Subject	**Ukraine Fragility Support**
Agenda item	**13**
Category	**For Decision**

Executive Summary

This paper proposes to the Gavi Board that it **exceptionally extend the support** for Ukraine across 2026-2027 under the Gavi Resilience Mechanism (GRM).

Following Ukraine's classification as an upper middle-income country in 2025, the Gavi Board approved an exceptional extension of fragility support to Ukraine through June 2026, endorsing up to US$ 10 million (18% of middle-income countries (MICs) use case allocation under GRM funds). While Gavi support in 2025 and early 2026 stabilised vaccine supply and prevented coverage declines amid conflict and infrastructure damage, these gains are fragile. Ongoing war related disruptions, constrained financing, energy system attacks, and rising zero-dose prevalence persist, and 2024 WHO/UNICEF estimates of national immunisation coverage (WUENIC) indicate coverage remains insufficient to fully protect the population. Without continued support, immunisation coverage is likely to decline, increasing outbreak risks and potential regional health security implications.

Action Requested of the Board

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

a) **Approve, exceptionally:** (1) a no cost extension of Ukraine's US$ 10 million fragility support as approved by the Gavi Board in December 2025, from 1 July 2026 until 30 June 2027; and (2) a costed extension of US$ 6 million until 31 December 2027 contingent on additional funds being available through a special programme to support Ukraine.

b) **Request** that the Secretariat explores alternative funding mechanisms to finance the Gavi Board approved US$ 10 million fragility support to release pressure from the funds in the Gavi Resilience Mechanism.

Next steps/timeline

The Secretariat will:

a) Work with the Government of Ukraine to develop proposals for: i) the no cost extension period ending 30 June 2027; and ii) the costed extension to 31 December 2027, contingent on additional funds being available.

b) explore alternative funding mechanisms to finance the US$ 16 million fragility support to Ukraine, to release pressure from the funds in the Gavi Resilience Mechanism.

Previous PPC or Board deliberations related to this topic

In May 2026 Programme and Policy Committee meeting book: Doc 11 *Fragility Support to Ukraine,* Doc 11 *Annex A Implications and anticipated impact* and Doc 11 *Annex B Considerations to proposed approach for exceptional support to Ukraine (2026-2027)*

In December 2025 Board: Doc 14 *Review of decisions, Decision 13*

Report

1. Background

1.1 Ukraine was reclassified by the World Bank as an upper middle-income country in 2025, rendering it ineligible for Gavi support in the Gavi 6.0 strategic period. The reclassification reflects three factors: a rebound in economic activity (real GDP growth of 5.3%), a substantial population decline of 15% since the invasion, and rising prices of domestic goods and services. Despite this shift, poverty has worsened significantly, with rates increasing from 20.6% in 2021 to 35.5% in 2023, according to the National Academy of Sciences of Ukraine, a trend also corroborated by World Bank survey data[1].

1.2 In December 2025, the Gavi Board approved an exceptional extension of fragility support for Ukraine through 30 June 2026, endorsing up to US$ 10 million from the Gavi Resilience Mechanism (GRM). Following an Independent Review Committee (IRC) in March, Gavi approved US$ 5,868,641 for implementation within the Board-mandated timeframe, comprising US$ 4,979,835 for routine immunisation vaccine procurement via UNICEF and US$ 888,806 in cash support through UNICEF and WHO to address critical immunisation needs for the 2026 cohort. US$ 4.1 million remains unutilised as Gavi prioritised critical needs for the January – June 2026 period.

1.3 In recommending full approval, the IRC noted that the proposal builds on prior Gavi investments, while highlighting ongoing risks related to conflict-driven uncertainty and long-term sustainability. The IRC also noted the need for clearer plans for post-Gavi support to extend possible.

1.4 In 2026, Ukraine's approved fragility support amounts to US$ 5.9 million, equivalent to 59% of the Board-approved US$ 10 million ceiling, and approximately 11% of the US$ 55 million MICs use case under the GRM for Gavi 6.0. The requested amount is lower than the US$ 8 million approved in 2025, reflecting the availability of vaccine stock in-country.

2. Gavi 5.1 Strategic period

2.1 Ukraine, a lower-middle-income country, was eligible for fragility support under Gavi's Fragility, Emergencies and Displaced Populations (FED) policy.

2.2 Gavi approved US$ 8 million in fragility support for 2025 as a funder of last resort, fully covering routine vaccine procurement and enabling the vaccination of 1.6 million children. Additional support through Alliance partners expanded outreach to zero-dose and under-immunised children, including those in conflict-affected, hard-to-reach, and internally displaced persons.

[1] World Bank (2025). Listening to Citizens of Ukraine Survey

2.3 This support secured the first uninterrupted supply of routine vaccines since the war began, contributed to improved coverage across key antigens, including the third dose of the Diphtheria, Tetanus, and Pertussis vaccine (DTP3) (+6%), the first dose of Measles, Mumps, and Rubella vaccine (MMR1) (+5%), the second dose of Measles, Mumps, and Rubella vaccine (MMR2) (+12%), and the third dose of the inactivated poliovirus vaccine (Polio3) (+7%).

2.4 Gavi is also supporting national introduction of the Human papillomavirus (HPV) vaccine through a US$ 950,086 technical assistance grant. Rollout began in January 2026, with over 47,000 girls vaccinated (11% coverage) using a one-dose schedule. Ukraine prioritised this introduction in a conflict setting because it delivers high, long-term cancer prevention impact, protecting adolescent girls.

2.5 Significant immunity gaps persist in Ukraine. Measles outbreaks occurred in early 2025, zero-dose prevalence nearly doubled between 2023 and 2024, and national coverage remains insufficient. Without continued support, coverage is likely to decline, increasing outbreak risks and pressure on Ukraine's health system, with potential regional health security implications.

3. Ukraine Conflict

3.1 As of January 2026, 10.8 million people require humanitarian assistance and 3.7 million remain internally displaced, including more than one-third of Ukraine's children (2,589,900)[2]. Civilian casualties escalated sharply in 2025, with 2,514 deaths and 12,142 injuries—31% higher than in 2024 and 70% higher than into 2023[3].

3.2 Repeated attacks on energy infrastructure across over 20 regions have caused prolonged power outages, severely disrupting essential services. These disruptions threaten vaccine cold-chain integrity, forcing reliance on fuel-powered generators and increasing operational and financing pressures on the immunisation programme.

3.3 The war has significantly weakened Ukraine's fiscal capacity. Ongoing conflict imposes substantial daily costs (~US$ 172 million)[4], and total recovery needs are estimated at US$ 588 billion—nearly three times 2025 GDP[5] —severely constraining the government's ability to sustainably finance essential health services, including immunisation.

[2] UNICEF (2026). More than a third of Ukraine's children remain displaced four years into war
[3] OHCHR (2025). Protection of Civilians in Armed Conflict – December 2025
[4] RBC-Ukraine (2025). Ukraine's daily war spending hits $172 million amid Russian invasion
[5] UNDP (2026). Fifth Rapid Damage and Needs Assessment (RDNA5)

4. Options for consideration by the Board on the Proposed Approach for Exceptional Support to Ukraine (2026-2027)

4.1 Despite Gavi support stabilising vaccine supply in 2025 and early 2026, Ukraine's immunisation programme remains highly fragile. Ongoing conflict, sustained attacks on energy infrastructure, constrained public financing, and rising numbers of zero-dose children continue to threaten programme continuity, while needs exceed available domestic and international resources. In this context, Gavi remains the funder of last resort for immunisation. Continued exceptional fragility support is critical to sustaining essential vaccine supply, monitoring coverage, and addressing persistent inequities in accessing vaccine among vulnerable populations, as outlined in Annex A.

4.2 The Programme and Policy Committee recommends both options, below, for Board consideration to guide Ukraine's exceptional fragility eligibility and financing beyond June 2026. Annex B details the underlying considerations for each approach.

4.3 Option 1: No cost extension of Ukraine's US$ 10 million fragility support as approved by the Gavi Board in December 2025, from 1 July 2026 until 30 June 2027.

This option provides an exceptional extension of Ukraine's fragility support through June 2027, within the existing Board approved ceiling of US$ 10 million. This approach enables approved resources to bridge vaccine procurement into 2027 through the creation of a year-end buffer stock, significantly reducing the risk of a financing cliff and mitigating the risk of major outbreaks of measles, polio, and diphtheria amid ongoing conflict.

4.4 Option 2: Costed extension of US$ 6 million until 31 December 2027 contingent on additional funds being available through a special programme to support Ukraine.

This option extends Ukraine's exceptional fragility support through December 2027 with an additional US$ 6 million, beyond the US$ 10 million approved in December 2025. In addition to fully financing the vaccine procurement needs for the 2027 cohort, it would support critical operational costs for the immunisation programme.

4.4.1 This longer-term approach sustains essential vaccine coverage, protecting gains achieved under prior Gavi fragility support, and aligns with the IRC's recommendation on forward planning. It also mitigates the risk of financing vacuum for 2027 if Ukraine is unable to self-finance or secure alternative external funding in the short run.

4.4.2 This also helps to prevent large-scale outbreaks of measles, polio, and diphtheria, that would strain an already overstretched health system operating

under active conflict conditions. Beyond national implications, widespread outbreaks in Ukraine would have regional health security consequences, with a heightened risk of cross-border transmission into neighbouring countries.

4.4.3 Gavi will explore opportunities to mobilise complementary financing from other donors in Ukraine, to co-finance segments of the funding gap.

4.4.4 This approval would provide additional lead time for Gavi to work with the Ministry of Health to prioritise immunisation within domestic and alternative donor financing following the end of Gavi support, despite ongoing conflict-related uncertainty.

4.4.5 Securing additional financing up to US$ 6 million to cover remaining 2027 vaccine procurement and critical operational costs, following utilisation of the remaining US$ 4.1 million in Board-approved resources, would reduce available GRM funds for other LMICs.

4.4.6 The Gavi Secretariat will explore alternative funding mechanisms to finance the US$ 16 million fragility support to Ukraine, to release pressure from the funds in the Gavi Resilience Mechanism.

Annexes

Annex A: Implications/Anticipated Impact

Annex B: Considerations to Proposed Approach for Exceptional Support to Ukraine (2026-2027)

Additional information available on BoardEffect

Appendix 1: UNICEF Cost of Inaction in Immunization Study (October 2025)

Appendix 2: Ukraine 2025 Immunization Coverage