

# **Gavi Alliance Board Meeting**

28 September 2021 Virtual meeting

# 1. Chair's Report

- 1.1 Finding a quorum of members present, the meeting commenced at 14.00 Geneva time on 28 September 2021. Prof José Manuel Barroso, Board Chair, chaired the meeting. Sarah Goulding, Board Vice Chair, stepped in to chair the meeting starting in the discussion of Agenda item 04 when the Board Chair needed to leave the meeting.
- 1.2 The Chair welcomed four new Board Members who had been appointed since the last Board meeting.
- 1.3 Prof Barroso provided a summary of the Board and Board Committee's activity since the last Board meeting in June 2021, which has included several additional and informal meetings and technical briefings to help prepare the Board for its deliberations. He noted that in this period the Audit and Finance Committee had met twice, the Investment Committee had met once, and the Market Sensitive Decisions Committee had convened five times. He reminded the Board of the importance of good upstream preparation for Board meetings, especially in a virtual setting, and that this is good governance and an investment in the Board's duty of care.
- 1.4 The Chair presented a short summary of the recent All Chairs Group (ACG) meeting, during which the Group had discussed the challenges of absorptive capacity and delivery affecting both routine immunisation and COVAX; considered resource mobilisation for 2022; and shared views on how to ensure Board discussions include all voices.
- 1.5 He also provided some reflections on the current meeting agenda which demonstrates the Alliance's commitment to deliver on Gavi 5.0 and COVAX with the same level of ambition. The agenda includes an update from the Gavi CEO, a presentation on Gavi 5.0 strategy, followed by presentations by the co-chairs of the COVAX AMC Engagement Group and Shareholders Council, before a discussion on COVAC 2022 strategy, delivery and resource mobilisation.
- 1.6 The Chair remarked that in recent discussions with the co-chairs of the COVAX bodies, he was impressed by the work they have undertaken throughout 2021 to establish the COVAX governance bodies, ensure their members are fully informed and to advocate for action to make doses available for all. He indicated that it would be important for the Board to hear their concerns and priorities as an essential input into the Board's consideration of next steps on COVAX.



- 1.7 He reported that progress on Gavi 5.0 and COVAX have been remarkable but that it is also fragile. He noted that it is critical that all stakeholders continue to advocate for both Gavi 5.0 and COVAX.
- 1.8 Standing declarations of interest were tabled to the Board (Doc 01a in the Board pack).

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# 2. Introductory remarks: CEO

- 2.1 Seth Berkley, CEO, provided introductory remarks, first addressing COVID-19 and the status of Gavi 5.0 operationalisation. He reiterated four over-arching messages: i) that the pandemic has hit the most vulnerable populations hardest, making Gavi's equity driven goal of reaching zero-dose children and missed communities even more pressing; ii) that routine immunisation has demonstrated resiliency more than other health interventions so the reduction in coverage levels is less severe than expected; iii) that there have been significant country and regional variations in immunisation performance, underscoring the importance of Gavi's differentiated and tailored approach; and iv) that the Alliance will need to remain nimble and adaptive to support countries in maintaining health services, fighting the pandemic and building back better.
- 2.2 He provided an update on the roll-out of COVAX, noting this remains in learning mode, tackling uncertainty with innovation and continuous adaptation, while being equally mindful of trade-offs. In the face of major COVID-19 vaccine supply constraints, over 311 million doses have been supplied to 143 countries, of which 237 million doses were to Gavi Advance Market Commitment (AMC) countries. Of these, 124 million doses were from dose donations. He indicated that there continue to be delays from some manufacturers and as a result, manufacturers will be asked to provide more transparency moving forward to ensure that lower income countries are not deprioritised disproportionately. He reported on the rollout of COVID-19 Delivery Support (CDS), with 84 submissions received representing about US\$ 224 million, of which US\$ 173 million had been approved to date. Finally, Dr Berkley also provided updates on promising data on new vaccine candidates and on recent advocacy and engagement including the US Vaccine Summit on 22 September 2021 and recent Group of 20 (G20) discussions on pandemic preparedness.
- 2.3 Dr Berkley also reported on the continued workload of Secretariat staff, particularly in light of increased Board and Committee meetings, noting that in 2021, a total of 94 meetings have been planned so far, with 70 already having taken place. He noted that a reset will likely be required, including exploring alternative mechanisms of information sharing, such as more Board updates or use of technical briefings.

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# 3. Gavi 5.0: An overview of key issues

- 3.1 Anuradha Gupta, Deputy CEO, provided an overview of how Gavi 5.0 is progressing nine months into implementation of the strategy, while the COVID-19 pandemic still looms large and COVID-19 vaccination rolls out in Gavi countries. She reported that due to strong performance early in Gavi 4.0, despite the reversal of gains in 2020, Gavi exceeded its goal of additionally immunising 300 million children in Gavi 4.0.
- 3.2 She reported that the repercussions of the COVID-19 pandemic are still unfolding with variable impacts. Health systems in Gavi countries are preparing for a three-fold increase in vaccination touchpoints for COVID-19 vaccines. Country-by-country qualitative analyses are being undertaken to assess risks to routine immunisation (RI) as well as to COVID-19 vaccination absorption. She shared several country examples to show the heterogeneity across countries and the tailored engagement that will be required to identify opportunities and entry points to advance the zero-dose agenda along with COVID-19 vaccination.
- 3.3 With respect to the zero-dose agenda, Ms Gupta indicated that the zero-dose agenda is beginning to be a key focus of all of Gavi's funding levers, and described progress in this regard across the Equity Accelerator Funding window, the Full Portfolio Planning process, and Partners' Engagement Framework (PEF) funding. Finally, she noted that continued efforts to progress on Gavi 5.0 have been in line with the recalibrated priorities agreed by the Board, including a slower pace of new vaccine introductions.

# Discussion

- Board members acknowledged that the impact of the COVID-19 pandemic on RI appears not to have been as big as initially feared, but that it remains important not to be complacent. There has still been an impact, and social and fiscal impact is an ongoing concern, and advocacy will remain critical. Board members also noted that the pandemic is not yet over, and while it is encouraging that there has not been more backsliding on RI, there is a risk that countries will struggle as COVID-19 vaccines delivery is significantly ramped up.
- Board members remarked on the importance of understanding the country heterogeneity that had been presented, and indicated that Gavi will need to adapt its approach to different countries.
- Board members agreed that it would be useful to do a deep dive on data and implementation of Gavi 5.0, including some of the priorities and trade-offs that Gavi will face over the coming year between implementing Gavi 5.0 and the COVAX, and the status of new introductions and delivery systems. Board members indicated that it is important to maintain ambition on both Gavi 5.0 and COVAX, and to continue to push to reduce the number of zero-dose children and to fight against COVID-19 through COVAX while respecting the principle of equity.
- Several country representatives reported on experiences in their countries. One Board member indicated that the bounce back has been robust and remarked that while this period has been challenging, the strategies and learnings



from COVID-19 will be crucial to build back and at the same time present a real opportunity for improvements across vaccine programmes. Another Board member cautioned that there is a risk of funding gaps for RI in some countries as the focus is on COVID-19 and asked that Gavi revisit its Gavi 5.0 planning and targets to ensure countries are supported to achieve them. Another Board member reported that countries need COVID-19 supply urgently and encouraged those Gavi stakeholders who had indicated they could donate doses to do so in the immediate term, and to advocate for manufacturers to stick to timelines.

- Board members raised the following points:
  - One Board member asked about missed opportunities and whether it is timely to undertake an analysis of the number of times children come into contact with health services and are not vaccinated. The Secretariat acknowledged this is an area that presents real opportunities.
  - On catch-up campaigns, one Board member noted that many campaigns have had to be cancelled and so there is a growing group of children who have missed out on vaccines and will need to be caught up. The Secretariat clarified that work is underway to adapt approaches on campaigns, for example to do simultaneous antigens and not sequential antigens, and move in the direction of efficient integrated approaches.
  - One Board member suggested that the Board discuss further how the economic impact of COVID-19 is affecting country economies and what the implications are for Gavi eligibility and not just on Gross National Income (GNI) per capita (pc) but also on government expenditures and ability for governments to spend. The Secretariat noted that this is an area of focus, and that countries are under great fiscal stress and 2021 may be worse than 2020. There is a projection showing that the health expenditures in many countries may not return to 2020 levels until 2024.
  - On supply, one Board member flagged that there had been cases of countries using syringes intended for RI for COVID-19 vaccines and suggested that it will be important to ask for dose donations to be bundled with syringes and for the Secretariat to explore increasing production of syringes.
- With respect to Gavi's engagement in humanitarian settings, it was proposed that
  the Secretariat use the humanitarian cluster system rather than create parallel
  structures wherever possible. The health clusters bring together all actors
  including local CSOs which are critical for sustainability in delivering these
  services. The Secretariat clarified that this is part of planning for Gavi engagement
  in these settings.
- On the question of pandemic preparedness that is currently being discussed in various international fora, Board members encouraged Gavi to bring its experience in this area to the table. The Secretariat indicated that it does wish to engage in these conversations.
- Board members asked about plans for COVAX evaluation and about implementation of the gender policy. It was clarified the COVAX evaluation is in early stages and that an annual report on the implementation of the gender policy will be provided to the December Board meeting.



- 4. COVAX: Key Strategic Issues (including reports from Co-Chairs of COVAX AMC Engagement Group and COVAX Shareholders Council)
- 4.1 The Chair introduced this item, underlining the importance of the work of the COVAX governing bodies and recognising the engagement of all the stakeholders in this endeavour. The Chair invited the Co-Chairs to take the floor and set out the priorities and concerns of COVAX participants so that these could be taken into account in Board discussions on the strategy, delivery and funding of COVAX from 2022.

Reports of the Co-Chairs of the AMC Engagement Group ("AMC Group")

- 4.2 Co-Chair Lia Tadesse, Minister of Health of Ethiopia, reflected on the timeliness of the discussion on the COVAX strategy to strengthen the work of the Facility going forward. She commended COVAX for its achievements to date, and highlighted a number of areas for improvements, including: i) better planning to facilitate in-country programme management, ii) addressing short shelf-life of vaccines, iii) addressing delays in vaccine delivery and disbursements, and iv) supporting local manufacturing capacity building and technology transfer to achieve long-term sustainable solutions.
- 4.3 Co-Chair Retno Marsudi, Minister of Foreign Affairs of Indonesia, highlighted the appreciation expressed by world leaders for COVAX during the 2021 United Nations General Assembly (UNGA). She referred to the urgent need to address supply constraints through the establishment of more COVID-19 mRNA vaccine technology transfer hubs, noting that Indonesia is ready to be a regional host. She also flagged the issue of vaccine discrimination, noting that some countries are denying entry to travellers who have received a vaccine that was authorised for WHO Emergency Use Listing (EUL) but have not been approved by national regulators. This discrimination is further exacerbating inequity and requires concerted efforts to urge countries to recognise WHO EUL vaccines.
- 4.4 Co-Chair Karina Gould, Minister of International Development of Canada, reiterated Canada's strong support of the Facility. She noted the enormous efforts to produce and deliver vaccines in 2021 and highlighted the impressive progress achieved by COVAX at unprecedented speed. She referred to the challenges facing the Facility that must be resolved and highlighted areas requiring improvement, namely: i) enhancing communications, ii) greater transparency including on delivery and on evolving needs, and iii) continuing to work together as Alliance members to reach coverage targets.

Reports of the Co-Chairs of the COVAX Shareholders Council ("The Council")

4.5 Dr Gabriel Mesa delivered key messages on behalf of Co-Chair Fernando Ruiz, Minister of Health of Colombia. He highlighted the importance of collective efforts and solidarity in responding to the pandemic. He noted that the lack of information, unpredictability of delivery and supply shortages have weakened confidence in the Facility and has further exacerbated inequity. He reiterated the importance of mechanisms for dose donations, exchange and resell to address supply shortages and called on donors to prioritise countries that are most in need. Regarding the COVAX strategy for 2022, he noted that efforts must be made to strengthen



countries' confidence in COVAX through targeted communications, in addition to promoting comprehensive support for national and regional capacities for vaccine production.

4.6 Co-Chair Chrysoula Zacharopoulou, Member of European Parliament, reiterated her support for the Facility. She highlighted the need to ensure that donated doses reach peoples' arms as soon as possible and noted the role of high-income countries in supporting the Facility by leveraging their influence on the pharmaceutical industry. She underlined that country readiness and absorptive capacity are crucial, and highlighted that the Facility should remain inclusive, and should coordinate its activities with regional initiatives. She welcomed more reporting and stronger engagement with the COVAX Manufacturing Taskforce. She concluded by reiterating the importance of political leadership and leveraging the Facility's high-level representatives and political figures to advance its work.

# Discussion

- Board members highlighted the importance of communications, transparency and visibility which have major implications at the country level.
- With respect to the question of vaccine discrimination, Board members underlined the urgency of addressing this matter and sending a collective message that those vaccinated with WHO-approved vaccines should be able to travel without barriers.
   The Board Member representing WHO noted that this is high on their agenda and that they will continue to urge countries to recognise WHO EUL vaccines.
- Board members highlighted the importance of expanding production capacity to regional and national levels and enabling the creation and scale up of production in the Global South as well as addressing the issue of intellectual property (IP) and facilitating technology transfer.
- With respect to vaccine preference and refusal and its impact on supply management, Board members noted recent cases of countries pushing back on some of the vaccine donations due to limitations on introductions of new vaccines, and of some communities refusing specific vaccines.
- Several Board members highlighted that assessing absorptive capacity can be challenging when supply schedules are uncertain. Board members highlighted the challenges associated with uncertainty and the implications this could have on vaccination plans that are highly sensitive to disruption.
- The Chair thanked the Co-Chairs of the Engagement Group and the Council for their participation. He reiterated that the Secretariat and COVAX are doing their utmost to raise the concerns expressed and advocate for support in international fora such as the meetings of the Group of 20 (G20) and similar high-level events.

# Update on key strategic issues

4.6 Seth Berkely, CEO, thanked the Co-Chairs for being COVAX champions and noted the concerns raised, particularly on supply challenges, vaccine



discrimination and short shelf-life. He noted that COVAX will continue to advocate to address vaccine discrimination as well as to regularise the approach to dose donations.

- 4.7 With regards to the COVAX 2022 strategy, he referred to WHO vaccination targets of reaching 70% of the population of each country by mid-2022. He noted that determining the role of COVAX in achieving this target will be critical and will be based on countries set targets and ambitions.
- 4.8 Aurélia Nguyen, Managing Director, Office of the COVAX Facility, provided an update on where the COVAX Facility stands as of September 2021. She highlighted the immediate priority of making rapid progress in increasing coverage to Advance Market Commitment (AMC) countries and in fulfilling current commitments to Self-Financing Participants (SFPs).
- 4.9 Ms Nguyen also presented a draft recommendation on potential mechanisms to access doses through the COVAX Facility, through three potential mechanisms, namely: reselling to the Facility, brokerage, and exchange. Finally, she concluded by presenting the redesigned country participation model for SFPs which was launched in September 2021.
- 4.10 Thabani Maphosa, Managing Director, Country Programmes, provided an update on COVID-19 vaccines delivery, noting the shift in focus from country readiness to operationalising and coordinating country delivery support.
- 4.11 He also provided a summary of delivery funding support with nearly US\$ 1 billion offered to countries, and provided an update on the COVID-19 Delivery Support (CDS) early access support, noting applications from 83 countries reaching US\$ 224 million to date.
- 4.12 Marie-Ange Saraka-Yao, Managing Director, Resource Mobilisation, Private Sector Partnerships and Innovative Financing, presented an update on COVAX resource mobilisation and the current trajectory of COVID-19 vaccine coverage in AMC countries by Q1 2022.
- 4.13 Ms Saraka-Yao provided an update on dose donations and on the cost-sharing mechanism. She highlighted that drawing on lessons learned, it would be key to have a contingency pool and funds for reserving doses to manage some of the variability.
- 4.14 She concluded by presenting the various Gavi frontloading instruments which allow donors to spread their contributions over time and outlined next steps.

### Discussion

 The Board Chair noted that the COVAX Strategy will be further discussed at the Programme and Policy Committee (PPC) meeting in October 2021, and that there will be multiple occasions for consultation, notably with the AMC Group as well as with the Council before further discussion by the Board at its meeting in December 2021.



- David Sidwell, Chair of the Audit and Finance Committee (AFC) noted that the AFC had discussed the SFP model 2.0 at length in relation to financial risk and referred to the revised model as a significant step forward. He indicated that the complexity of the current model needed to be addressed and that the team had succeeded in simplifying it. He remarked that the groundwork that had been done on cost sharing similarly had simplified steps. Mr Sidwell also noted three areas that he felt were important and needed attention: i) simplifying the process for dose donations; ii) not expanding Gavi's role further to have it serve as a broker, and iii) ensuring that the timing of the deal options is carefully considered and managed.
- Board members commended the delivery of more than 300 million doses to 143 countries via the Facility and welcomed the recent dose donations from Canada and the US.
- Board members also noted the challenges associated with delivery and absorption, including slowing vaccine demand due to hesitancy and misinformation. The Secretariat noted regarding dose donations that addressing vaccine shelf-life limitations and conducting careful long-term planning would significantly improve country planning and delivery. Streamlined processes, particularly on disbursement given the emergency context, and coordinating with AVAT, other partners and multilateral development banks (MDBs), would be critical in this regard.
- Board members highlighted the need to remain vigilant on the impact of COVID-19 vaccines ramp-up on RI, and the need to continue the discussion on oversight and accountability among Alliance partners to mitigate reputational risks. Country ownership and responsibility were also highlighted noting that countries are equal partners in COVAX.
- The Secretariat was requested to provide further analysis on the financial and operational implications of the possibility of integrating COVID-19 vaccination into routine immunisation (RI).
- Board members raised several strategic considerations related to COVAX in 2022, including:
  - The importance of maintaining COVAX as an inclusive mechanism, allowing countries that do not purchase from the Facility to remain engaged;
  - The desire to continue the dialogue on the future of COVAX and its link with Gavi 5.0, and Gavi's role in epidemic and pandemic preparedness;
  - Their support for the ambitious global target of 70% coverage, noting that more clarity and granularity on country demand and country specific needs is required; and
  - Their concern over boosters and the provision of vaccines to younger age groups, noting that many countries have not yet vaccinated priority groups such as health workers.
- In relation to brokerage, the Secretariat noted the Board's call for COVAX to focus
  its efforts on strengthening the dose-sharing mechanism by reducing complexities,
  improving the efficiency of procedures and promoting efficient coordination, rather
  than considering a brokerage role. The Secretariat noted the request to receive



further analysis on the possibility of COVAX playing a facilitator role in lieu of broker and highlighted that while this might reduce financial risks to COVAX, it would still likely add considerable operational complexities and reputational risks.

- With respect to the Humanitarian Buffer, it was clarified that the Buffer is operational and has received six applications, two of which have been approved by the Inter-Agency Standing Committee.
- One Board member reflected on the fact that as a government representative sitting on the Gavi Board and overseeing the COVAX Facility, but not the broader COVAX Pillar, his impression is that he does not always see a global system delivering as a whole, but rather that the view provided is organisation-specific. The Secretariat noted that there is a COVAX Coordination Mechanism that brings together multiple key actors such as the Coalition for Epidemic Preparedness Innovations (CEPI), UN bodies, Industry and Civil society that was designed to address the broader global system.
- In relation to questions on resource mobilisation and the investment case, the Secretariat noted the Board's request for more clarity on how much of the country demand would be met by the various funding sources and by the cost-sharing mechanism.

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# 5. Closing remarks

- 5.1 The Board Vice-Chair, Sarah Goulding, expressed her thanks and appreciation to the Board for a productive meeting.
- 5.2 Ms Goulding, together with Dr Berkley, paid a warm tribute as they bid farewell to the outgoing Board member Orin Levine (Bill & Melinda Gates Foundation), who had also held numerous roles on Gavi Board and Committees and who would be coming to the end of his term at the end of November 2021.
- 5.3 After determining there was no further business, the meeting was brought to a close.

Prof José Manuel Barroso Chair of the Board Ms Brenda Killen Secretary to the Board



### Attachment A

# **Participants**

### **Board members**

- José Manuel Barroso, Chair (Items 1-4)
- Sarah Goulding, Vice Chair
- Omar Abdi
- Kwaku Agyeman-Manu
- Beth Arthy
- Anahit Avanesyan
- Megan Cain
- Awa Marie Coll Seck
- Maty Dia
- Abdoulage Sabre Fadoul
- Margaret (Peggy) Hamburg
- Naguib Kheraj
- Orin Levine
- Marta Nunes
- Juan Pablo Uribe
- Helen Rees
- Teresa Ressel
- John-Arne Røttingen
- David Sidwell
- Faisal Sultan
- Joan Valadou
- Yibing Wu
- Seth Berkley (non-voting)

#### Regrets

- Afsaneh Beschloss
- Roger Connor
- Mahima Datla
- Zsuzsanna Jakab
- Mansukh Mandaviya
- Gilbert Mokoki
- Bounfeng Phoummalayasith
- Saad Omer

#### **Guests**

- Karina Gould (Item 4)
- Retno Marsudi (Item 4)
- Gabriel Mesa Nicholls (Item 4)
- Chrysoula Zacharopoulou (Item 4)

# **Alternates Observing**

- Violaine Mitchell
- Michael Kent Ranson
- Etleva Kadilli
- Kate O'Brien
- Lia Tadesse
- Edna Yolani Batres
- Bernhard Braune
- Francesca Manno
- Joris Jurriëns
- Jeremy Konyndyk
- Susan Elden
- Keiichi Ono
- An Vermeersch
- Xiang Shu
- Rafael Vilasanjuan

# **ADDITIONAL ATTENDEES**

# **EVALUATION ADVISORY COMMITTEE**

Dr James Hargreaves, Chair of the Gavi Evaluation Advisory Committee

#### <u>IFFIm</u>

Mr Kenneth Lay, IFFIm Board Member Ms Doris Herrera-Pol, IFFIm Board Member

Ms Jessica Pulay, IFFIm Board Member

Mr Helge Weiner-Trapness, IFFIm Board Member

Mr Bertrand de Mazières, IFFIm Board Member and IFFIm Audit Committee Chair

Ms Hassatou Diop N'Sele, IFFIm Board Member

Ms Monique Barbut, IFFIm Board Member

Ms Ingrid Van Wees, IFFIm Board Member



#### **BILL AND MELINDA GATES FOUNDATION**

Mr Nima Abbaszadeh, Program Officer, Global Delivery Programs
Ms Magdalena Robert, Senior Program Officer, Program Advocacy and Communication
Sue Graves, Deputy Director, Health Funds and Partnerships, Bill and Melinda Gates Foundation
Mr Rodrigo Salvado, Deputy Director, Development Policy and Finance
Dr Alaa Murabit, Director, Program Advocacy and Communications, Health

### **WORLD BANK**

Ms Diane Wu, Health Financing Specialist

Ms Clémentine Murer, Health Financing Consultant

Ms Sarah Alkenbrack, Senior Health Economist

Ms Karen Pillay, Senior Financial Officer

Ms Gloria Kebirungi, Consultant, Health, Nutrition and Population Group

#### <u>UNICEF</u>

Benjamin Schreiber, Deputy Chief of Immunizations, New York

Ms Viorica Berdaga, Chief Child Survival and Development

Mr Andrew Jones, Principal Advisor and Chief, Vaccine Centre, UNICEF Supply Division

Mr Imran Mizra, Health Specialist, UNICEF, New York

Mr Anthony Bellon, Manager, Partnerships, Supply Division

Mr Ephrem Lemango, Associate Director - Immunization

#### **WORLD HEALTH ORGANIZATION**

Ms Lidija Kamara, Programme Manager, Department of Immunization, Vaccines & Biologicals (IVB) Ms Ann Lindstrand, EPI Coordinator

#### **IMPLEMENTING COUNTRIES GOVERNMENTS**

#### Congo

Mr Erick Makele, Advisor, Ministry of Health

# **Ethiopia**

Ms Liya Wondwossen, EPI Coordinator at FMoH

# **DONOR GOVERNMENTS**

# Australia

Ms Naomi Dumbrell, Counsellor Health and Environment, DFAT, Permanent Mission to the UN, Geneva

Ms Niamh Dobson, Senior Policy Officer, Health and Education Funds, DFAT

Ms Margot Morris, Assistant Director, Heath Funds Section, DFAT

Ms Christine Sturrock, Counsellor, DFAT

#### Canada

Ms Danielle Hoegy, Senior International Development Officer, Global Affairs Canada Mr Joshua Tabah, Director General for Global Health and Nutrition, Global Affairs Canada Ms Julie Delahanty, Team Leader, Population and Public Health

# **European Commission**

Mr Jan Paehler, Head of Sector Health, Directorate General for Development and Cooperation Mr Grégoire Lacoin, Senior Consultant Public Health

Ms Virginija Dambrauskaite, Policy Officer, Health Team, Directorate General for International Cooperation and Development

#### Finland

Ms Kaisa Lähdepuro, Senior Specialist, International Affairs, Ministry of Social Affairs and Health, Finland

### Germany

Ms Anja Kopyra, Senior Policy Officer, Global Health Policy and Financing, BMZ

#### Ireland

Mr Fergal Horgan, Global Health and Nutrition Advisor at Permanent Mission of Ireland to the UN in Geneva



# Gavi Alliance Board Meeting 28 September 2021

#### Italy

Mr Gianmarco Cocozza, Adviser, Office of Development Cooperation, International Financial Relations Directorate Department of Treasury, Ministry of the Economy and Finance

Ms Eugenia Palagi, Deputy Head of Unit, Strategy, Global Processes and International Organizations

Ms Federica Polselli, International Cooperation Expert for Sustainable Development, Ministry for the Environment, Land and Sea

### Japan

Ms Makiko Yoneda, Policy Focal Point, Ministry of Foreign Affairs

Ms Asuka Yoshihashi, Global Issues Cooperation Division, Ministry of Foreign Affairs

Mr Takahiro Goto, Deputy Director, Office of Global Health Cooperation, International Affairs Division, Minister's Secretariat, Ministry of Health Labour and Welfare

Mr Yoshitaka Kitamura, Director for Global Health, Government of Japan

#### Republic of Korea

Ms Jeongmin Kwon, Third Secretary, Multilateral Development Cooperation and Humanitarian Assistance Division, Ministry of Foreign Affairs

Mr Euijoong Choi, Public Health Attaché, Permanent Mission of the Republic of Korea in Geneva

#### **Netherlands**

Ms Hannah Haaij, Senior Policy Officer, Health and Aids division, Ministry of Foreign Affairs / Social Development Department

#### Norway

Ms Anja Sletten, Senior Adviser, Dept for Health, Education and Human Rights, Section for Global Health, NORAD Ms Kristine Onarheim, Ministry of Foreign Affairs, Norway

Mr Andreas Karlberg Pettersen, Senior Adviser, Norwegian Agency for Development Cooperation

#### Qatar

Ms Aisha Al-Kuwari, Development Projects Researcher Third, Qatar Fund for Development Ms Jawahar Al-Naemi, Multilateral Partnerships Officer, Qatar Fund for Development

#### **Spain**

Mr Miguel Casado Gómez, Head of Health Sector, General Secretariat for International Development and Cooperation

### Sweden

Ms Karin Westerberg, Senior Advisor, Ministry of Foreign Affairs

#### **Switzerland**

Ms Sophie Delessert, Senior Programme Manager, Federal Department of Foreign Affairs

# **United Kingdom**

Ms Sophie Bracken, Innovative Finance Policy Adviser, Global Funds Department, Foreign, Commonwealth & Development Office (FCDO)

Mr Arvind Mungar, COVID-19 Senior Policy Adviser, FCDO

Mr Saul Walker, Deputy Director, COVID-19 Vaccines, Therapeutics and Diagnostics Strategy, FCDO

Ms Elizabeth Williams, ODA Programme Management Officer, Department of Health and Social Care

### **United States of America**

Ms Elizabeth Noonan, Immunization Advisor, USAID

Ms Carmen Coles Tull, Deputy Director, Office of Maternal and Child Health and Nutrition, USAID

# VACCINE INDUSTRY - INDUSTRIALISED

Dr Joan Benson, Executive Director, Public Health Partnerships, Merck Dr Lamia Badarous Zerroug, Vaccines Public Affairs Head, Sanofi Pasteur Dr Laetitia Bigger, Director, Vaccines Policy, IFPMA Dr Julie Hamra, Director, Global Policy & International Public Affairs, Pfizer Ms Ariane McCabe, Director, Global Health and Public Affairs, GSK Ms Sian Clayden, Director, Vaccine Policy, Johnson & Johnson

# **VACCINE INDUSTRY - DEVELOPING**

Mr Lingjiang Yang, Manager, International Business and Cooperation, Chengdu Institute of Biological Products Co. Ltd. (Interpreter for Alternate Board Member Xiang Shu)



#### **CIVIL SOCIETY ORGANISATIONS**

Ms Lubna Hasmat, CEO, Civil Society Human and Institutional Development Programme, CHIP Ms Lisa Hilmi, Executive Director, Core Group Mr Nizam Uddin Ahmed, Research Fellow, University of Sydney Ms Esther Nasikye, Advocacy and Policy Manager, PATH

Dr William Schluter, Director, Global Immunization Division, U.S. Centers for Disease Control and Prevention Mr Michael Wong, Global Health Manager, NCIRS Ms Rachel Hore, Global Policy and Advocacy Officer, Wellcome Trust

Dr Shakia Bright, Public Health Advisor, U.S. Centers for Disease Control and Prevention Dr Kristine Macartney, Director, National Centre for Immunisation Research and Surveillance (NCIRS)

Professor Kim Mulholland, London School of Hygiene and Tropical Medicine

#### SPECIAL ADVISERS

Mr Muluken Desta, Special Adviser to the Anglophone Africa constituency Dr Rolando Pinel, Special Adviser to the PAHO constituency Ms Ruzan Gyuriyan, Special Adviser to the EURO constituency Dr Zaeem Haq, Special Adviser to the EMRO constituency Mr Oulech Taha, Special Adviser to the Francophone & Lusophone Africa constituency Ms Amy Whalley, Special Adviser to the CSO constituency Ms Stella Villares Guimaraes, Special Adviser to Board Chair

### **OTHER OBSERVERS**

Ms Carlota Moya, Representative of the International Area, la Caixa Foundation

Ms Ariadna Bardolet, Coordinator of the International Cooperation Programme, la Caixa Foundation

Ms Grecia Umbarila, Advisor for International Cooperation, Ministry of Health and Social Protection, Colombia

Ms Betty Escorcia Baquero, Ambassador, Ministry of Foreign Affairs, Colombia

Ms Grata Werdaningtyas, Ambassador, Permanent Mission of Indonesia to the United Nations Office and other International Organisations in Geneva

Ms Penny Dewi Herasati, Deputy Director, Government of Indonesia

Ms Mathilde Séjourné, Accredited Parliamentary Assistant at European Parliament

Ms Marie-Claude Mailleux, Parliamentary Assistant Committee on Development at European Parliament