09 – VACCINE BUDGET POLICY

BOARD MEETING
Johannes Ahrendts
1-2 July 2026, Geneva, Switzerland

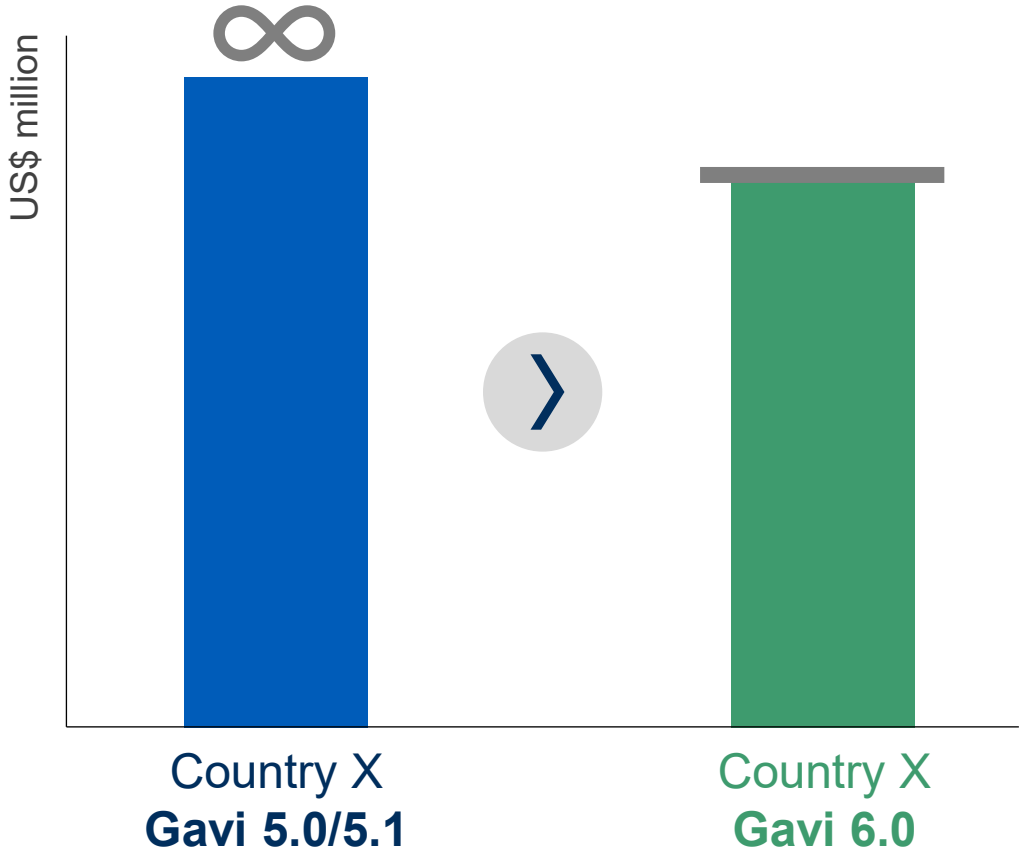
gavi.org

One Vaccine Budget for the entire 6.0 Strategic period

Vaccine budgets make planning and budgeting more predictable and help guide countries to prioritise

From:

Country applied for as many vaccine programmes as needed (if they had capacity & could co-finance) at any time



To:

Country obtains vaccines within a set budget amount at the start of the strategic period

Board approved design in December 2025. Now hardcoding decision into policy and adding approach for annual review and update of Vaccine Budgets.

Objectives and principles of Vaccine Budgets aligned with direction of Gavi 6.0 strategy

Objectives aligned to Gavi 6.0 Strategic Goals

- Maximise health impact and value for money
- Minimise risk of disruptive outbreaks
- Ensure equitable access to vaccines
- Improve financial and programmatic sustainability
- Protect market health

Principles

- Country flexibility
- Simplicity
- Continuity of support

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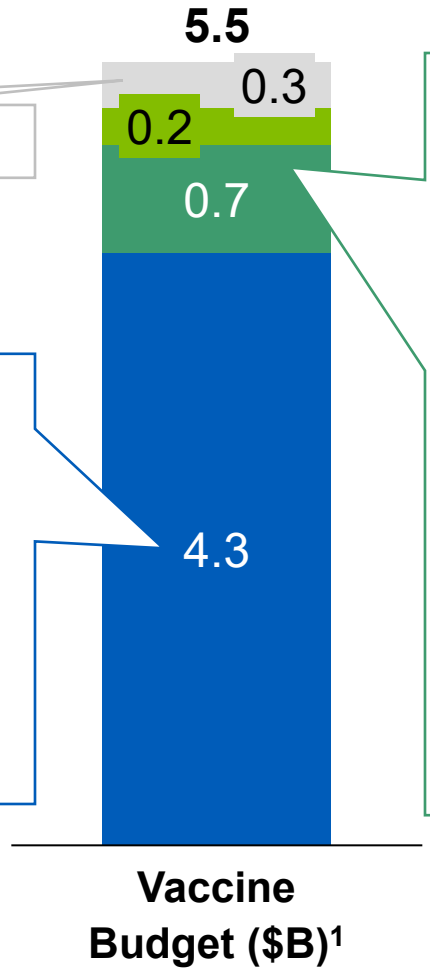
December 2025 Board approved core design of the Vaccine Budgets

Gavi contingencies



Guaranteed budget (US$ 4.3 billion): for core set of vaccines with highest value for money or global relevance (e.g. polio)[2]

- Based on Gavi financial forecast
- Irrespective of whether introduced by country or not

Discretionary budget (US$ 0.9 billion): Flexible allocation for additional vaccines on top of guaranteed budget. Not necessarily sufficient for all needs.

Two components:

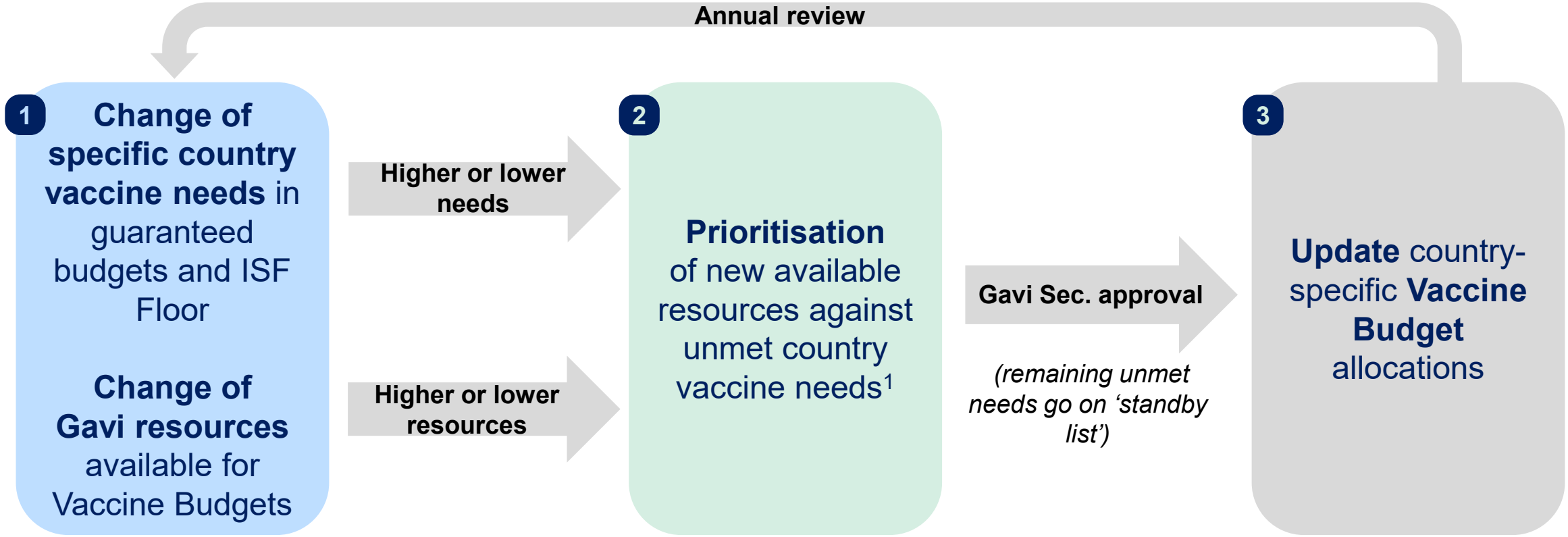
- **Floor for Initial Self-Financing countries ('ISF floor'; US$ 0.7 billion)**: sufficient for introduced vaccines and Malaria vaccine scale-up/new introductions (up to 70%) [3]
- **Formula-based allocation (US$ 0.2 billion)** driven by financial capacity and burden of disease

Countries have received their Vaccine Budget allocations in March 2026. Updated allocations will be sent in July 2026.

1. v23.2 (May 2026) financial forecast and VB input forecast 2. Groupings not based on WHO guidance 3. Up to 70% of moderate to high transmission areas

Annual review of guaranteed Vaccine Budgets and ISF Floor to ensure no funds are left idle and countries can deliver on plans

- **Countries** are expected to **manage within their existing Vaccine Budgets**
- Vaccine Budget allocations updated in **annual review** under **specific circumstances** (change of specific country vaccine needs and/or Gavi resources available)



1. Or determine where in Vaccine Budgets funding is drawn from, if less Gavi resources for overall Vaccine Budgets available

Some changes of country vaccine needs always considered in the annual review, others if above materiality threshold

Changes **always considered** – *examples*	Changes **considered if above materiality threshold** – *examples*
• Vaccine introduction or programme dropped • Change in/compliance with Gavi policies, (e.g. co-financing, eligibility), Gavi funding guidelines • More or less Gavi resources available for Vaccine Budgets	• Vaccine price change or supply constraints • Country product switch to cheaper product • Programme scope changes (e.g. population or coverage)

Logic to prioritise new available resources against country vaccine needs has been established per PPC steer

Prioritisation hierarchy for new available resources	
1a.	Maintain continuity of existing vaccine programmes in guaranteed budgets
1b.	Maintain continuity of existing programmes in discretionary budgets (ISF Floor only)
2a.	Support coverage expansion across existing vaccine programmes in guaranteed budgets
2b.	Support coverage expansion across existing vaccine programmes in discretionary budgets (ISF Floor only)
3.	Support new introductions and campaigns in guaranteed budgets and ISF Floor
4.	Support Vaccine programmes in discretionary budgets outside ISF floor (i.e. new introductions and campaigns in all countries and continuity of existing vaccine programmes in PT and AT countries)

New resources allocated from top to bottom[1]

'Standby list' captures country vaccine needs not met during prioritisation

1. If less funding for Vaccine Budgets available, hierarchy would apply in the opposite direction

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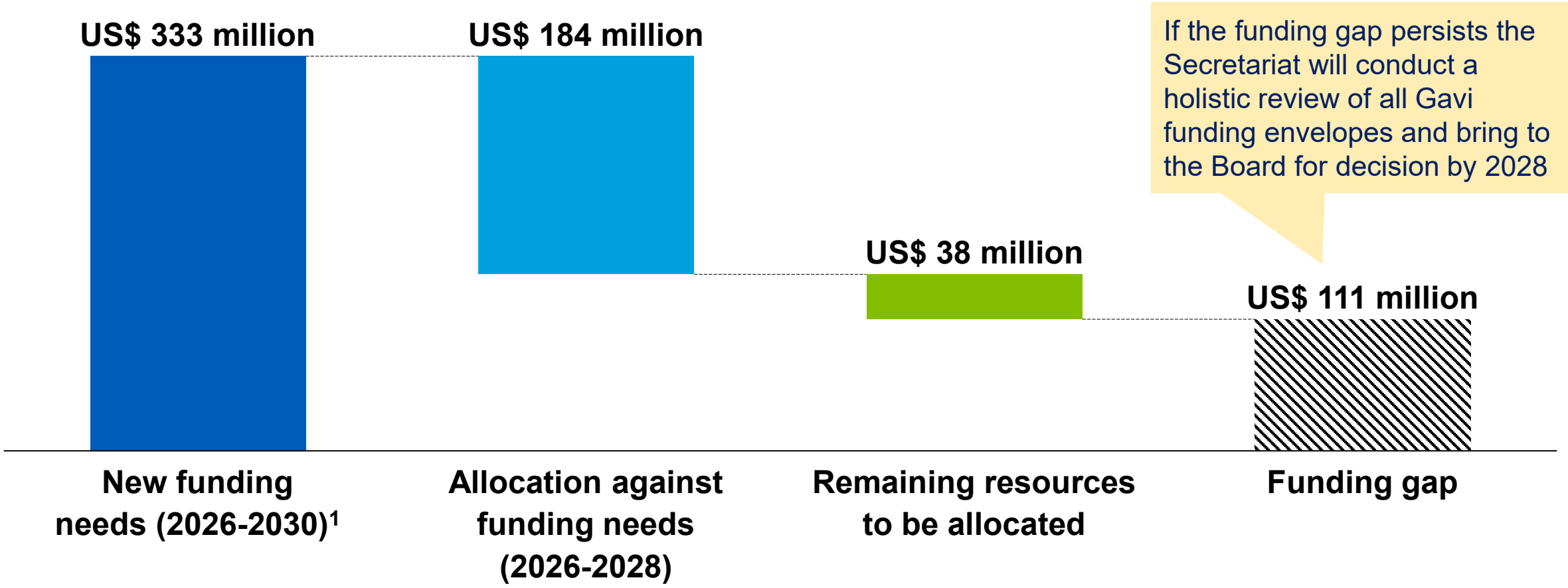
US$ 184 million allocated against new country vaccine needs in guaranteed VBs & ISF floor using prioritisation logic



1. For guaranteed budgets and ISF floor

New philanthropic donors signalling initial interest in providing additional Vaccine Budget funding

Context

- **Support for malaria vaccine in discretionary Vaccine Budgets reduced in the lead-up to 6.0**, with initial cap of 85% of moderate/ high transmission areas, further lowered to 70% during 6.0 recalibration
- Fungible **malaria funding "floor" in discretionary Vaccine Budgets for ISF countries** covering 70% of moderate/ high transmission areas
- **Countries currently implementing above 70% may start scaling back programmes in 2027**

Opportunity for impact

- New philanthropic donors have signalled interest in potentially providing **substantial additional funds for Gavi 6.0 strategy**
- Specific interest in the **funding gap in guaranteed Vaccine Budget in priority**, and also **malaria programme** and **potentially other vaccines**
- New support could, among others, **reverse cuts made to malaria during 6.0 recalibration** (e.g. raise ISF floor to 85%), with funding fungibility in discretionary budgets assumed

Guidance: Would the Board be supportive of Gavi signalling to ISF countries implementing above 70% of moderate/ high transmission areas to pause malaria scale-back plans (not lower than 85%) while additional Vaccine Budget funding is being mobilised?

Recommendation

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

- **Approve** the Vaccine Budget Policy attached as Annex B to Doc 09.
- **Note**:

a) Additional resources in the financial forecast v23.2 (approximately US$ 222 million) will be allocated following the revised prioritisation logic. This would likely cover most of the additional 2026 and 2027 needs from the draft v23.2 financial forecast.

b) If a funding gap in guaranteed budgets and the Initial Self Financing (ISF) floor persists, the Secretariat will conduct a holistic review of all Gavi funding envelopes to fill that gap and bring it to the Board for decision.

c) The Secretariat will conduct a review of the Vaccine Budget policy in 2028 and update it as needed.

The Gavi Secretariat **requests** the Gavi Alliance Board to note that additional donor resources available to Gavi (if any) will be allocated to fill the remaining funding gap in guaranteed budgets and the Initial Self-Financing floor pending AFC confirmation of funding availability.

Thank you