

Gavi – The Vaccine Alliance EVALUATION MANAGEMENT RESPONSE Mid-term Evaluation of Gavi's 2021-2025 Strategy

Business Owner: Programme Team, Strategy Team

Evaluation Title: Mid-term Evaluation of Gavi's 2021-2025 Strategy

Study Evaluation Year: October 2022 – March 2024

Evaluation Purpose: To support course correction in Gavi 5.1 and inform the development of Gavi 6.0 (2026-2030).

Evaluation Key Objectives:

- Evaluate the status of implementation of Gavi's fifth strategy (Gavi 5.0/5.1) by end 2023 and identify the drivers and barriers that explain that status.
- Assess the extent to which implementation of the strategy on its current trajectory will plausibly result in achievement of the prioritised strategic goals (SGs) and objectives and identify areas for course correction.
- Generate a series of findings, conclusions, lessons learned and recommendations that can feed into a first course correction of Gavi 5.1 and inform the development of Gavi 6.0 (2026-2030).

This is a <u>draft</u> Summary of the Evaluation Management Response for information. The Gavi Alliance is committed to taking forward the recommendations from this evaluation and timely sharing of the report. Gavi and Alliance partners appreciate this timely report and are in the process of reviewing specific actions in response to the report's 9 recommendations, with particular focus on how these can be integrated into Gavi 6.0 and related strategies. As a result, this document is a work in progress, which will be updated should further feedback be forthcoming in the coming weeks.

Gavi Secretariat Overall Response to the Evaluation

Gavi appreciates and welcomes the recommendations provided in the report of the Mid-term Evaluation of Gavi's 2021-2025 Strategy by the independent evaluation team. This thorough independent report is timely as we continue to learn and adapt to deliver on Gavi 5.1, and continue our development of Gavi 6.0. The Secretariat is in broad agreement with many recommendations, which confirm and enrich numerous initiatives and actions already in-progress or underway. In some cases, we only agree with parts of the recommendations, and together with the Alliance partners, have articulated clear responses that convey our approach.



Alliance Management Response (Agree, Partially Agree, Reject)	Build on the momentum which now exists in Gavi 5.1 to achieve Gavi's four strategic goals and continue this focus in 6.0. a. Since it is likely that Gavi 5.1 and 6.0 will run concurrently for a period, ensure that ongoing Gavi 5.1 programmes are not "buried" under new 6.0 initiatives when 6.0 starts in 2026. Partially agree
If recommendation is rejected/partially accepted, indicate reasons	Management agrees on the importance to continue critical strategic priorities from Gavi 5.1 into Gavi 6.0 as per Board ambition articulated through the design of the Gavi 6.0 Strategy. Following Board's steer, Gavi 6.0 is expected to be based on Gavi's core mandate, country needs and capacity and the Alliance's comparative advantage. The strategy will be centered around Gavi's core mandate: driving new vaccine introductions and their scale up, and reaching more zero-dose children in line with Gavi 5.1 key priorities. However, it is inaccurate to state that Gavi 5.1 and 6.0 'will run concurrently for a period'. Gavi 5.0/5.1 refers to the 2021-2025 period and Gavi 6.0 will extend from 2026 to 2030. If this a correct understanding of the spirit of the recommendation, the recommendation should instead state that a number of critical initiatives and priorities initiated in Gavi 5.0/5.1 should extend into Gavi 6.0 priorities which will be the case. It is also expected that the four strategic goals remain in 6.0 with refreshed subpriorities and target, with core Alliance priorities expected to be extended for the 6.0 period (e.g., against zero-dose, vaccine introductions, co-financing and transition, market shaping). Finally, it is ultimately the Board's mandate to decide on 6.0 priorities and build some potential shifts to better align with the evolving context and needs.



Actions planned

- 1. Ensure lessons from Gavi 5.0/5.1, including those emerging from evaluations are included in the design of Gavi 6.0 and inform Board deliberations.
- 2. As the Board aligns on Gavi's new Strategic Goals and build a new 'Gavi 6.0 one-pager', ensure that the Board starts from the existing Gavi 5.1 One-pager and articulate clearly continuation vs shifts in priorities going into 6.0.
- 3. As part of Gavi 6.0 operationalisation, map existing/ongoing initiatives from 5.1 proven successful and ensure their continuity going into Gavi 6.0 when in line with new priorities.

Recommendation 2

To enhance Gavi's responsiveness and impact during Gavi 5.1 and in advance of 6.0, accelerate, test, and monitor organisation-wide implementation of Operational Excellence initiatives and agreed strategy operationalisation evaluation recommendations.

- a. Prioritise and accelerate the reforms to operational culture identified by EVOLVE and the strategy operationalisation evaluation to reduce country transaction costs and increase responsiveness to crises and changing contexts. In that context, sharply reduce the current 21.4 months (as of January 2024) duration between initiating the FPP process and disbursement.
- b.Manage the risk that Operational Excellence is seen as a 'silver bullet' for all organisational challenges by ensuring that it outlines clear and realistic goals and benchmarks to measure progress.
- c.Initially, focus the Target Operating Model on those reforms (e.g. simplified processes) that are particularly useful in fragile/conflict settings, and which assist implementation of strategic priorities (e.g. contracting of CSOs in support of RI service delivery, demand generation, advocacy and the overall ZD agenda).
- d.Consolidate the current 17 funding levers and limit the addition of new levers to reduce country transaction costs and operational complexity. Building on analysis in the MTE, identify the internal and external drivers of multiple funding levers as well as the barriers to consolidation, and resolve issues prior to implementation of 6.0. Plan the consolidation of levers to harmonize with country processes and preferences. For example, adopt a new funding lever only if existing funding mechanisms (even when revised) would not work AND if affected countries agree that the new lever can be easily accommodated in country processes, including the FPP.



	e. Put in place change management processes to ensure that reforms Operational Excellence reforms are fully implemented before Gavi 6.0 starts, since previous organisational reform efforts have met with mixed success. Ensure sufficient processes, human and financial resources, and structures are in place to underpin implementation, and that the drivers and barriers to reforms are well understood. Ensure that all relevant parts of the Secretariat (operational, country, financial) are on board. Map the potential impacts of reforms on all country segments (core, high impact, and fragile) and stress test these reforms by piloting in different settings. f. Monitor these reform processes against agreed benchmarks and regularly inform the Board on progress and bottlenecks.
Alliance Management Response (Agree, Partially Agree, Disagree)	Agree
Actions planned	 2.a.: Finalise the EVOLVE Target Operating Model (TOM) and develop a detailed roadmap for implementation, including quick-wins wherever possible. 2.b.: Strengthen process discipline on Operational Excellence (OE) managing OE progress to ensure initiatives are consistently prioritised in line with existing OE targets, initiatives have aligned targets and the communication on OE work is consistent and clear. 2.c.: The detailed roadmap for implementation of the EVOLVE TOM will be based on various criteria, including a prioritisation of impact, as well as of logical interdependencies. 2.d.: Continue ongoing work on consolidation of funding levers, including explicit engagement with Gavi Board Committees on the importance of avoiding the creation of new levers without thorough consideration of the operational impact. 2.e. The EVOLVE Target Operating Model, including its three differentiated process tracks, will be piloted in different settings drawn from country segment groupings.
Recommendation 3 Review the country	a. Accelerate work with countries and partners to ensure that sustainable national immunisation strategies (NIS) are in place and empower countries to align Gavi support with



engagement model, including the differentiated approach, so that Gavi support is better aligned with national immunization priorities and support mechanisms are sufficient and appropriate for country needs, capacity, and potential for impact. Alliance Management Response (Agree)	their NIS. In addition, develop country-level strategic goals, aligning programmes where needed with other global health institutions. b. In alignment with EVOLVE proposals, differentiate country engagement based on a composite of indicators such as performance, capacity, fiduciary and programmatic risk, and potential impact, rather than by segment. For example, in a high performing country with good vaccination coverage and low fiduciary risk, empower the country to choose priorities from a menu of Gavi support. At the same time, manage tensions between country ownership and centrally determined priorities through effective policy and technical advice to support and influence countries to identify relevant Gavi support (see Recommendation 3c). c. Delegate decision making and accountability for country programmes and priorities to the senior country managers (SCMs). Empower them to take, after appropriate consultation with relevant internal and external stakeholders, effective and timely decisions on country priorities and decisions, up to agreed financial ceilings, on actions such as reallocations. Identify and address internal and external barriers to decentralisation and delegated authority, and assess current competency gaps and take appropriate actions (e.g. training, talent placement, other resources) to ensure that SCMs and their teams have the necessary resources and capacity to support successful implementation of tailored country programmes. d. Define criteria for adoption of new initiatives which are "off-plan" (not foreseen in the country NIS) (see Recommendation 2b). Partially Agree
Response (Agree, Partially Agree, Disagree)	
If recommendation is rejected/partially accepted, indicate	With reference to NIS, this is not a viable option for fragile and conflict countries in its present state which WHO (the owner of the NIS template) acknowledge. If this were to be used in these settings, there would need to be a new, simplified and truncated template for this use. Finally, NIS falls short of crafting a plan for humanitarian response either at the central or subnational levels. Through FPP and Evolve, we are working toward other methods to ensure countries are not being asked to do FPP on top of other sound alternatives which might already exist. Gavi is likely also to encourage



	alignment against PHC strategies when countries have developed those - in order to facilitate integration with PHC and with other services (most especially in F&C).
Actions planned	1. Better sequencing of the NIS and FPPs, in the medium term. Gavi to collaborate with WHO to develop a resource document that outlines the status/timelines of country NIS and FPP cycle with the aim of developing and aligning on a roadmap for implementation ahead of the 6.0 funding cycle. This will need to be routinely tracked and reported at APPT to strengthen accountability requirements of relevant stakeholders. In the longer-term, the aim is to simplify grant application through a process that leverages holistic country-owned strategies; the EVOLVE detailed roadmap concerning this should be tested and operationalised (and part of the prioritised areas under Recommendation 2c), with CPD designating countries to apply through this process in advance of 6.0. Per EVOLVE's proposal, these may be a country's National Immunization Strategy, Primary Healthcare Strategy, or alternatives that incorporate similar elements; Gavi-supplied templates should be used only as a last resort. These strategies would consolidate new and renewed vaccine support, technical assistance (TA), and financial support into a single submission. The Secretariat, in collaboration with countries and partners, and in line with the Future of Global Health Initiatives and Lusaka Agenda, would proactively implement the 'One Alliance' approach to facilitate and influence the development of these strategies. By enhancing collaboration and strategically supporting countries' capacities, the aim is to ultimately enhance the programmatic and financial sustainability of Gavi's investments.
	 2. Collaboration project underway between CPD and technical teams with dedicated support to deliver on the proposed objectives: Roles & accountabilities of SCMs, PMs and technical teams Defining requirements based on country realities / by segment Review business model in prep of 6.0 2. Institutionalization of an internal mechanism for
	 Institutionalisation of an internal mechanism for operational deprioritisation to assess adoption of new initiatives that are off plan



Recommendation 4 Identify clear roles and accountabilities with core partners to help achieve Gavi's strategic goals, especially in challenging areas such as gender and expanded partnerships. Identify/implement suitable mechanisms to track Gavi-funded partner implementation of Gavi 5.1 and incorporate into 6.0.	a. Ensure appropriate governance mechanisms are in place at global, regional, and country levels to facilitate alignment, communication and coordinated action between and within Alliance partners. This could, for example, build on successful examples of engagement of regional-level core partners under the MICs approach. b. Agree terms of reference with core and extended partners (at each geographic level as appropriate) which specify partner roles and accountabilities to achieve the SGs and delivery of 5.1 and 6.0. These agreements should specify how individual partners will use Gavi funds to support identified strategic priorities and goals and include benchmarks to monitor progress, along with regular reporting to the Board. Ensure that the necessary partner capacity and capability exists, particularly at country level, and identify any remedial measures needed. Consider periodic independent assessment of processes and performance to identify any needed course correction. c. Use country-led joint appraisals to monitor progress regularly in all countries.
Alliance Management Response (Agree, Partially Agree, Disagree)	Agree
Actions planned	4a/4b: The Alliance Roles and Responsibilities for Country Engagement to be developed and disseminated. 4b: For foundational support (or equivalent) funding, develop consistent position-specific responsibilities and accountabilities (starting with funded positions at the CO level) in line with "Alliance Roles and Responsibilities for Country Engagement" living document. Design funding to include reporting against agreed-upon goals and benchmarks to the Board and AAPT; align disbursement model to be conditional on reporting and remediation if needed based on reporting. 4b: Map all Alliance steering committees, working groups, etc., and streamline/empower in accordance with the "Alliance Roles and Responsibilities for Country Engagement", e.g., ensure all have clear TORs/goals, accountabilities for the chair/group, and are linked specifically



to the Alliance Roles and Responsibilities for Country Engagement needs.

Institutionalisation of Alliance partner retreats to strengthen collaboration and align efforts for implementation and execution at pace.

Leverage global Alliance partner platforms such as Alliance Coordination Team, Alliance Leaders Group to resolve operational issues and provide strategic direction.

4c: Use country led joint appraisals to monitor progress regularly in all countries.





Recommendation 5

In consideration of increasing fragility and vulnerability in many Gavi countries, revise the eligibility, transition, and co-financing model in 6.0 to enhance financial and programmatic sustainability. In this context:

- a. Focus on financial sustainability, including through ongoing work with core partners and other institutions to better understand and mitigate the impact of domestic financial constraints on achievement of Gavi 5.1/6.0 priorities and objectives. Ensure that the impact of fiscal constraints and the availability, or unavailability, of domestic resources is factored into the design of all future initiatives.
- b. Ensure a comprehensive definition and approach to sustainability by factoring in key components of programmatic sustainability such as equity, gender, and regulatory/legal enabling environments at global, regional, and national levels.
- c. To maximize programmatic and financial sustainability, identify criteria in 6.0 (e.g., fragility, indebtedness, PHC capacity, and legal and regulatory frameworks) to determine the speed of transition for eligible countries and eligibility for MICs support for never-eligible countries.
- d. In the context of major changes in the vaccine market (e.g., expanding vaccine portfolios and higher costs), promote access to and affordability of vaccines in MICs and nearing/post-transition countries by: i) supporting supply and procurement performance (see Recommendation 9g); ii) improving vaccine market intelligence data relating to MICs and never-eligible Gavi countries; and iii) giving prominence to identifying new and innovative sources of financing (i.e. not domestic) for never-eligible MICs and transitioning countries.

Alliance Management Response (Agree, Partially Agree, Disagree)

Agree

This recommendation is timely and is reflected in the Gavi 6.0 strategy. It will also provide the basis for the ongoing Funding Policy Review (FPR).



a) Focus on financial sustainability: ELTRACO/MICS: A Actions planned large part of Gavi 6.0 will focus on enhancing the sustainability model. This will be reflected in the Gavi 6.0 strategy and in a funding policy review (FPR). Pending Board approval, the FPR will introduce several changes including: (i) increasing the eligibility threshold for countries; (ii) slowing the rate of increase of co-financing for PT countries and capping their cofinancing; (iii) making ISF countries sensitive to vaccine prices; (iv) providing programmatic support to AT countries facing significant programmatic challenges; (v) providing a minimum number of years of support for AT countries introducing new vaccines; (vi) further differentiating co-financing for fragile and conflict countries; and (vii) mainstreaming the MICs Approach in a new catalytic phase (please see responses to Recommendation 7). Working with Partners: Gavi has further enhanced collaboration with the multilateral development banks (MDBs) to support PHC and immunization financing. It is also working with UNICEF and others on various means to increase the efficiency and impact of current funding. Non-policy responses at country level: Gavi is working closely with partners in helping countries address financing challenges including through: (i) budget advocacy using local CSOs supported by an international NGO very experienced in advocacy; (ii) providing TA on budgeting to help governments improve budget formulation, advocacy, releases, and execution; and (iii) ensuring operating budgets get down to health facility level. b) Ensure a comprehensive definition and approach to sustainability The Alliance will develop a clear definition of programmatic sustainability as part of the health systems strategy, which will be considered by the Board in December 2024. The Secretariat is proposing that this should inform a more deliberate approach to differentiating its support for health systems based on countries' context and proximity to transition. While the Alliance cannot be fully accountable for ensuring programmatic sustainability across all areas of the health system, this approach should ensure a common vision for success and more tailored support to help address key barriers and risks to programmatic sustainability c) Determine the speed of transition for eligible countries and eligibility for MICs support for never-eligible countries Modifying Eligibility Criteria: As part of the FPR mentioned



previously, Gavi will modify the eligibility criteria for countries to enter AT which will have the impact of extending Gavi support for some countries currently in AT. Eligibility for Never-Gavi countries set to remain the same as 5.1. d) Promote access to and affordability of vaccines in MICs and nearing/post-transition countries See response to Recommendation 9.g.i. + continuing support and funding of UNICEF SD's MICs Financing Facility (MFF) as a tool to facilitate sustainable access and pricing by offering unique pre-financing and special contracting modalities with a risk absorption capacity for multiyear firm contracting. Regional and global TA and dissemination of market intelligence, including to inform product choice, e.g. training on public financing for immunization ("Public Financing for Children for Health & Immunization Training") and support to NIS development MICs funding is leveraged by partnerships with MDBs to mobilize additional resources in support of immunization and embed it into integrated Primary Health Care programs. Currently, support for targeted interventions (TI) to address severe immunisation backsliding has been coinvested along with the World Bank as part of a broader nutrition project in Indonesia and a primary health services one in Honduras In close collaboration with UNICEF SD, developing and implementing a multi-prong communication approach aimed at countries, country facing teams, Gavi Secretariat and partners, Gavi Board/PPC members, to raise awareness of how countries can benefit from Alliance market shaping efforts to optimise access to affordable pricing and reliable supply, including the availability of new competitive products, access to pooled procurement mechanisms (facilitated by e.g. the MFF), increasing demand predictability and improving decision making on product choice.



Recommendation 6	Design a health systems strategy in time for 6.0 describing how Gavi, with its partners, will invest in building viable country PHC systems. This is essential for equitable and sustainable immunisation and the ZD agenda. The strategy should reflect the recent Lusaka agreement which incorporates a programmatic sustainability objective, and also reflect on past efforts (dating back at least 15 years) to harmonize partner investments in health systems, including managing the associated high transaction costs.
Alliance Management Response (Agree, Partially Agree, Disagree)	Agree
Actions planned	Develop Gavi health systems strategy Ensure joint plan to implement Lusaka agenda health systems recommendations with Global Fund and Global Financing Facility
Recommendation 7	Build on experience in Gavi 5.1 to specify the range of Alliance technical/ advisory support to MICs to promote sustainable transition for former-eligible countries and sustainable adoption of new vaccine programmes for both former- and never-eligible countries. This is particularly important since the majority of ZD children live in MICs, and MICs have a high disease burden which could be reduced by vaccines in the R&D pipeline.
Alliance Management Response (Agree, Partially Agree, Disagree)	Agree
Actions Planned	Regional technical assistance to prevent and mitigate backsliding in Former-Gavi countries addressing common regional challenges, as well as ensuring the sustainable and equitable introduction of new vaccines in both Former- and Never-Gavi countries through Alliance core partners (WHO and UNICEF) covering the Latin America and Caribbean region and Eastern Europe, Middle East and Northern Africa. Approaches and focus areas



address specific regional challenges and are reviewed based on latest implementation.

Two new initiatives with expanded partners to address specific bottlenecks such as weak NITAGs and limited engagement of civil society and communities in RI programmes

A global peer-to-peer learning platform for both Former- and Never-Gavi countries to exchange best practices, challenges, and experiences through learning events in person and virtually and sharing of relevant tools and resources. Sub-national learning platforms are also being developed to facilitate learning between provinces in large, decentralized countries, such as Indonesia. See https://www.linkedimmunisation.org/.

Tailored and geographically focused technical assistance provided at country level to support priority Former-Gavi countries that are currently experiencing significant backsliding and have large numbers of ZD children, including Angola, Indonesia, Viet Nam, Honduras and Bolivia by addressing those identified root causes.

Recommendation 8

Establish appropriate monitoring systems for 6.0 which provide timely evidence of country progress towards the strategic goals, and Gavi's contributions to such progress. Explore whether these systems can be redesigned to be less transaction heavy for countries, while allowing Gavi access to key data to assess progress and contribution.

Document rationale for configuration of internal systems, including trade-offs, and periodically review sufficiency, relevance, and effectiveness of monitoring arrangements with the Board. In this context, address two key issues repeatedly raised by external evaluations (and well-known to Gavi):

a. Methodological issues on measuring results and predicting future trends. WUENIC data is the main data source to estimate coverage, but its limitations include long time lags and large data confidence limits. Consider further efforts to strengthen country health management information systems and complementary investments in survey data (including rapid surveys).



	b. Strengthen monitoring of Gavi's contribution to observed and future results. This could include strengthening internal reporting mechanisms including reporting by partners to track activity against plans and delivery against Gavi's ToC outputs and outcomes. It could also include portfolio-level monitoring approaches adopted by other institutions such as the World Bank.
Alliance Management Response (Agree, Partially Agree, Disagree)	Partially Agree
If recommendation is rejected/partially accepted, indicate reasons	Management agrees with the spirit of this recommendation but notes that Gavi significantly scaled back country reporting requirements in Gavi 5.0 as compared to Gavi 4.0, in large part to reduce transaction costs to countries. Enhancing measurement of country progress towards strategic goals in Gavi 6.0 may require an increase in reporting and transaction costs for countries in certain measurement areas, although every effort should be made to limit this including alignment with partners. Ensuring any new measurement activities benefit countries would be a priority, as would documenting the rationale and tradeoffs for the 6.0 approach. The evaluation's conclusion that monitoring output level indicators may be "unrealistic" and "burdensome" is noted.
	Gavi support to sustainably strengthen country data systems often have long time horizons before substantial improvements in measurement are apparent. However, Gavi is exploring complementary activities for near term insights, including rapid cycle monitoring through FASTR with GFF, HeRAMs with WHO, and the Countdown collaboration, as well as new measurement approaches through the Zero-dose Learning Hubs. Gavi, WHO, and UNICEF leadership have also recently requested that Gavi eligible countries report monthly administrative coverage data to WHO, vaccine stock data to UNICEF through Thrive360, and more timely reporting of outbreak data to WHO. Strengthening of internal reporting mechanisms is a
	priority that the MPM and Gavi Balanced Scorecard have started to address and will be carried forward through EVOLVE. On partner reporting, the Secretariat will soon



	launch a new PEF monitoring system, in which a user- friendly PEF Portal will replace the existing Excel based system and a standardized results framework will be used across partners and SFA program areas. In follow-up to the Lusaka Agenda Gavi is collaborating with other organizations including Global Fund, Global Financing Facility, and WHO to streamline HSS metrics and measurement approaches and this work will inform our Gavi 6.0 MEL approach.
Actions planned	The Secretariat will continue to address these issues as it designs the Health Systems measurement and MEL approach for Gavi 6.0, including consideration of approaches adopted by other organizations, while being mindful of maintaining progress towards the Lusaka Agenda. This will include requesting guidance from the Gavi Board on its appetite for increasing reporting requirements or investments to increase measurement capabilities in Gavi 6.0 and documenting the rationale for choices made in the design of the 6.0 measurement framework. The revamped end-to-end grant management system through EVOLVE will improve monitoring of Gavi inputs and processes.

Recommendation 9

Continue to improve the supply and sustainability of affordably priced vaccines by expanding efforts and overcoming constraints in areas requiring enhanced efforts and coordination across the Secretariat and partners (e.g. demand health, long horizon market shaping, and vaccine programme sustainability). In this context:

- a. Continue the effective deployment of existing market shaping tools which facilitate innovation, competition, and demand consolidation (e.g. support to Vaccine Innovation Prioritisation Strategy (VIPS) work, WHO Prequalification and national regulatory authorities (NRAs), and UNICEF procurement tenders) and a partner-aligned strategic approach to market shaping (principally through the antigen roadmap process). Improve the efficiency of data sharing amongst Square partners, clarify roles and responsibilities, and enhance the processes and tools used for market shaping including aligning the level of effort with expected impact and the content and timing of the output with its anticipated use.
- b. Continue work to refine plans for the African Vaccine Manufacturing Accelerator (AVMA), while mitigating risks to achieving impact. Further design decisions would benefit from economic modelling from the perspective of individual firms targeted by the AVMA, as well as from the overall market perspective of the targeted antigens.



- c. In the context of unprecedented expansion in the menu of Gavi supported vaccine products and presentations, further strengthen/expand efforts on demand health. This should include: i) better ways of communicating vaccine choices to countries and mechanisms for supporting NITAGs with vaccine product portfolio management decisions as well as new forums for communication across the programmatic and market-shaping teams; ii) remapping of roles and responsibilities; iii) new policies related to how the market-shaping and programmatic teams work together; and iv) more cohesive demand health targets that are collectively created across Secretariat teams.
- d. Heighten corporate attention to measurement of demand health attributes (e.g., percent of unconstrained demand met within a certain timeframe and number of product switches to more appropriate presentations) as distinct metrics.
- e. Review the influence of the co-financing policy, budget allocation model, and policies enabling country control over the vaccine supplier and product presentation on vaccine demand materialization, portfolio optimisation, VfM, and sustainability. Analyse the impact of a switch to a country budget ceiling allocation model and/or altering the policies on country choice of vaccine supplier and product presentation on: i) allocative efficiency at the overall Gavi portfolio level; ii) VfM decision-making at country level regarding vaccine programme choices; and iii) leverage to influence market health. Revise the co-financing policy to incentivize VfM in all countries, not just countries in transition.
- f. Where justified by Gavi's comparative advantage and market needs, intervene with pull mechanisms earlier (in the Gavi pre-VIS to vaccine introduction cycle) to avert market failure, prepare markets for optimised programme launches, and ensure improved responsiveness and faster access to vaccines in the event of an outbreak or epidemic.
- g. Implement the agreed 2020 procurement and supply strategy evaluation recommendations to: i) support supply and procurement performance in nearing/post transition countries and improve vaccine market intelligence data



	relating to MICs and never-eligible Gavi countries; and ii) strengthen M&E of operational activities. The latter should balance transaction costs and utility (accountability and lesson learning) while addressing antigen roadmap data confidentiality by identifying meaningful, but non-sensitive measures which can be shared.
Alliance Management Response (Agree, Partially Agree, Disagree)	(a) Agree (b) Disagree (c) Agree (d) Partially Agree (e) Agree (f) Agree (g) Agree
If recommendation is rejected/partially accepted, indicate reasons	(b) Disagree: AVMA design elements and decisions are 98% locked, through extensive consultations with stakeholders, and approved by the Board. Throughout the design process economic modelling has already happened and cross referenced with other partners' modellings assumptions. The modelling has already taken into consideration all the individual manufacturers with realistic prospects for benefitting from AVMA, even taking into account all known donors/investors grants and project cost details using intel from partners who are directly engaged (e.g. CEPI, BMGF) and/or have made landscape analysis of all projects on the continent (e.g. CHAI, LionsHead). Shadow cashflow modeling for every African manufacturer is not feasible and cannot replace transparent engagement with the supplier base. With regards to the recommendation on the "overall market perspective", we have already developed sophisticated insights into all the Gavi-supported global markets and the potential interplay with accommodation of new supply from Africa.
	(d) Partially Agree: Agree with the conclusion that progress on demand health could be better measured, but the examples given in parentheses betray a misunderstanding of what "demand health" actually is. Nevertheless agree that the demand health should be elevated via a more formalised measurement framework, but one that matches the strategic approach, which needs embedding into the organisation before metrics are agreed. As cross-Secretariat effort is being developed to better link programme and market perspectives within the



scope of vaccine portfolio optimisation (VPO), and eventually portfolio prioritisation. The formalisation and routinisation of cross-team and cross-function activities would indeed be facilitated through the addition of process/driver indicators to ensure the topic remains prioritised.

Actions planned

- (a) Actions completed or underway/on-track: Market shaping roadmaps are a foundation tool to facilitate improvements in market health (comprising supply, demand and innovation related outcomes) by guiding Alliances activities via market specific action plans, which clarify roles and responsibilities and prioritise interventions based on impact. They take a long-term view of markets (10 years+) and are updated approximately every 3-5 years, or upon important changes in market dynamics or in advance of UNICEF procurement cycles, for example. 9 new/updated market shaping roadmaps have been completed/published during 2021-23 and 6 additional roadmaps are underway or scheduled to be completed in 2024-25 all together covering the majority of Gavi programmes.
- (a) Actions completed: To further optimise the efficiency of information sharing/reporting and general collaboration amongst partners, the Square Group (market shaping leadership group) completed/signed-off a new Market Shaping Partnership Plan in 2023, including a new TOR for the Square Group, new engagement frameworks, a new framework for harmonized reporting, and a new RACI matrix for information sharing and data ownership. These changes should enable the Alliance to adapt more effectively to shifts in the landscape, thereby supporting achievement of market outcomes.
- (a) Actions completed and underway on Vaccine Innovation Prioritization Strategy (VIPS): 2 partner-aligned roadmaps for 2 of the 3 priority innovations were published (MAPs in 2022 and barcodes in 2024). For MAPs, key activities completed or underway are: a list of a priority vaccines was published; BMGF has expanded its support to MR-MAPs to fund a pilot line and is considering funding Ph3; 2 Full Vaccine Value Assessment were developed for MR-MAP and TCV-MAP which aim to assess the broad public health and socio-economic impact of these innovations and inform future investments; and WHO is clarifying the regulatory and policy pathway and implementation research needs. Barcoded vaccines are now available for most Gavi-funded



vaccines thanks to UNICEF and Gavi mandatory requirement, and HSIS is exploring the possibility to cofund pilots with partners. A list of priority vaccines was published for CTC and a few studies to generate additional evidence on CTC impact on coverage, equity, cost and campaign efficiencies are planned or ongoing (HPV, OCV, HepB BD). Meanwhile a pathway for country support to use CTC strategy is being implemented for key vaccines (OCV, MMCV).

- (a) Gavi Secretariat continues to work closely with the WHO Regulation and Prequalification (RPQ) Department to monitor the pipeline of vaccines being assessed for prequalification and ensure implications for vaccines supply and market shaping more broadly are adequately reflected. Gavi Secretariat also coordinates with other Alliance Partners and other donors to the WHO RPQ department to shape and monitor the work on regulatory systems strengthening of NRAs, including on the African continent.
- (c) Establishment of a cross-Alliance markets & programmes (CAMP) working group to provide information sharing platform for critical markets and programmes insights to ensure work across the two sides are not siloed
- (c) Alliance partners (WHO, UNICEF, BMGF and Gavi) have started to develop coordinated mechanisms to align at global level to engage and support countries to prioritise and optimise their vaccine portfolios through providing data, evidence and guidance to facilitate evidence-based decisions, as well as tools, dedicated support and strengthening country capacities and systems. Gavi will consider these efforts as part of the operationalization of 6.0. This will require internal coordination between Secretariat teams, including Policy, VP, HSS, MS, CPD, and others.
- (c) Demand health target outcomes have been developed for all markets in collaboration with Alliance partners and added to MS roadmap action plans
- (d) Explore demand health process-oriented driver-level indicators during the 6.0 MEL framework development process that track the progress of standardizing and routinizing cross-function approach to demand health
- (e) Action underway/on track: MS and VP are working closely with partners to empower country decision-making, including the facilitation of product switches to optimise country product portfolios for programmatic and financial benefits.



- (e) Action underway: Through the development of ELTRACO options and a new policy, a proposal to adjust how co-financing is calculated for ISF countries is being developed in order to instill price sensitivity, with a goal to increase VfM through the adoption of more affordable product presentations, while also positively impacting market health/ sustainability. A learning agenda to test elements of transition by vaccine model and the use of a country funding envelope will be explored as part of 6.0 subject to Board's guidance and decision.
- (f) Actions completed: For VIS2024 as well as RSV (VIS2018 vaccine), Market Shaping has conducted an early market shaping assessment to identify potential market challenges for all key vaccines assessed as part of the VIS2024 process and is engaging earlier with manufacturers, Policy and VP to ensure optimized programme launches. In addition, a Market Shaping proposal has been made as part of the 6.0 strategy to ensure improved responsiveness and faster access to vaccines in the event of an outbreak or epidemic through the creation of market incentives for priority pathogens.
- (f) Action underway: Specifically for TB, the need for a potential market incentive mechanism to ensure adequate supply availability at launch has also been identified and Market Shaping will further explore the size and other dimensions of the mechanism in 2024-2025.
- (g) Actions underway/on-track:
- 1. Achieving secure and sustainable supply and pricing for MICs is enabled though Gavi's holistic approach to shaping markets. The three pillars of Gavi's market shaping strategy seek to foster a sustainable and competitive supplier base, healthy demand and an environment that encourages innovation, which ultimately benefits global markets beyond Gavi-eligible countries.
- 2. Since the Board approved Gavi's 'MIC approach', the scope of Gavi market shaping roadmaps have expanded to ensure needs/outcomes for MICs are intentionally considered, also providing guidance for future UNICEF procurement strategies and tenders.
- 3. The market shaping team is also working closely with Gavi's MIC team to ensure MICs are served with timely and appropriate market information.



- (g) Actions completed: Market shaping team has strengthened monitoring of core activities by implementing a new Roadmap SOP, which includes
- 1. A new commitment to conduct Annual Roadmap Review (ARR) meetings with Alliance stakeholders (starting 2023) to routinely evaluate the progress of roadmap action plan interventions and enhance coordination and information sharing
- 2. Ensuring systematic utilisation of a new Roadmap Action Plan online tool (finalised in 2023) to record/log all changes to the action plans and to host a live reporting dashboard (restricted to market shaping users to protect confidentiality).

The Full detailed version can be assessed by request to the Gavi Secretariat.

