## GAVI'S ENGAGEMENT IN POLIO ERADICATION

BOARD MEETING **Michael F Thomas, Stephen Sosler** 6-7 June 2018, Geneva, Switzerland





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## Gavi's involvement in polio eradication

- July 2005: Board decision to provide time-limited support for mOPV stockpile
- November 2013: Board decision to support IPV introduction with policy waivers

#### **Dedicated funding:**

 US\$ 430 million provided by GPEI donors (BMGF, DFID and Norway) for the period 2013-2019

#### **Policy exceptions:**

- Co-financing
- Eligibility
- Transition policy
- June 2017: Board decision to continue IPV support through 2020 under same policy and funding conditions
- June 2018: Board to decide whether to support IPV through 2020 with core Gavi resources
- December 2018: Final Board decision on VIS investment case, including potential IPV support post-2020



## Current polio situation and recent developments

#### **Eradication progress**

- 2018: 10 cases, 3 endemic countries
- Global certification no earlier than Q2 2021

#### **IPV** supply and price

- Improved supply in 2018, but remains fragile through 2020
- New vaccine tender price increase of 60% - 140% for period 2019-2022\*



## SAGE recommendations

- 1 full or 2 fractional doses
- Catch-up vaccination of missed birth cohorts
- Move to 2-dose schedule

#### wP Hexavalent

- Progress made by some manufacturers on Hexavalent development
- Future Hexavalent scenarios to be incorporated into the VIS investment case



\* Across 1 dose, 5 dose and 10 dose presentations

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## IPV support post-2020 (VIS)

Primary considerations

Global public good – Insurance policy

Alignment with SAGE recommendations

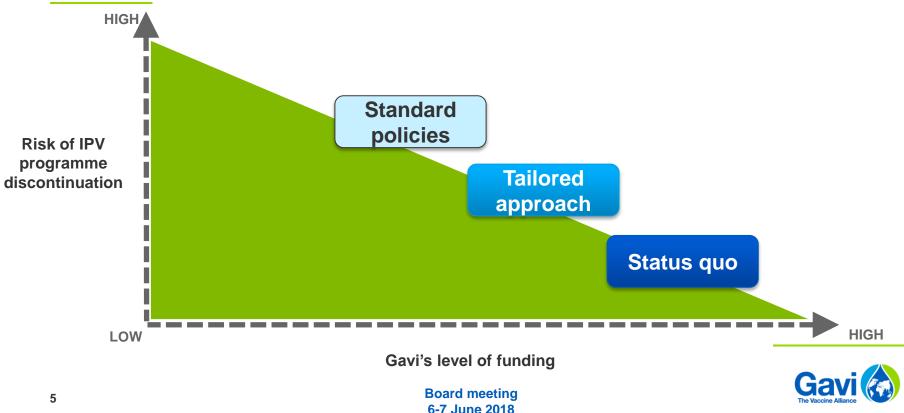
#### Balancing risk appetite and costs

Funding levers	Country inclusion, eligibility	Country funding level	Funding duration	wP Hexavalent
	<ul> <li>70 countries (<i>status quo</i>)</li> <li>Tailored based on risk</li> <li>Standard eligibility + transition policy</li> </ul>	<ul> <li>Fully funded (<i>status quo</i>);</li> <li>Tailored based on risk</li> <li>Standard co-financing policy</li> </ul>	<ul> <li>10 yrs from bOPV removal</li> <li>Tailored based on risk</li> <li>Standard eligibility + transition policy</li> <li>Until certification</li> </ul>	Primary series (i.e. pentavalent)

Programme	Year of certification	Supply	Dosing, vax schedule	Duration of use	Price	
factors	2021	Sufficient for 2 dose schedule	2 full or fractional doses	10 years	WAP informed by recent tender	

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# IPV support post 2020 (VIS): trade-off between risks and cost



## IPV support post 2020 (VIS): illustrative scenarios

### **Estimated costs to Gavi**

(in US\$ millions)

	Scenarios	Description	2021-2025	2026-2032	Total
Risk of programme discontinuation	Standard policies	<ul> <li>Apply standard co-financing and eligibility policies</li> </ul>	650	450	1,100
	Tailored approach	<ul> <li>Waive co-financing and eligibility policies for polio endemic, low income and preparatory transition countries</li> <li>Tailored co-financing for accelerated and fully self-financing countries</li> </ul>	800	800	1,600
	Status quo	<ul> <li>Maintain current exceptional waivers on co-financing and eligibility</li> <li>Fully finance 70 countries</li> </ul>	900	1,200	2,100



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# Broader engagement in polio eradication: *Polio transition*

Risk level	Countries
Endemic	Afghanistan, Nigeria, Pakistan
Very High	Chad, Somalia, South Sudan
High	DR Congo, Ethiopia, Sudan
Medium	Angola, Cameroon
Low	Bangladesh, India, Indonesia, Myanmar, Nepal, all low probability

- Limited risk to Gavi in most countries
- Six fragile countries considered high-risk
- JAs increasingly being leveraged to determine immunisation-critical functions and capacities for timelimited bridging support



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# Broader engagement in polio eradication: *Post Certification*

### **Post-Certification Strategy (PCS) developed**

### WHO draft strategic action plan presented to WHA

Essential polio functions	Part of current activities	Comparative advantage	
Strengthen immunization systems	✓	✓	
Ensure availability of affordable IPV	✓	✓	
Strengthened VPD surveillance and lab capacity	✓	✓	
<ul> <li>Support for vaccine stockpiles (IPV and mOPVs)</li> </ul>			
Strategies for sustained IPV use and financing			
Polio surveillance – AFP and environmental			
Containment of polioviruses			
Polio outbreak preparedness, detection and response			



## PPC recommendation to support IPV for 2019-2020

- POB request primarily a consequence of the extension of the polio eradication timelines
- Global supply constraints have resulted in underspend (2013-2018) and additional costs for vaccination of missed cohorts 2019-2020

Projected cost 2019-2020 Secured IPV donor funds available	_	US\$ 300 million US\$ 100 million	
Estimated incremental cost	=	US\$ 200 million	



## Recommendation

The Gavi Alliance Programme and Policy Committee recommends to the Gavi Alliance Board that it:

<u>Approve</u> the use of core resources for Gavi's support for inactivated poliovirus vaccine (IPV) for the period 2019-2020, noting that the financial implications associated with this approval are expected to be approximately US\$ 200 million.









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