



AFC Chair Report Alliance R&R Board update

READ-OUT

December 2025

gavi.org

Executive summary

In July 2025, as part of Gavi 6.0 recalibration, the Gavi Board approved the establishment of a Foundational Fund at Global/Regional (\$160M) and Country (\$155M) levels for Foundational Functions, as well as the consolidation of other country technical assistance into the Consolidated Cash Grants (\$290M)

In the context of a significant (\$3.0B) reduction of the 6.0 strategy, the drop in Core Partner funding is also significant:

- The Global/Regional Foundations envelope represents a ~45% reduction (~56% inflation-adjusted) vs. 5.1
- The Country Foundations envelope represents ~half of Core Partner total 5.1 TCA funding; Core Partners are expected to receive a portion of the cash envelope for TA – this *could* be a similar share as in 5.1, but level is currently unknown
- Partners are concerned they will be unable to deliver the bodies of work essential for 6.0 under recalibrated envelopes

In this context, the Core Partners and the Secretariat were asked by the Board jointly undertake an exercise to:

- Specify the core bodies of work required to deliver the 6.0 strategy – as well as which organization should lead on each
- Make informed decisions on priorities within the bodies of work
- Reduce duplications and inefficient ways of working to avoid redundancy and free up resources – with agreed-upon steps including clarifying roles and responsibilities, improving coordination, strengthening mutual accountability in practice, and streamlining processes
- Explore how to best address gaps in delivery of critical bodies of work for 6.0

The cross-Alliance Steerco guiding this work has agreed on a number of solutions to address the issues. As a next step, we are bringing this work to the Alliance Leadership Group (ALG) for decisions to be taken, including the need for additional resources. The SteerCo will work with the Secretariat on how best to address shortfalls if solutions require board decision-making

5-year view of TA nominal funding allocation 5.1 vs. 6.0

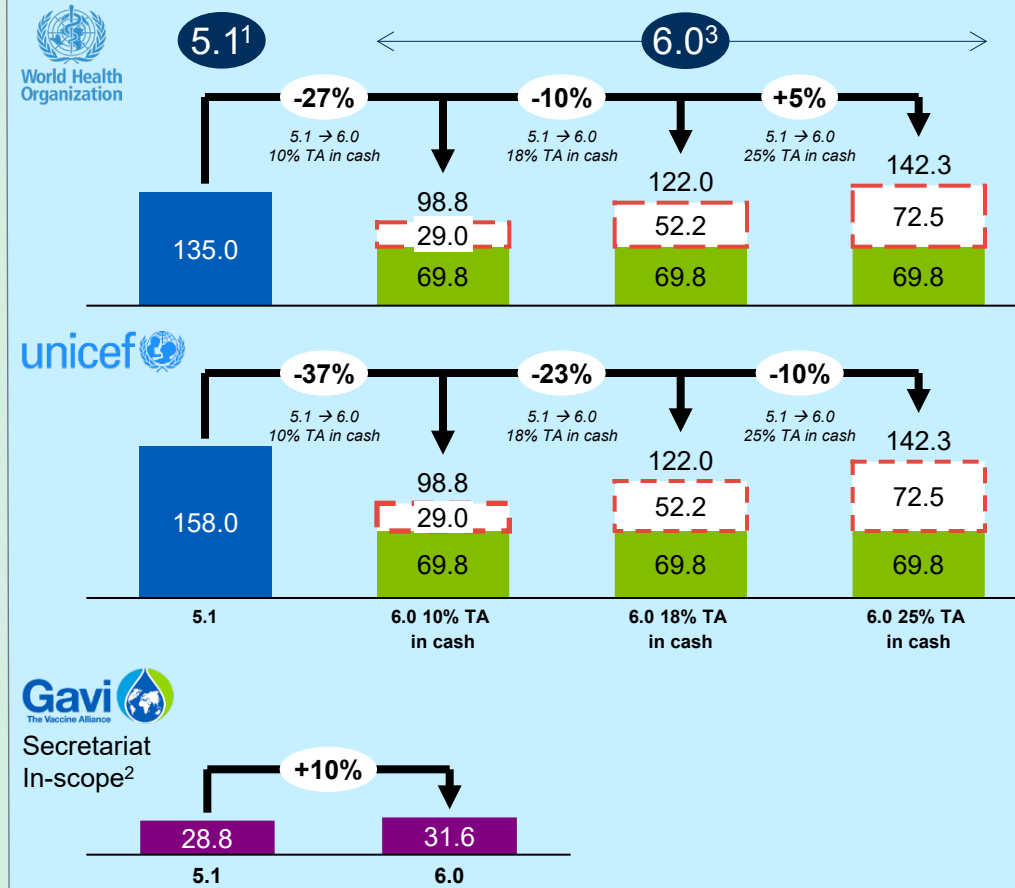
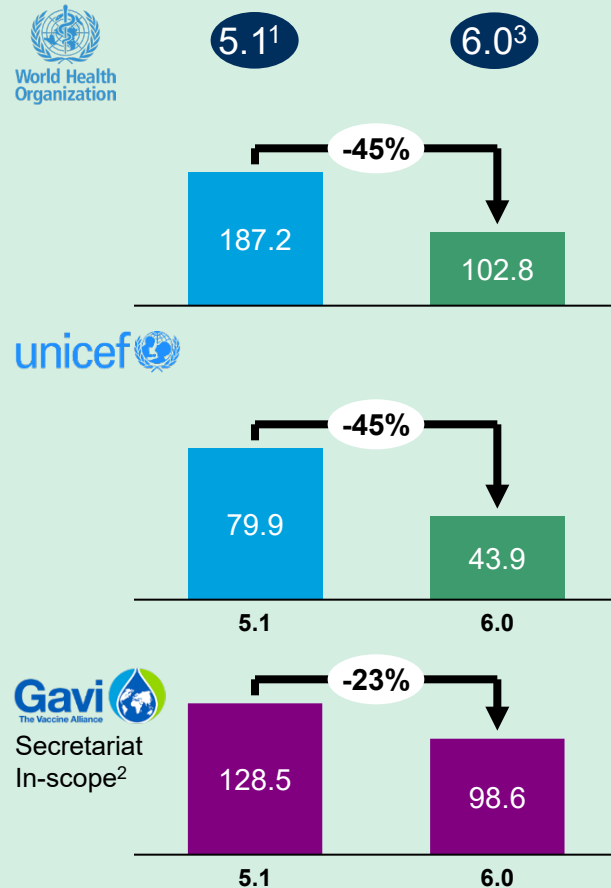
PRELIMINARY

FS (incl FS-like SFA) G/R F

TA in Consolidated Cash Grant CF TCA

Global and Regional, mn USD

Country, mn USD



In 5.1, WHO and UNICEF jointly received ~57% of the full TCA

For 6.0, the share of TA core partners will receive from in Consolidated Cash is not yet known. 4 scenarios shown here:

- With 10% of TA in cash each, combined share would be 44% of country-level partner support (TA within cash + TA)
- With 18% of TA in cash each, combined share would be 55% of country-level partner support, very similar to 5.1
- With 25% of TA in cash each, combined share would be 64% of country-level partner support, somewhat higher than 5.1
- Note: if no TA is received in cash, WHO + UNICEF would receive only CF, ~31% of country-level partner support

The estimates above assume that ~15% of consolidated cash (~290mUSD) actually goes to TA

1. World Bank received 8.5 mn in FS in Gavi 5.1 and will be allocated 4.7mn in G/R foundations in Gavi 6.0; WB received 8mn in TCA in 5.1, the CF allocation in 6.0 is not yet confirmed
 2. Reflects the recurring operational costs of Secretariat staff supporting foundational functions, noting these roles may also contribute to broader work
 3. WHO/UNICEF split is illustrative
- Source: Gavi 2025. Note: Gavi 5.1 – Global & Regional includes 2021 actuals, 2022-2025 grant and FS under SFA; excludes C-19, PPPR and 4.0 refund; Country includes TCA commitments as of v23 forecast (including TCA Reserve), excluding BCU). Gav 5.1 FS ceiling is 281M (253M + 28M of FS under SFA); excludes C-19, PPPR and 4.0 refund; Gavi 5.1

Change in FTE resourcing ability indicated by 'inflation adjusted' translation of nominal 5.1 vs. 6.0 funding

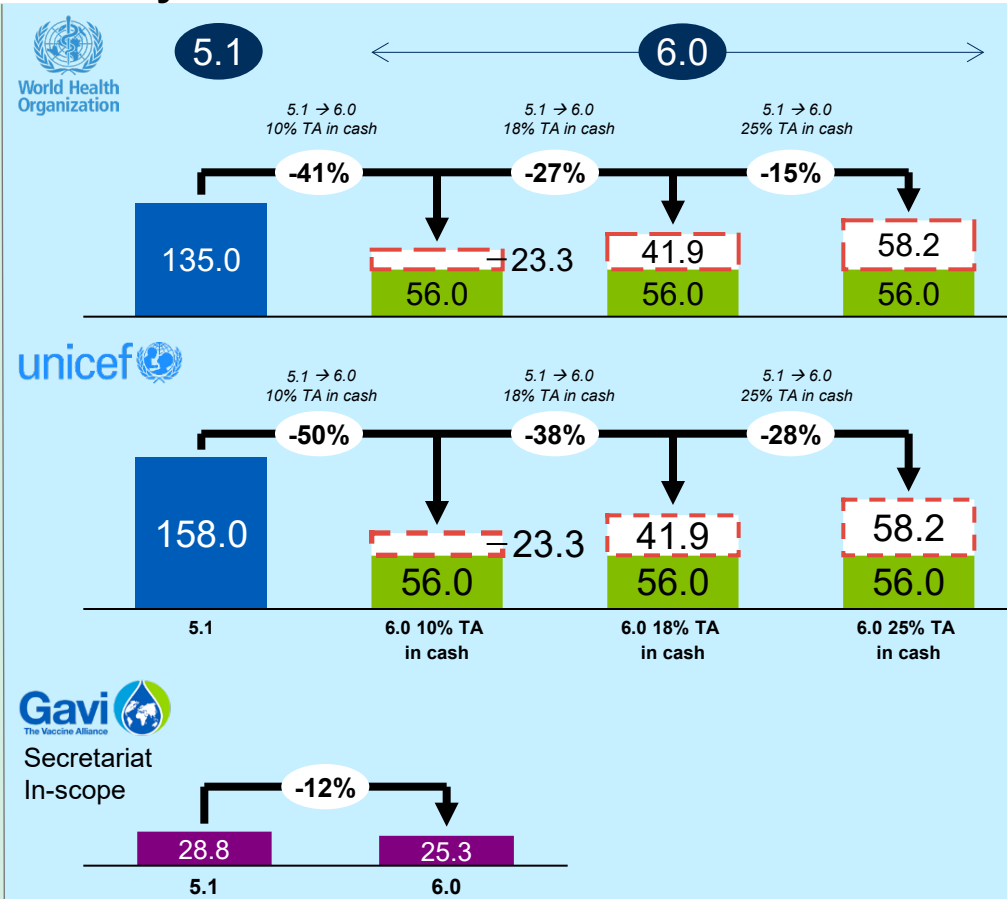
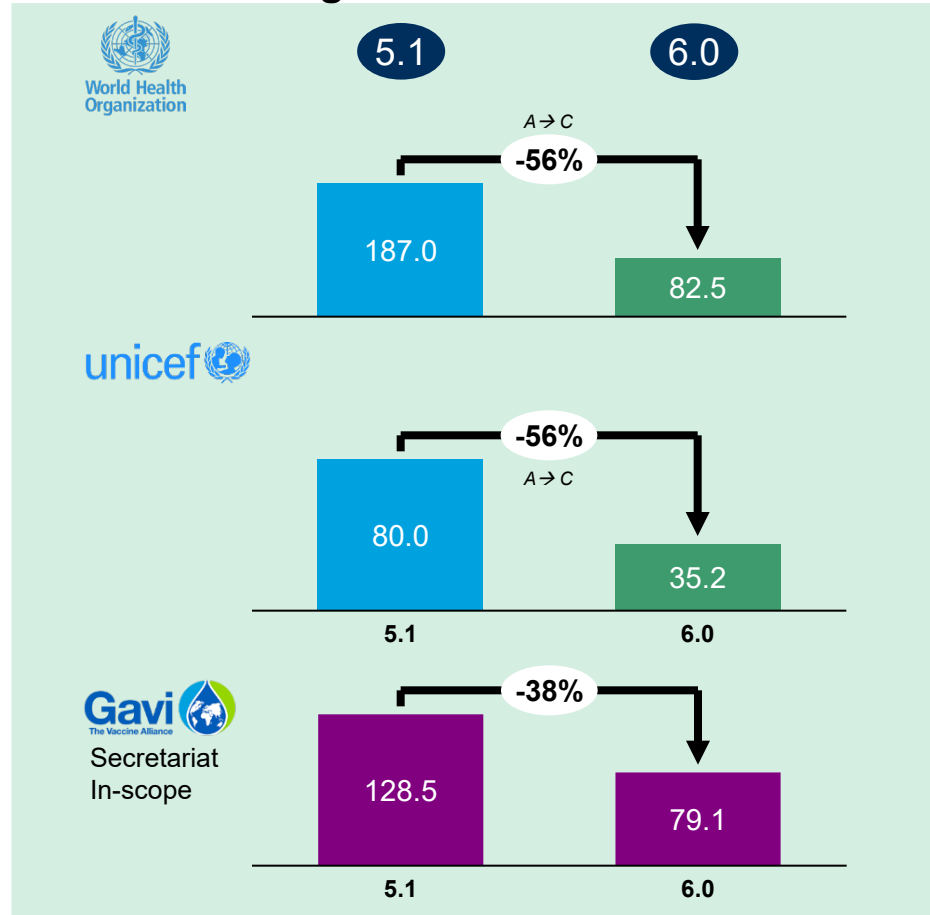
PRELIMINARY

FS (incl FS-like SFA) G/R F

XX% Expected decrease in FTEs TA in Consolidated Cash Grant CF TCA

Global and Regional

Country



In 5.1, WHO and UNICEF jointly received ~57% of the full TCA

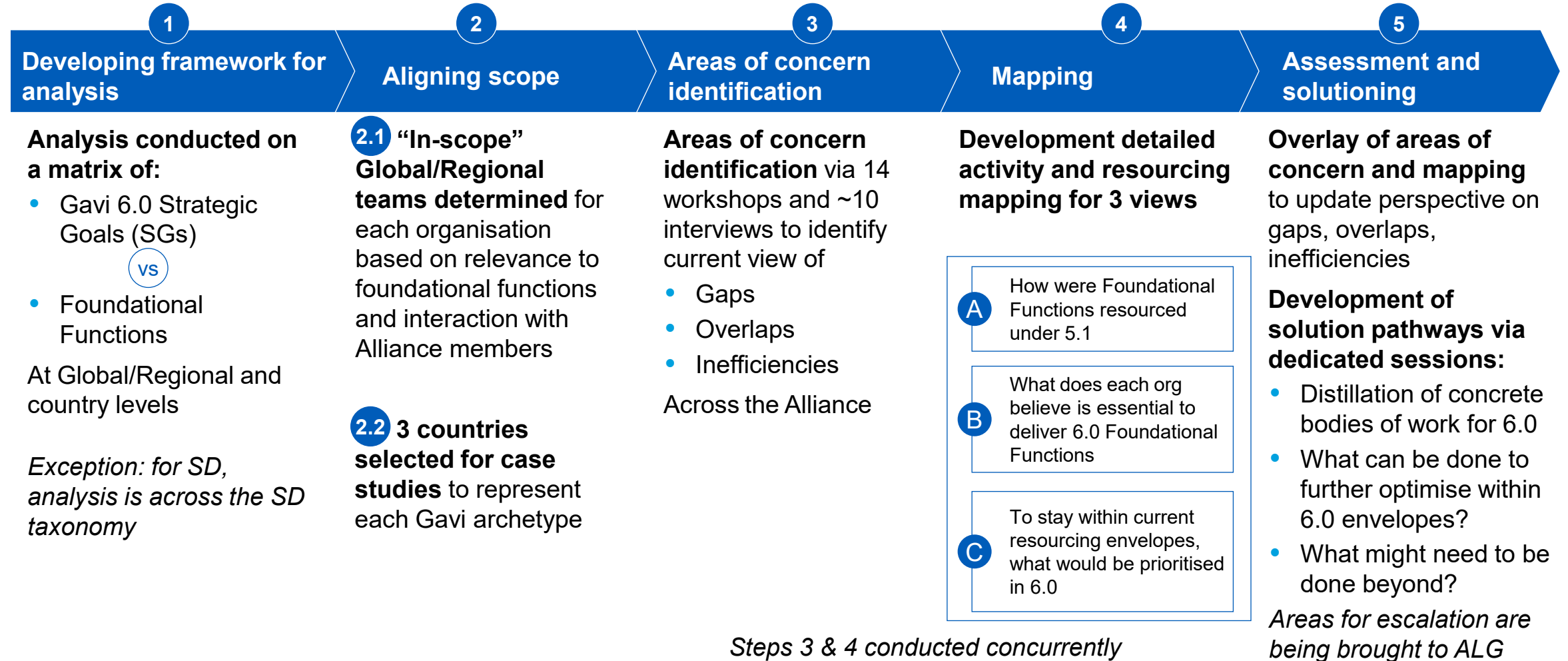
For 6.0, the share of TA core partners will receive from in Consolidated Cash is not yet known. 4 scenarios shown here:

- With 10% of TA in cash each, combined share would be 44% of country-level partner support (TA within cash + TA)
- With 18% of TA in cash each, combined share would be 55% of country-level partner support, very similar to 5.1
- With 25% of TA in cash each, combined share would be 64% of country-level partner support, somewhat higher than 5.1
- Note: if no TA is received in cash, WHO + UNICEF would receive only CF, ~31% of country-level partner support

The estimates above assume that ~15% of consolidated cash (~290mUSD) actually goes to TA

6.0 view adjusted for 4-5% annual inflation over five years to reflect higher future staffing costs and the resulting change in FTE purchasing power in Gavi 6.0, highlighting the decrease in FTE capacity from Gavi 5.1 to 6.0. Assuming constant number of FTEs and geographical distribution of FTEs and split of operational cost.

An in-depth approach was deployed to understand Gavi 6.0 Foundational Functions resourcing and to assess areas of concern and solutions



Overall approach governed by a cross-Alliance steering committee

This effort looked at areas of work within each of the Foundational Functions, mapped to the Gavi 6.0 strategic goals

Global/Regional Foundational functions

Normative Guidance and Public Health Goods:

Supporting programme policy, strategy, decision-making, regulatory and programmatic guidance

Immunisation

Programme Monitoring & Data:

Strengthening monitoring mechanisms, data availability and insight development

Partnership, advocacy, strategy, governance:

Supporting Gavi Alliance, strategy, decision-making, partnerships and overall management

Global and regional coordination, technical support and quality assurance

Country Foundational functions

Immunisation programme support

Vaccine and cold chain management

Data

Demand

Outbreak/emergency preparedness and response

Strategic Goals

SG1: INTRODUCE AND SCALE UP VACCINES	1A: Strengthen countries' prioritisation and optimisation of vaccine programmes, appropriate to their context
	1B: Support countries to introduce and scale up vaccines for prevention of endemic, epidemic and pandemic diseases including beyond infancy
	Routine programmes without campaigns
	Programmes with campaigns
	1C: Ensure equitable and timely access to mechanisms to respond to outbreaks, epidemics, and pandemics
SG2: STRENGTHEN HEALTH SYSTEMS TO INCREASE EQUITY IN IMMUNISATION	Outbreaks/epidemics/Pandemics
	Diagnostics
	2A. Enable countries to extend immunisation to zero-dose children and missed communities, integrated with primary health care, including through addressing gender-related barriers and building resilient demand
	2B. Ensure all children are fully immunised by maintaining and strengthening routine immunisation with vaccines required through second year of life
	2C. Support countries to adapt systems to routinely deliver vaccines to populations outside early childhood through targeted and catalytic interventions
SG3: IMPROVE PROGRAMMATIC & FINANCIAL SUSTAINABILITY OF IMMUNISATION PROGRAMMES	HS pillars in service of all of 2A, B, C (incl. Service delivery and demand generation, HRH, Supply chain, data & digital, Governance, leadership & management, and Gender)
	3A. Strengthen regional, national and subnational political and social commitment to immunisation, including through increased domestic public resources
	3B. Ensure sustainable transition through stronger capacity of eligible countries to maintain immunisation performance
	3C. Engage self-financing countries to maintain performance and catalyse critical vaccine introductions
SG4: ENSURE HEALTHY MARKETS FOR VACCINES AND RELATED PRODUCTS	4A. Drive healthy vaccine markets for Gavi- supported and self-financing countries, including acceleration of access to new high-impact, affordable vaccines and delivery innovations
	4B. Enhance regional vaccine supply security, in support of regional manufacturing expansion ambitions
	4C. Develop sustainable markets for vaccines against outbreak, epidemic, and pandemic-prone diseases

Several areas of overlap and inefficiency were identified; solution spaces have been aligned for most

NON EXHAUSTIVE

SG

Key concern areas related to overlaps and inefficiency expected to persist in 6.0

ACROSS SGs

- Role clarity and partner coordination in **providing TA to countries**
- Role clarity and Alliance coordination for **country-level advocacy**

SG1: INTRODUCE AND SCALE UP VACCINES

- Cross-organizational balance of **vaccine programme technical support** from global/regional level to countries

SG2: STRENGTHEN HS TO INCREASE EQUITY IN IMMUNISATION

- Role clarity and protocols for **risk identification, escalation, and response** across SG2 programmatic implementation areas, including around the zero dose agenda

SG3: IMPROVE PROGRAMMATIC & FIN. SUSTAINABILITY OF IMMUNISATION PROGRAMMES

- Role clarity and partner and analytical support orchestration for **transition forecasting & planning TA**
- Role clarity and protocols for **risk identification, escalation, and response** related to co-financing

SG4: ENSURE HEALTHY MARKETS FOR VACCINES AND RELATED PRODUCTS

Incl. Supply Division

- Process flow and efficiency for **forecasts, market shaping roadmaps, and financial reporting**, while maintaining quality and fiduciary requirements
- **Occasional overlapping activities for emergency/outbreak contracting**, including potential impact of the Pandemic Accord

Solutions proposed for areas of concern – with applications across Alliance (incl. Secretariat)

- Role and responsibility clarification for a specific area of work
- Implementation of joint accountability framework, building on the PAF (inclusive of Secretariat)
- Establishment of clear escalation protocols with defined thresholds/triggers, steps, roles
- Standardisation and streamlining of core processes to improve efficiency (including via tech)
- Cross-Alliance operating models that allow for staff to collaborate as “one team” in a more formal way

Global/Regional Bodies of Work are being aligned for each Strategic Goal; priority gaps are being identified based on what G/R Foundations can fund

Core bodies of work for each 6.0 Strategic Goal and within each Foundational Function are being developed through this process, which needed to be clearly defined and allocated between core partners

These bodies of work are being prioritized for what can be covered by the Global/Regional Foundations envelope, resulting in alignment on bodies of work that are:

- Truly highest priority for G/R Foundations funding
- Areas where lower service level is appropriate / acceptable in this context
- Areas that cannot be covered by G/R foundations but present potential risks to 6.0 delivery

Based on critical gaps that remain, alternative resourcing may need to be considered

Example interim output for SG1; resourcing allocation and responsible organization actively being refined

DRAFT	
SG1	
Core Bodies of Work – example for SG1 (note: actively being refined)	
SG1A <i>Strengthen countries' prioritisation and optimisation of vaccine programmes, appropriate to their context</i>	<ul style="list-style-type: none">Development of guidance and tools to support countries and developing the VPOP processCommunications and cascading around VPOP and links to NISDissemination of VPOP tools through regional level and via country facing teams/offices, including capacity buildingG/R support to NITAGs and EPI teams (including how to embed with NIS)Ongoing monitoring of roll-out and identifying if countries need ongoing support
SG1B <i>Support countries to introduce and scale up vaccines for prevention of endemic, epidemic and pandemic diseases including beyond infancy</i>	<ul style="list-style-type: none">Guidance and tool development and dissemination to guide introductions and Vx useMonitoring country readiness and status of NVIs; risk identificationEnsure supply and resolves supply-demand imbalancesOptimizing and increasing effectiveness of preventative campaigns via tools, development and dissemination, dataOversee/monitor preventative campaignsMonitor/evaluate performance and outcome to guide future optimization/targeting/improvementEngagement across sectors for 2YL and AdolescentG/R support to countries, RWGs, and technical working groups on NVI and campaign planning/preparation
SG1C <i>Ensure equitable and timely access to mechanisms to respond to outbreaks, epidemics, and pandemics</i>	<ul style="list-style-type: none">Set Gavi GHS approach and internal tools/SOPsStandards, tools, training development and dissemination for diagnostics, labs, surveillance, and outbreak responseG/R support to countries in risk assessment, outbreak investigationG/R support to countries' requests for Vx and applicationsOversee/monitoring of outbreak response campaignsLead coordination mechanisms for outbreak responseManage emergency stockpiles and facilitate accessOversee Vx logistics for outbreak responseG/R TA and training across preparedness / response pipelineSupport country root cause analysis for repeated outbreaks
Cross-cutting	<ul style="list-style-type: none">SAGE Secretariat that underpins global guidanceSet overall Gavi Vx program approach and monitor/provide accountability for Gavi Vx program activitiesGlobal partnership coordination related to Vx programsMonitor/track overall progress of vaccine programs via global immunization data

Path forward via the ALG, leveraging AFC/PPC and Board engagement

Reinstated ALG to deal with truly cross-cutting Alliance issues over the 6.0 period (outstanding decisions from this work as the first point of order)

There are potentially gaps that cannot be resourced by improving efficiency or ways of working. The Steering group is working to specify the areas of substantial risk

Where are we now

- Extensive SteerCo working sessions held to identify body of work prioritization, solutions to overlaps and operating model challenges, and priority risks/gaps

First meeting – by EOY

What will be required

- Decisions on overlaps / operating model issues escalated by Steerco
- Agreement on resourcing implications – is there a need for additional resourcing that should be escalated to the Board
- Commitment to path forward, including refreshing and operationalizing mutual accountability framework applicable to all partners and the Secretariat

Secretariat Governance to clarify pathway of potential escalation to board if required

Ongoing

What needs to happen over time (applicable across all partners and Secretariat)

- Development of scorecard and tracking of execution of critical next steps
- Tracking of delivery of bodies of work for 6.0 via the Partnership Accountability Framework (PAF)
- Respond to the next wave of cross Alliance challenges that emerge
- Periodic (biannual) read-outs to AFC/PPC on progress and challenges

Ongoing steps must be done in an Alliance-wide manner – perhaps with overall coordination from the Secretariat (team TBD)