

Annex A: COVAX Reporting Framework

Section A: Update on Gavi's COVAX Facility and COVAX AMC Monitoring, Evaluation and Learning (MEL) strategy

The table below provides some of the key highlights and updates on progress against the core elements of Gavi's COVAX Facility and COVAX AMC MEL Strategy since the December 2022 Gavi Board.

MEL strategy component	Key activity	Highlights / update (May 2023)
<i>Cross-cutting</i>	COVAX Theory of Change	COVAX Facility and AMC theory of change for 2023 drafted, mapping against the objectives and goals as presented to the Gavi Board in December 2022.
<i>Monitoring</i>	COVAX Reporting Framework	Reporting against COVAX Reporting Framework made available for PPC and Board. The 2023 Reporting Framework is further streamlined and accompanied by short qualitative updates for some key 2023 objectives (see below).
	Complementary monitoring to COVAX Reporting Framework	COVAX Facility, Gavi Secretariat teams and core COVAX partners continue to monitor aspects of the Facility and AMC to a much greater extent beyond the metrics currently captured in the topline Reporting Framework. Examples include: <ul style="list-style-type: none"> • COVID19 Vaccination Insights Reports generated by WHO covering a range of disaggregated analyses on uptake, supply received and external delivery financing; • Monitoring of progress across subgrants funded through COVID19 Delivery Support; • Other operational metrics and analyses across supply, allocation, deliveries and in-country implementation gathered internally.
	Core country monitoring and reporting on COVID-19 / COVAX	COVAX continues to utilize data reported via the WHO-UNICEF electronic Joint Reporting Form COVID-19 module and WHO regional COVID-19 vaccination dashboards to gather core reporting from COVAX participants. Gavi recently co-convened a Global Meeting with WHO, UNICEF and CoVDP to set forth a pathway for revisions to the core minimum dataset and reporting on COVID-19 vaccination going forward. Recipients of COVID19 Delivery Support funds are expected to report back on a six-monthly basis to Gavi.
<i>Evaluation</i>	Multi-stage independent	Itad (www.itad.com) was selected as the independent evaluator for the first stages

	evaluation of COVAX Facility and COVAX AMC commissioned by the Gavi Secretariat	<p>(evaluability assessment and phase 1) of the multi-stage evaluation of the COVAX Facility and COVAX AMC. The evaluability assessment and evaluation design phase was completed in January 2022. This report can be found here: https://www.gavi.org/programmes-impact/our-impact/evaluation-studies/gavis-covax-facility-and-covax-amc-evaluability-assessment-evaluation-design-study</p> <p>Phase 1 of the multi-stage evaluation broadly covers the period from conceptualization of COVAX through till end 2021. The Executive Summary of the independent evaluation, along with a high-level response prepared by the Secretariat was circulated to key governance committees and stakeholders in April 2023. The final report, along with the accompanying formal evaluation management response was posted on the Gavi website in May 2023: https://www.gavi.org/programmes-impact/our-impact/evaluation-studies</p> <p>The evaluation report was rated as “fully met or exceeded Gavi quality standards” by the three Evaluation Advisory Committee focal points who conducted the quality assessment.</p> <p>This phase 1 report includes findings across all evaluation questions, but with particular focus on design and process / implementation through till end 2021. Key results, and fundamental aspects of the COVAX model such as delivery in country, will be evaluated to a greater extent through the phase 2 of this evaluation, which is expected to over the period 2022-2023. The report from phase 2 is expected to be delivered during the course of 2024.</p>
Learning	Formal and independent documentation of key learnings	Key learnings on COVAX design, results, impact and challenges for both broader Gavi work and future pandemic preparedness and response are incorporated into the Gavi-commissioned independent multi-stage evaluation of the COVAX Facility and COVAX AMC.
	COVAX-led learning efforts on documenting key learnings for course-correction and continuous improvement	<p>COVAX and Gavi continue to generate and document learnings in complement to the commissioned independent evaluation work. Examples of learning related efforts undertaken to date include (but are not limited to) the following:</p> <ul style="list-style-type: none"> Dedicated learning agenda on the Humanitarian Buffer, including high-level briefs: https://www.gavi.org/news-resources/knowledge-products/10-learnings-alliance-covax-humanitarian-buffer

		<ul style="list-style-type: none"> • Report on key learnings for future pandemic preparedness and response: https://www.gavi.org/sites/default/files/covid/covax/COVAX_Key-Learnings-for-Future.pdf • Syntheses of findings and experiences related to COVAX Monitoring Agents funded via COVID19 Delivery Support; • Focused documentation of learnings around certain aspects of the COVAX Facility's work – summaries of which are expected during the course of 2023. <p>Highlights will be shared through various means (such as PPC and Board materials, COVAX governance meetings, learning briefs, published White Papers etc).</p>
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Section B: Overview of the COVAX Reporting Framework

The COVAX Reporting Framework contains topline performance metrics, mapped to the evolving iterations of the COVAX Facility and COVAX AMC Theory of Change.

It is important to note that the Framework focuses primarily on metrics that measure aspects of COVAX that Gavi has accountability for, while also incorporating a high-level end-to-end perspective of COVAX Facility and COVAX AMC goals and objectives. It incorporates both metrics that measure performance directly attributable to COVAX Facility and COVAX AMC as well as performance metrics where Gavi / the COVAX Facility play a more contributory role.

In terms of other aspects to note while reading the COVAX Reporting Framework:

- **Indicator definitions:** An appendix containing COVAX Reporting Framework indicator definition sheets are available upon request.
- **Updates made to the COVAX Reporting Framework in 2023:** The COVAX Reporting Framework has evolved over time with COVAX vision, strategy and updated priorities for 2023. While some metrics remain consistent to those reported on in 2021 and 2022, others are new to reflect 2023 shifts and several metrics reported on in 2022 have been sunsetted (such as metrics pertaining to the humanitarian buffer).
- **Targets:** Given the evolving nature of the COVID-19 pandemic and COVAX strategy and programming, we used three principles to establish targets: 1) Ensure consistency with targets already in public domain/sensitised with key stakeholders; 2) Targets should exist where appropriate and meaningful; and 3) Monitoring directionality is sometimes sufficient or most appropriate.
- **Estimates of coverage attributed to COVAX:** While we continue to produce estimates of both persons vaccinated and coverage of COVID-19 vaccination supported by COVAX, the methodology is currently under review, particularly in view of growing complexity (e.g. scheduling, evolving product guidance). The methodology is co-developed with Alliance partners and subject to an external peer-review in 2022. These estimates may still be utilized but are not formally part of the COVAX Reporting Framework in 2023.
- **Impact:** We continue to engage with Imperial College, London, on impact modelling related to COVID19 vaccination. Imperial recently updated their retrospective estimates of

deaths averted due to COVID19 vaccination (from the start of the pandemic through till end December 2022). The key highlights of these updated estimates are as follows:

- Approximately 2.6m of the estimated 7.9m deaths averted by COVID-19 vaccination by the end of December 2022 across AMC91 may be attributable to COVAX-supported doses (34% of total deaths averted across AMC91). For reference, Imperial's previous estimate of COVAX impact extended through June 2022. At that time, they estimated of the 5.1m total deaths averted by COVID-19 vaccination in AMC91, 32% could be attributed to COVAX.
- The impact of COVAX-supported vaccinations on deaths averted is proportionally greater among AMCs in 2022, than in 2021, with 28% of total deaths averted by vaccination in 2022 attributable to COVAX vaccines (compared to 13% in 2021).
- COVAX's impact is most pronounced amongst AMC participants classified as low-income (where up to 75% of deaths averted are estimated as attributable to COVAX supported doses).
- **Reporting on actuals for May 2023 PPC:** The data compiled and presented for this report submitted to the PPC was compiled in early April 2023, unless noted otherwise.
- **Final report on 2022:** An appendix containing the year-end report against the 2022 COVAX Reporting Framework is available upon request.

Section C: The COVAX Reporting Framework

COVAX Reporting Framework: Board June 2023 Report

1.0 Total funds available as part of the Pandemic Vaccine Pool (in part to respond to worst-case scenario should this arise)	\$2.7bn available as part of the Pandemic Vaccine Pool	<ul style="list-style-type: none">As per the 2022 Gavi COVAX AMC Investment Opportunity, Gavi has ensured that funds are available as part of the Pandemic Vaccine Pool to not only help towards reaching countries' coverage ambitions, but also to mitigate supply and demand risks and to ensure funds are available in the event of a change in the epidemiological trajectory of the current pandemic.
2.0 Weighted average price per dose	\$4.74 USD for AMC participants	<ul style="list-style-type: none">The WAP is based on Jan 2021-April 2023 deliveries. For AMCs, the WAP is US\$ 4.74 - up from US\$4.73 for Jan 2021-Dec 2022 deliveries.The WAP for all COVAX participants (SFP and AMC) is US\$ 4.92 - up from US\$4.91 for Jan 2021-Dec 2022 deliveries.
3.0 Percentage of delivery funds available that have been disbursed or fully committed	<div><div>69% (\$1,101M) of total available funds (\$1,593M) disbursed or fully committed</div><div><p>Target: 75% fully disbursed / committed</p></div></div>	<ul style="list-style-type: none">\$1.101bn of COVID19 Delivery funds have been fully committed by Gavi to date\$1.02bn have been fully disbursedGavi has fully approved a total of \$1.344bn of COVID-19 Delivery Support Funds to dateThese funds are used across a portfolio of grants, which include grants / windows that participants can directly apply to, specific support for vaccine confidence related work, support for cold chain equipment such as Ultra Cold Chain, technical assistance and stock management and innovations among other things.Gavi is now disbursing funds approved under the third window for COVID Delivery Support. \$116M has been disbursed to 22 Gavi eligible/AMC participants, and \$59M has been disbursed to UNICEF to respond to Gavi non-eligible/AMC participants.Data as of 31 May 2023

COVAX Reporting Framework: Board June 2023 Report

<p>4.0 Number of AMC participants with approved CDS3 applications that have included programmatic integration related activities</p>	<p>36 / 39 (92%) of approved CDS3 applications have programmed integration related activities</p> <div><div></div></div> <p>Target: >80% approved applications</p>	<ul style="list-style-type: none">Two approved applications to date have not budgeted activities linked to integration (their programme focuses on increasing coverage in high priority groups, but not explicitly in an integrated manner). The third approved application did include reference to integration activities in their narrative, but there was a labelling issue in the budget template.There have been a total of 55 CDS3 applications received to date. 53 / 55 submitted applications have mentioned integration in their proposals (noting that 3 countries have submitted multiple requests).For the eligible AMC 61 countries, 5 countries will not apply for CDS3 (DPRK, Haiti, PNG, Tanzania, Zimbabwe). A further 3 countries never indicated if they would apply (Indonesia, Myanmar and Vietnam).Of the 8 submitted applications that have not proposed integration activities in their submissions, this is either because funding already received is being used towards these efforts or potentially in some cases issues with labelling in the budget template.
<p>5.0 Total number of doses delivered by COVAX</p>	<p>1.75bn doses delivered to 87 AMC participants</p>	<ul style="list-style-type: none">899m APA doses delivered to AMCs851m donated doses delivered to AMCs2,451,600 doses delivered to two approved Humanitarian Buffer recipients1.96bn doses delivered across all COVAX participants (AMC, SFP and Humanitarian Buffer)The five AMCs who have not yet received COVAX doses: Burundi, Eritrea, Marshall Islands and Micronesia (AMC eligible, but not confirmed or active participants) and DPRK (have been allocated doses, but yet to accept)Source: UNICEF COVID19 Procurement Portal as of 23 May 2023
<p>6.0 Percentage of requested doses offered (volume)</p>	<p>100% of requested doses (volume) allocated</p> <div><div></div></div> <p>Target: 100% requested doses allocated (volume)</p>	<ul style="list-style-type: none">Requested doses are now allocated via rolling allocations. As of May 2023, 100% of doses requested via rolling allocations (100m) were met in terms of volumes (among completed requests), with 96% also met in terms of primary preferred product.As per the PPC paper, recent signals from donors suggest that the volume of mRNA donations will be lower than was expected at the start of 2023. COVAX is exploring mitigations to ensure it has sufficient volumes of suitable vaccines to meet country needs and preferences for the rest of 2023.

Persons vaccinated and protected

7.0 Number of persons vaccinated and coverage reached with COVID-19 vaccines (All vaccine sources)

AMC: 2.15bn reached with complete primary series (55% coverage)

- AMC 92 coverage with at least one dose: 62%
 - 16% reached with a booster dose
- AMC 91 (excluding India): 47% coverage with complete primary series; 55% coverage with at least one dose
 - 16% reached with a booster dose
- Source: WHO COVID-19 vaccine dashboard as of 14 May 2023; DPRK and Eritrea not yet vaccinating
- Note: Slight downward revision of total persons reached compared to May PPC 2023 update is due to a revision downwards in the number of doses administered in Pakistan

8.0 Booster dose coverage reached with COVID-19 vaccines (all vaccine sources) amongst health care workers and older adult populations

AMC health care workers: 57% booster dose coverage



Target: >65% HCWs boosted

AMC older adult population: 22% booster dose coverage



Target: >30% older adults boosted

- 72 AMCs ever reporting health care worker (HCW) coverage
 - 82% reached with complete primary series
- 75 AMCs ever reporting older adult population
 - 69% reached with complete primary series
- While boosting coverage for health care workers in AMC is already well above 50%, reaching and boosting older adult populations remains a challenge. Gavi and the broader Alliance are working with AMCs to facilitate cross-country learnings, financing and technical assistance towards strengthening platforms and delivery strategies used to reach these population groups.
- Source: Vaccine Delivery Partnership data as of 26 May 2023