness and Response Plan (SPRP) and the Africa CDC-WHO African Continental Preparedness and Response Plan across a number of key areas:

- 1) Operational support: Reprogramming of funding for outbreak response activities enabled us to provide rapid operational support within 48 hours of request from the government of the DRC.
- 2) Dose donations: Leveraging our learnings from COVAX, Gavi shared knowledge and is providing direct support to donors and partners to facilitate dose sharing and dose donation.
- 3) Direct procurement via first response financing mechanism: A new tool, the First-Response Fund, was used for the first time to finance an advance purchase commitment, signed on 18 September, for half a million doses of the MVA-BN mpox vaccine. The agreement came just over 30 days after WHO's declaration of a PHEIC, and just three days after WHO added the MVA-BN vaccine to its prequalification list.
- 4) Learning agenda: Gavi's learning agenda for mpox focused on the sizing and design of an mpox stockpile was approved by the Gavi Board as part of the 6.0 Vaccine Investment Strategy.

With vaccination campaigns now well under way in African countries, including in the DRC, we continue to work closely with Alliance partners and Africa CDC to



monitor the situation and provide further support as and when required to ensure that all at-risk populations are reached.

• Continued emergence of immunisation as a critical enabler of adaptation to climate change

Climate change is now one of the key drivers of infectious disease outbreaks. The direct impacts of climate change are often catastrophic, threatening health systems, altering disease ecology, and affecting a broad range of environmental determinants of health. I have seen this firsthand in my own country, and recently witnessed the scale of vulnerability to climate change that affects many small island nations on a recent trip to the Solomon Islands.

In addition to these direct impacts, climate change also acts via various indirect mechanisms. Climate change is already causing conflict over resources and exacerbating the humanitarian and health needs of people who have been displaced by conflict. It functions as a fragility multiplier, and in all cases it makes the complex task of vaccine delivery more challenging.

Gavi is already supporting countries to build resilience and mitigate the health risks and vulnerability related to climate change by supporting vaccines that protect against seven diseases that are already affected by climate change: dengue, meningitis A, Japanese encephalitis, yellow fever, cholera, malaria and typhoid. Our most recent Vaccine Investment Strategy incorporated criteria related to the climate-sensitivity of diseases for the first time. And we are working with innovators to look at how we can apply the latest technologies to help adapt immunisation services to the changing climate and build resilience. That can be anything from solarisation projects to help health facilities to stay working off grid, to remote temperature sensing technology to maintain optimal storage temperatures, and AI to forecast disease outbreaks.

Of course we must do more. At COP29, our Gavi delegation made a powerful case for vaccines as indispensable tools to enable communities to adapt to climate change and strengthen resilience. And as we continue our planning for the operationalisation of Gavi 6.0, these considerations will be an important part of our discussions.

• Continued prioritisation of global health security and Universal Health Coverage by donors and implementing countries

Related to the two points above, there has been an increase in interest in health emergency preparedness, prevention and response, and global health security amongst Gavi donors and implementing countries. The need to demonstrate effective coordinating and financing mechanisms to ensure vaccine equity during emergencies continue to be high priorities for the G20 and G7.

I kicked off our high-level engagement with the G7 in May this year, at the meeting of Finance Ministers in Stresa, to build momentum prior to the launch



of Gavi's Investment Opportunity and AVMA in June. Gavi's 2024 G7 engagement concluded with our Board Chair's attendance in Pescara, Italy, in October. Our cumulative engagements have resulted in strong endorsements for key Gavi initiatives and innovations relevant to global health security, including AVMA, the Day Zero Financing Facility for Pandemics (of which the First Response Fund is a part) and the International Finance Facility for Immunisation (IFFIm) – which were all prominently featured across the Leaders', Finance, Health and Development communiqués. This is the first time that Gavi has been so visibly represented in all key tracks of the G7.

My many engagements at the UN General Assembly in September once again underscored the unique position that immunisation occupies at the intersection of Universal Health Coverage, primary health care and global health security. And these messages were reinforced further during October's World Health Summit in Berlin, Germany, in October, which I attended alongside the Board Chair and members of the SLT.

 Strong commitment to sustainable financing for vaccine programmes despite national fiscal constraints
 High levels of debt in many Gavi implementing countries resulted in their continued elevated exposure to global macro-economic trends including high inflation, slow growth and higher interest rates that result in reduced fiscal headroom for governments. Despite these constraints, countries are continuing to prioritise vaccine programmes, with high demand across Gavi's portfolio.

Countries have also made a record contribution to their own vaccine financing needs, with the latest data for 2023 showing that domestic co-financing payments towards vaccine programmes surpassed the US\$ 200 million mark for the first time in Gavi's history.

We cannot, however, afford to be complacent. Continued increases in cofinancing obligations in 2025 and coming years are expected to put further strain on countries. We continue to consult closely with countries and foster dialogue through regional initiatives, which are playing an increasing role in building political will, expanding technical cooperation, and locking in economic commitments to drive forward immunisation, strengthen health systems, and boost regional and global health security.

The Abidjan Declaration (a commitment to sustainable domestic financing by African health and finance ministers), which was agreed in July, and the ASEAN dialogue that Gavi took part in during August are great examples of how countries can come together to find cooperative solutions to shared challenges. Nevertheless, there are undoubtedly important discussions ahead of us as we consider the best way to ensure the sustainability of national immunisation programmes, as is discussed in more detail in Doc 06bii pertaining to the ELTRACO model.



• Continued focus on country ownership and the importance of partnership for country delivery

Two welcome corollaries of the strong and increasing national commitment to immunisation in the countries that Gavi supports are first, an increased and justifiable expectation that global health initiatives are as responsive and agile as possible in delivering against national priorities; and second, an increased expectation that global health initiatives work more closely and more efficiently together to meet these priorities. Both these points are well articulated by the Lusaka Agenda, which Gavi fully supports on an institutional basis and which I, as a former minister from an implementing country, also fully endorse. Indeed, my 180-day plan had a strong focus on country delivery, and work has already begun on identifying opportunities for new and deepened context-appropriate partnerships. This includes, for example, support for joint programme management units in 12 countries; the development of Gavi-Global Fund joint guidance for countries in the complementary use of the respective malaria resources; Gavi-Global Fund joint investments in more than 40 countries to strengthen health information systems; and Gavi, Global Fund and GFF joint engagement in the WHO-led initiative to develop, test and scale the use of common metrics for health system strengthening, all of which work to strengthen regional collaboration, improving coordination, and enhancing our culture of transparency, accountability and focus on outcomes. Building on these inputs, key shifts will be defined for Board approval in 2025 and are discussed further below.

We must ensure that Gavi is able to respond rapidly, effectively and comprehensively to these trends and opportunities over the remainder of the 5.0/5.1 period and the coming 6.0 period. These considerations will continue to shape how we think about the strategic and operational shifts required of the Alliance and the Secretariat as we plan to accelerate our impact and deliver on the ambitious Gavi 6.0 strategy approved by the Board in June.

Those strategic and operational shifts are discussed in more detail in the third section below, following a brief overview of our most recent results.

Rising to the challenge: Gavi programmatic performance through 2023 and 2024

The July release of the WHO/UNICEF Estimates of National Immunization Coverage (WUENIC) for 2023 mean we now have a full picture of the Alliance's progress against our key targets for the 5.0/5.1 period.

In 2023 alone, the Alliance supported countries to immunise more than 69 million unique children, averted more than 1.3 million future deaths and 59 million future disability-adjusted life years (DALYs), and helped countries generate US\$ 16.6 billion in economic benefits.



The Alliance remains on track to reach all 5.0/5.1 targets by the end of the 2021–2025 period, with the exception of the target on zero-dose children; and the coverage targets for DTP3 and MCV1.

A brief summary of the key trends, achievements and risks is given below by each of the four Gavi 5.0/5.1 strategic goals, according to the most recent data available.

Strategic Goal 1: introduce and scale up vaccines

Breadth of protection increased by 3 percentage points in 2023 and now stands at 56%, remaining on track for the Gavi 5.0/5.1 target. Current forecasts also indicate that the Alliance will meet its target of 82 introductions by the end of the 2021–2025 period, driven by malaria vaccine introductions. Other highlights include the full immunisation of more than 14 million girls with HPV vaccine in Gavi-supported countries during 2023, putting the Alliance on target to reach the goal of 86 million adolescent girls reached by the end of 2025.

We are seeing an impressive increase in country demand for Gavi 5.1 programmes as we near the end of the strategic period. This is a testament to countries' strong commitment to immunisation, and the important role of the Alliance in supporting countries over the course of Gavi 5.1. However, this has led to an emerging risk that growth in programmatic demand may exceed available resources over the final 12 months of the Gavi 5.1 period. In the near term, options to manage this risk, including through the repurposing of COVAX AMC interest, will be put before the Board for consideration. Related to this is the consideration of the revised Prioritisation Mechanism for Gavi's Support to Countries, recognising that our current policy is a decade old. Aligned with my commitment to ensure greater transparency and clarity on decision-making processes, we are taking a prudent and proactive approach in updating this policy to ensure it is fit for purpose for Gavi 5.1, noting that use of such a mechanism would be a last resort and only be triggered if the AFC confirms there are no additional resources available to meet demand.

The Secretariat has also developed an approach to respond to recent recommendations that targeted vaccine campaigns be implemented to address the growing immunity gap that has developed in some populations at high risk of yellow fever.

Strategic Goal 2: strengthen health systems and equity

In absolute terms, Gavi-supported countries reached more children with routine vaccines in 2023. However, due to growing birth cohorts, DTP3 coverage in the 57 Gavi-supported countries remained at 80% in 2023. Both DTP3 and MCV1 coverage are projected to undershoot the 5.1 targets, indicating a need for continued investment to expand the delivery capacity of health systems to maintain coverage. This investment has been forthcoming, with a record year of Health System Strengthening (HSS) and Equity Accelerator Fund (EAF) grant applications approvals in 2023 followed by a strong focus on grant implementation in 2024. Similarly, Gavi has reviewed "Big Catch-up" plans from 36 countries, and shipped 77 million vaccine doses in support of these plans. However, risks to effective "Big Catch-up"



implementation require continued monitoring and mitigation, including potential risks around vaccine supply and demand matching, operational funding gaps, and competing priorities at the national level.

Strategic Goal 3: improve sustainability

Despite fiscal constraints and a 33% year-on-year increase in co-financing obligations compared with 2022, all countries fully paid their 2023 obligations with the exception of four countries granted waivers due to severe humanitarian crises. Co-financing obligations for 2024 currently amount to approximately US\$ 270 million, representing a further year on year increase of 26% compared with 2023. Despite this increase, the proportion of countries that have partially or fully met their obligations by the end of the third quarter of 2024 was 77%. This is both the highest proportion in the past five years, and the highest amount in absolute dollar terms, with a new record of US\$ 216 million paid.

Strategic Goal 4: Ensure healthy markets

Four vaccine markets (rotavirus, HPV, cholera and malaria) that were assessed as unhealthy in 2023, and which were discussed at length during May's PPC meeting, have improved throughout 2024.

Overall, however, there remains a high risk related to vaccine supply shortages in the near term due to a confluence of factors, including a lack of adequate manufacturing capacity to meet demand; the decision by manufacturers to exit certain markets due to price evolution and demand unpredictability; country presentation preferences; and unexpected manufacturing interruptions due to technical issues or challenges in the supply chain. The accompanying Risk & Assurance report (see Board Paper 11 Annex A) contains further details, including the many concrete steps that have been taken or initiated under my 180-day plan to improve cross-Alliance and Alliance-country collaboration, data sharing, analysis and insight to create a stronger more resilient supply chain and address supply issues.

In addition, work with partners including UNICEF and Africa CDC to operationalise AVMA has progressed rapidly. Work to develop systems for risk management, financial management, eligibility assessment, and partnership management are progressing to schedule, with first disbursements possible in 2025. Further, the first advisory manufacturing forum for AVMA will be held with the support of the Government of Egypt in February 2025 in Cairo.

External recognition

Gavi's strong and sustained track record of achievement is reflected by several significant moments of recognition for the Alliance. These include the recent award by the UK's Foreign, Commonwealth & Development Office (FCDO) of an A+ "exceeded expectations" to IFFIm for 2023, reflecting the continued relevance of IFFIm to Gavi's mission. And I am very happy to say that UK FCDO have just confirmed that Core Gavi programmes have been awarded an "A" for their performance in 2023.



In addition, Global Health 50/50's 2024 report, released in July, analysed gender equality and diversity in global health leadership across 201 global health organisations, and ranked Gavi in the highest category ("Very high performer"); and recognised Gavi as a "Consistently strong performer". Gender was also a pillar of my 180-day plan, and I look forward to building further on this strong foundation.

Also in July, the 2024 Aid Transparency Index, which is the only independent measure of transparency of the world's major aid donors, ranked Gavi in the highest category ("Very good") for the fifth year in a row. Meanwhile, Gavi's 2017–2023 performance was rated "Satisfactory" across all 12 key performance indicators by the Multilateral Organisation Performance Assessment Network (MOPAN) – a network of 22 member states (of which 21 are Gavi donor countries).

Getting ready for 6.0, delivering on 5.1, strengthening the Secretariat

The coming year will be perhaps the most critical period in Gavi's history.

Crucially, we have the momentum of a strong performance in 2024 and an energetic and engaging replenishment campaign in our favour.

I delivered the keynote presentation as Gavi launched its Investment Opportunity for Gavi 6.0, as well as AVMA, in Paris at the end of June, convening seven Heads of State, 25 Ministers and over 200 senior representatives from key Gavi stakeholders. France, Spain and the United States (US) provided a strong start to Gavi's public replenishment campaign by announcing a total of US\$ 2.4 billion in pledges. Following the launch event, the European Commission (EC) made a high-visibility pledge during UNGA and stated that Europe will do its fair share. To date, US\$ 2.8 billion has been secured, both in direct contributions and through innovative financing sources, against a total requirement of at least US\$ 9 billion of additional funding.

Notwithstanding the political and financial success of the launch event, continued budgetary pressures and elections in many countries, ongoing conflicts, as well as other replenishment processes within global health and development mean that Gavi is operating in a challenging environment. The Secretariat continues to adjust via a dynamic and agile approach, adapting our replenishment campaign to respond to such challenges.

Our planning for 5.1 final delivery, the 6.0 period and beyond must be comprehensive and flexible. The need to adapt with agility and resilience to future challenges lends added impetus to our efforts to strengthen the Secretariat's structure, culture and policies.

Our SLT retreat in October laid the foundations of this planning by agreeing on four Gavi 2025 corporate priorities, each giving rise to a number of action areas that will be implemented and tracked through the delivery cascade (described below). These agreed corporate priorities are as follows:



- Deliver Gavi 5.1 objectives;
- Get ready to deliver Gavi 6.0;
- Build a stronger Gavi Secretariat; and
- Ensure a successful replenishment.

Notably, for our 5.1 objectives we identified three programmatic must-wins, for which we are developing detailed targets and workplans that will be tracked via the delivery cascade. These priorities are:

- Reach zero-dose children, restore routine immunisation and catch-up older children who were missed during the pandemic;
- Deliver on HPV vaccine programme revitalisation ambition: launches, coverage, scale-up; and
- Timely implementation and scale-up of the malaria vaccine programme, and optimise model for collaboration with the Global Fund.

Doc 04 provides a detailed joint Alliance overview of country delivery against 5.0 and 5.1 priorities, alongside the summary above. Additionally, Doc 12 contains further details on the dynamic and agile approach to maximise donor engagement, empower advocates from civil society, and mobilise Gavi's influential champions from both donor and implementing countries in order to reach our replenishment target. The rest of this section therefore concentrates on the concrete steps we have taken, and will take, to prepare for the 6.0 period and strengthen the Secretariat for the future.

Gearing up for 6.0

The Gavi 6.0 strategy one-pager and narrative, which was approved by the Board in June, enables Gavi to respond to the major shifts set out above that affect the operating context for countries and for the Alliance.

Getting ready to deliver Gavi 6.0 starting in January 2026 ('Gavi 6.0 operationalisation') encompasses work across five core workstreams to design or evolve the key sub-strategies, programmatic policies, Alliance partnership approach and Secretariat operating model. The workstreams are described briefly below, and are set out in more detail in Docs 06, 06a, 06b, 06bi, 06bii and 06c.

Theory of change and measurement framework

The Secretariat is converting the Gavi 6.0 strategic framework into a theory of change, which will guide Gavi's approach to measurement, evaluation and learning during the Gavi 6.0 period, ensuring alignment with its strategic goals. This workstream will also support the development of a comprehensive measurement framework, outlining key indicators and targets (for Board approval respectively in June and December 2025). For further information see Doc 06c Annex B.



Finalisation of key sub-strategies

This workstream covers three key areas, each of which will shape the design of policies, partnership priorities and the Secretariat operating model:

The Health Systems (HS) Strategy for Gavi 6.0 will optimise Gavi's health systems investments to improve equity and sustainability by implementing strategic shifts that will be considered for Board approval in June 2025. For further information, see Doc 06a.

A second key area concerns the need for a new approach to fragile and humanitarian settings in order to address growing challenges in these contexts. It builds on lessons learnt since the creation of a dedicated Fragile & Conflict Countries segment in the Secretariat three years ago, and the introduction of the Fragility, Emergencies and Displaced Populations (FED) Policy and the Zero-Dose Immunisation Programme (ZIP). For further information, see Doc 06 Annex B.

The third area concerns the revision of the Market Shaping Strategy for Gavi 6.0.

Updated programmatic policies

Gavi's programmatic policies are being updated to refine the criteria and mechanisms that implementing countries will use to apply for and deploy Gavi funds.

The Funding Policies Review (FPR) looks at the ELTRACO model, and the Health Systems and Immunisation Strengthening (HSIS) Policy. The ELTRACO model will adapt to manage the increasing risks of unsuccessful transition and growing inequities.

Key updates to the HSIS policy (in line with the HS Strategy) include consolidating Gavi's funding levers; changing the allocation methodology to include a stronger focus on immunising beyond the first year of life; and ensuring greater programmatic and financial sustainability. For further information, see Doc 06bi.

Additionally, Gavi is working to improve immunisation programmes by supporting countries to prioritise and optimise their vaccine portfolios. The goal is that immunisation-related decisions taken at national level are country owned, evidence based and sustainable.

Evolution of the partnership approach

The Alliance partnership model will evolve to address ongoing challenges and meet new objectives. Work has begun, including consultations with countries, Alliance partners and donors, such as at the October Alliance Partnerships and Performance Team (APPT) meeting.

Gavi will also accelerate collaboration with other global health initiatives (GHIs), in the context of the Lusaka Agenda. Gavi supports Africa CDC's leadership in the Lusaka



Agenda, and actively participates in regional discussions to align efforts with Africa's health priorities. Gavi's contribution to the Lusaka Agenda started with the Global Financing Facility and the Global Fund to Fight AIDS, Tuberculosis and Malaria. The work is structured around four key workstreams, with a fifth in development: (1) Country Engagement, to align GHI support with national health priorities to ensure country-led, demand-driven health programmes; (2) Health Systems Strengthening, to identify collaboration avenues to build resilient health systems; (3) Malaria, to scale up reach of malaria vaccines and coordinating broader malaria control efforts with GHIs; (4) Enabling Functions and Operations, to streamline back-office functions and operational efficiencies across GHIs to maximise programmatic impact; and (5) Tuberculosis *(in development)*, to reduce TB prevalence through joint investments in vaccination and health system integration. See Doc 13 Annex A for further information.

Strengthening the Secretariat

Internal reform has been a priority since I arrived. Effective and sustainable delivery is only possible from a solid institutional base. I use the term 'the Gavi leap': to encompass the optimisations required for the final delivery of 5.0/5.1, detailed planning for 6.0, and the continued transformation and strengthening of the Secretariat to ensure it is in the strongest possible position to deliver for countries and adapt and respond to future challenges.

This kicked off with the 180-day plan, which included a focus on strengthening the capabilities and culture of the Secretariat, strengthening delivery, and creating a practice of developing and delivering against a single plan.

Many of these required changes to the Secretariat have either been deployed or have been initiated during the implementation of my 180-day plan following the step-wise and transparent process detailed below.

First, a range of **external reviews** were commissioned and undertaken, including reviews of the:

- Secretariat leadership ('N-1') structure;
- Secretariat internal governance structures including SLT, internal forums and committees;
- Secretariat decision-making processes and approval pathways;
- Secretariat internal policy and guidance documents; and
- Key initiatives aimed at reform including EVOLVE and Operational Excellence

These external reviews were supplemented by a series of internal deep dives, as well as internal audits of procurement processes and of Human Resources recruitment and selection policies and processes. Together, these external and internal reviews informed a first wave of organisational changes.



This first wave of changes included an update to my leadership structure around five clusters, including elevating our important country facing functions, revamping the scope of the Chief Operating Officer role and creating a new Chief Digital Transformation Officer role. The changes to the structure were intentionally modest to minimise disruptions during this important period while enhancing coherence and accountability. Further, a series of Organisational Improvement internal deep dives informed the stabilisation of the Secretariat operating expenditure and workforce for 2025, including the approach to consultants.

Looking ahead, we have developed an approach to review the Secretariat and ensure it is fit for purpose for Gavi 6.0. It is critical that we set the Secretariat up to effectively deliver on Gavi 6.0 with an empowered workforce and a lean Secretariat that delivers impact through partnerships with transparency and accountability for results. I am looking forward to discussing this further next week when we meet.

In summary, the key changes implemented during the first wave are described below under four key areas.

1. Institutional structures for decision-making in the secretariat

In order to reduce fragmentation and redundancy, enhance transparent, consensusdriven and evidence-based decision-making, and drive delivery for countries, four SLT sub-groups have been created, and various forums and committees disbanded. Briefly, the subgroups and their roles are as follows:

- The Programme Leadership Team will monitor progress and provide guidance on programmatic priorities, including strategic goals and must-wins, programmatic performance, Gavi 6.0 operationalisation, financial forecast, programmatic policy & strategy changes, top risks, etc.
- The Resource Mobilisation and External Partnerships sub-group will oversee Gavi's replenishment strategy, including the communications approach, as well as ongoing resource mobilisation efforts.
- The Reform and Prioritisation sub-group will oversee key initiatives to build a stronger Secretariat including Grant Management Reform (EVOLVE), other former OE initiatives, work to strengthen the Secretariat's internal culture, and the Secretariat's digital investments to increase coherence and consistency across Secretariat-wide initiatives.
- The Secretariat Management sub-group will oversee internal Secretariat operations including operational policies and guidance, Secretariat management reporting, annual budget process, cross-departmental operational activities including procurement, and the management of internal Secretariat top risks.

These new sub-groups have kicked off and are already bringing benefits in ensuring there is alignment between different forums, creating clarity on escalation pathways, and allowing for holistic and comprehensive reviews of cross-cutting initiatives and decisions.



2. Reform of end-to-end grant management process

One of my key priorities since joining Gavi has been the Grant Management Reform initiative, EVOLVE. The success of this initiative is vital to Gavi's mission and delivering on Gavi 6.0, and I am personally sponsoring the project to ensure we achieve meaningful results. I am deeply invested in ensuring its success.

To move forward with urgency, I have restructured the project to deliver phase 1 by the end of Q1 2025, with full implementation by the end of the year. We have adopted a decentralised approach, where individual SLT members and their teams take ownership of specific pilots and workstreams. These workstreams are already in motion, with project team members embedded within Secretariat teams to accelerate progress; tracking of a daily workplan is enabled by weekly RPG meetings.

Additionally, a small central Project Management Office (PMO) within the Office of the CEO provides continued oversight and my close engagement.

3. Revamp of policy and decision-making frameworks

An organisation's policies and decision-making frameworks are the foundations of rapid, effective and accountable action. I have prioritised updating and streamlining the Secretariat's decision-making processes, approval pathways and policy management to ensure they appropriately balance empowerment with accountability and oversight.

Key actions being taken are structured around the different levels/types of delegated authority and decision-making process to inform a comprehensive and holistic approach:

- The Board Delegation of Authority (DOA) Policy is proposed to be updated to better reflect the Secretariat leadership structure and is on the Board agenda for approval.
- Delegation of authority and decision-making processes within the Secretariat are being updated as follows:
 - Legal instruments: The Secretariat Delegation of Signatory Authority for Legal Instruments (DOSA) is being updated to reflect the new leadership structure, as well as clarify and streamline approval pathways and accountabilities.
 - Financial commitments and disbursements: A series of concrete policy measures and actions have been taken to improve controls and enhance checks and balances, including implementing additional approval controls in the contract lifecycle management tool; strengthened approval processes for additional resources and headcount leveraging the SLT Sub-Groups; decision to implement hard controls in SAP for programmatic approvals and



disbursements; changes to the procurement framework; decision to establish an internal committee for programme approval based on IRC recommendations; and update of the prioritisation mechanism to ensure it is fit for purpose.

 Policies: A central repository for all internal guidance documents has been created to ensure there is one source of truth and a comprehensive overview of all policies and guidance documents. This has informed the development of a workplan to ensure that documents are updated, sunset and/or merged as required, as well as an overarching policy to govern our approach to policies and guidance documents going forward. Further, informed by an independent review, the HR recruitment and selection guidelines are being updated with oversight from the SLT Secretariat Management Sub-Group.

4. Architecture, systems and processes to monitor delivery against a central plan

As part of the 180-day plan, the 'Delivery Cascade' was institutionalised. The Delivery Cascade is a set of processes, workplans, workflows, review meeting cadences and tools, including Business Intelligence and Artificial Intelligence-powered dashboards, designed for efficient delivery processes and effective implementation. One of the Delivery Cascade's Tracking dashboards enables review of progress updates from initiative owners against pre-defined targets and facilitates resolution of bottlenecks for delayed initiatives. It promotes transparency and self-accountability; and informs decision-making and course corrections. This system was set up for the 180-day plan, and going forward will be used to track the delivery of 2025 corporate priorities, and thereafter for facilitating the delivery of Gavi 6.0.

Conclusion

The coming year will see a relentless focus on delivering against our four Gavi 2025 corporate priorities. We have strong momentum behind us for the delivery of our 5.1 objectives, and while challenges persist, we have a clear plan ahead. Our detailed discussions on 6.0 will be informed by a comprehensive body of preparatory work, and set the course for operationalisation in January 2026. We are working hard to deliver on our replenishment goals to be able to support the renewed momentum within countries and the growing demand. And all of the above will be facilitated by a Secretariat that is stronger, more resilient, even more collaborative, and ultimately even more effective at delivering impact and responding to the priorities of implementing countries.

Your continued guidance and wisdom as Board Members will be as vital as ever as we enter this crucial period of strategic transition. The resilience of our performance in 2023 and 2024 should not mask the challenges we face. As I note above, the Alliance and the countries we support face significant headwinds in the near term, from fiscal constraints to increased fragility and vulnerability. Adapting to these trends will require foresight, detailed planning, a relentless focus on delivery and, in some cases, difficult



decisions as we adjust priorities and correct our course in the context of a dynamic external environment. None of the above work will be easy, but it is essential, and I am confident that under the stewardship of our newly restructured SLT, and with your continued dedication and guidance, we will make rapid progress as we deliver on our priorities and deliver on our mission to leave nobody behind with immunisation. I very much look forward to seeing you all in Indonesia.