

Malaria Vaccine

Guidelines on Gavi and Global Fund support for complementary interventions to facilitate the deployment of malaria vaccines

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Gavi, the Vaccine Alliance, and the Global Fund to Fight AIDS, Tuberculosis and Malaria are working together to strengthen the impact of their collective investments. As part of their collaboration on malaria, the organisations have put together this joint guidance document that sets out the programme areas that each organisation can support in relation to the deployment of the malaria vaccines, including on co-financing requirements of each organisation.

1. Introduction

Despite the significant gains in the fight against malaria, the disease remains a leading cause of morbidity and mortality, particularly in children. The recent introduction of the malaria vaccine has added another tool for countries to use in addition to vector control, chemoprevention and case management as part of a comprehensive malaria control strategy. The World Health Organization (WHO) has advised that all malaria control interventions, used in isolation, provide only partial protection against the disease; together, a mix of interventions can achieve high impact prevention.¹

The Global Fund and Gavi, the Vaccine Alliance together provide financing for malaria programmes and for investments in health systems:

- Gavi supports the procurement, rollout, and delivery of the malaria vaccines including ancillary equipment and cold chain support.²
- The Global Fund supports malaria interventions within the prevention and control toolbox, including vector control (insecticide-treated nets (ITNs), indoor residual spraying (IRS)); chemoprevention (seasonal malaria chemoprevention, intermittent preventive treatment in pregnancy); case management (rapid diagnostic tests, artemisinin combination-based therapies, continuous quality improvement); and surveillance and programme management. The Global Fund does not currently finance procurement of malaria vaccines and ancillary equipment, as this is under Gavi's mandate.

The choice of interventions used for malaria prevention and control should be determined based on costed and prioritised national malaria programmes and immunisation strategies, in accordance with country context. Investment strategies should consider the optimal mix of malaria control interventions, including malaria vaccines, to optimise the use and impact of all available resources and with consideration of programmatic and financial sustainability. The Global Fund and Gavi will work with national programmes to ensure additional requirements, competencies and costs related to the deployment of the malaria vaccines are appropriately considered.

These guidelines have been developed to provide clarity on what types of support each organisation can provide in relation to the deployment of malaria vaccines, including guidance on co-financing requirements of each organisation.

This document is intended for Global Fund and Gavi Country Teams, national malaria and Expanded Programme on Immunization (EPI) programmes, country coordinating mechanisms (CCMs), inter-agency coordinating committees (ICCs) and other relevant stakeholders.

The Global Fund and Gavi, alongside their partners, are committed to working jointly and with countries to support national malaria programme prioritisation efforts, and the realisation and tracking of domestic co-financing commitments. The Global Fund and Gavi underscore their intent to increasingly integrate their support to countries to fight malaria.

2 Joint Gavi-Global Fund guidance on co-financing

The Global Fund and Gavi jointly affirm their collaboration and commitment to supporting countries to fight malaria. Malaria-related funding requests and applications to both organisations should be determined based on prioritised and costed national malaria and immunisation programme strategies. These programme strategies should consider the optimal mix of malaria control interventions, including malaria vaccines, according to the country context, to optimise the use and impact of all available resources, including domestic funds.

The Global Fund and Gavi's co-financing policies are designed to strengthen the financial sustainability of national malaria responses, vaccine programmes and systems for health. The co-financing requirements of the [Global Fund](#) and [Gavi](#) are intended to be additive and mutually reinforcing and should not be double counted. For example, new domestic co-financing commitments to Gavi, related to malaria vaccine procurement and delivery, will not be counted towards fulfilment of Global Fund co-financing requirements.

Recognising that every country's context is unique, the Global Fund and Gavi remain available to discuss how individual countries' co-financing commitments to each organisation relate to each other. Together

with partners, the two organisations will continue to work with countries to support discussions around domestic co-financing commitments, their realisation and tracking.

3 Gavi support

Gavi malaria vaccine support

The current range, scope, and scale of malaria vaccination activities supported by Gavi include:

1. Procurement and delivery of vaccine commodities and injection materials;
2. Introduction grants to cover a share of malaria vaccine introduction costs and/or the costs associated with the scale up of the vaccine into new geographic areas;
3. Health system strengthening support to finance the delivery and strengthening of malaria vaccines as part of the routine immunisation programme;
4. Targeted Country Assistance (TCA) from Gavi partners (WHO, UNICEF, CDC, the World Bank and expanded partners, including local institutions) which aims to support countries in application development, vaccine introductions, and strengthening service delivery;
5. Support for development of a learning agenda for key operational and programmatic gaps.

Countries may also work with other partners, donors, or use domestic resources to complement Gavi-funded efforts to ensure optimal coverage and uptake of malaria vaccines.

See relevant links to currently available Gavi documents below:

[Gavi Application Process Guidelines](#)

[Gavi Vaccine Funding Guidelines](#)

[Gavi Programme Funding Guidelines](#)

[Malaria Vaccination Scale-up request form](#)

Country applications for malaria vaccines are expected to describe how the malaria vaccine will be used in areas of moderate to high malaria transmission as part of a mix of interventions, including existing malaria control interventions

and as part of the country's national immunisation strategy and national malaria strategic plan. Specific sources of Gavi support are described below.

Gavi vaccine introduction grants

Gavi provides financial support for countries to cover a share of the time-limited costs of newly introducing malaria vaccines, intended to facilitate the timely and successful introduction of the vaccines into routine immunisation programmes.

Countries should demonstrate how malaria vaccines will be used as part of a mix of interventions, including existing malaria control interventions in line with 1) their national malaria strategic plan (or addendum addressing the malaria vaccine) and 2) WHO guiding principles for prioritising malaria interventions in resource-constrained country contexts to achieve maximum impact.³ Activities supported through vaccine introduction grants are typically included in new vaccine introduction plans and are illustrated in Annex 1 to this document.

Gavi health systems strengthening support

Gavi's health systems strengthening support helps countries build strong, equitable, sustainable, and high-quality systems and is a key lever to reaching zero-dose children and underserved communities. Through investments in health systems, Gavi helps countries to develop the capacity to sustainably immunise their population and prevent vaccine preventable diseases. This support includes Health Systems Strengthening (HSS) and Equity Accelerator Fund (EAF) grants.

Gavi has identified eight priority investment areas for its support to countries to ensure that vaccines reach the most vulnerable populations (Annex 2). It is envisaged that together with domestic and other donor support, Gavi's health systems grants can support countries to scale and expand access to malaria vaccines as a tool for national immunisation programmes and national malaria control programmes.

4 Global Fund support

Global Fund support for complementary interventions to the malaria vaccine

As the largest international funder of malaria, the Global Fund provides broad support for malaria prevention and control and resilient and sustainable systems for health – pandemic preparedness and response (RSSH-PPR) interventions that fight malaria and are complementary to the roll-out of the malaria vaccine. The Global Fund does not currently finance malaria vaccine procurement or its direct roll-out. Support must align to evidence-based national malaria plans that determine the best mix of malaria activities and strategies and consider the best use of available resources and be based on costed national health plans. Global Fund financing must support a prioritised, holistic package of malaria activities and not be gap filling related to vaccine-specific introduction or scale-up.

Support for interventions and activities can be found in the [Global Fund Modular Framework](#).⁴ Examples of malaria-specific, Global Fund support to malaria vaccine rollout include sub-national tailoring analyses and development of national malaria strategic plans; social and behaviour

change communication for all malaria interventions; and malaria indicator surveys and demographic health surveys. Vaccine integration into prevention activities supported by the Global Fund, for example campaigns for seasonal malaria chemoprevention (SMC) or insecticide treated nets (ITN), may be considered. However, programmes will need to consider the additional requirements/competencies required for the integrated activities (e.g., additional, qualified health workers for vaccine administration) and will need to utilise other resources (e.g., Gavi or domestic) for the additional costs.

RSSH-PPR support (as per the modules and interventions outlined in the [Global Fund Modular Framework](#)) can also be used to support integration of malaria vaccination activities into systems for health. Possible interventions and activities for which Global Fund resources can be used, as well as those that are excluded, are summarised in Annex 3.

Global Fund Country Teams and Principal Recipients should follow standard Global Fund procedures for programmatic revisions, including with respect to CCM endorsement and Technical Review Panel review as applicable.

5 Contact points for further information

For any other information not covered in this document and/or guidance on vaccine specific interventions as stand-alone investments, please contact, as relevant:

Global Fund: your respective Fund Portfolio Manager and Malaria Advisor.

Gavi: your Senior Country Manager.

Annex 1: Illustrative activities for Gavi vaccine introduction grants

Activities that can be supported by Gavi through vaccine introduction grants are illustrated below.

Introduction area	Illustrative activities
Planning and coordination	Develop national and subnational operational plans for malaria vaccine introduction as an integrated element of routine immunisation, malaria and primary health care programmes
	Establish national and subnational coordination mechanisms, including immunisation and malaria programmes
	Develop malaria vaccine microplans (including identification of target populations, health facilities, community health workers/volunteers, hard-to-reach populations etc.)
Training	Health workers trainings, including sensitisation on messaging and routine pharmacovigilance
	Community health workers/volunteers' trainings including messaging for immunisation and malaria
	Identification and training of supervisors
Monitoring and supervision	Development of integrated supervision plans including pre-launch readiness assessment, post-introduction visits, and integrated immunisation and malaria programme supervisory visits
	Development, validation, and printing, and distribution of recording, reporting and monitoring tools (including integrated, cross-programmatic tools and tools for pharmacovigilance)
	Pre-launch readiness assessment and post-introduction assessments (including mini and regular post-introduction evaluation (PIE) assessments)
Vaccines, cold chain and logistics	Pre-launch cold-chain capacity assessments and contingency plans for malaria vaccine storage
	Pre-launch waste management assessment
	Targeted cold chain and waste management systems improvements (if sufficient resources are available)
	Vaccines and supplies distribution and delivery
	Planning for availability of additional commodities (such as vitamin A, deworming, insecticide treated nets etc.)
Social mobilisation and communications	Establishment and convening of advocacy, communications, and social mobilisation (ACSM) committee and development of strategy/plans including vaccine and malaria interventions
	Development, validation, printing and distribution of ACSM materials
	Implementation of ACSM strategy/plans
	Conduct of stakeholder engagement, community awareness, and ACSM activities prior to vaccine introduction
	Development of risk communication and management mechanism and put in place across immunisation and malaria control programmes

Annex 2: Illustrative activities to support malaria vaccination within Gavi's health systems strengthening grants

The eight priority investment areas that can be supported through Gavi health system grants to help countries ensure that vaccines reach the most vulnerable populations are set out below.

Priority investment areas	Objective	Illustrative activities
Human Resources for Health	Develop and maintain a skilled workforce for vaccination (including the malaria vaccine)	Provide leadership training and capacity-building programmes for healthcare workers focused on malaria vaccine administration and cold chain management.
		Supporting recruitment and retention strategies for health workers in malaria endemic and underserved areas.
		Offering continuous professional development opportunities focused on immunisation management and coordination.
		Enhancing pre-service and in-service education curricula to include malaria vaccination and immunisation best practices.
		Integrated supportive supervision that includes underserved communities.
Service Delivery	Strengthen the delivery of quality immunisation services	Training health workers on malaria vaccine administration and integrating malaria vaccination into routine immunisation schedules.
		Incorporate malaria vaccine content into existing malaria case management guidance and training curricula.
		Support comprehensive, data driven high level EPI review meetings.
		Establishing dedicated outreach services to reach remote, underserved and targeted moderate to high burden malaria areas with malaria vaccination.
		Develop and utilise tools to strengthen defaulter tracking and continuity of immunisation through the second year of life.
		Enhancing mobile outreach and community-based health services to include malaria vaccine and other integrated service delivery.
		Supporting health facilities with the necessary equipment and supplies for safe vaccine storage, administration, and disposal of waste.
		Incorporate malaria immunisation into national quality improvement plan.
		Provide all childhood vaccines along with malaria vaccine as scheduled at malaria visits or seasonal campaign.
Demand generation and community engagement	Increase the demand for immunisation through effective community engagement and communication strategies	Conducting community awareness campaigns to educate the public on the benefits and safety of the malaria vaccine.
		Developing and distributing educational materials on malaria prevention and the role of malaria vaccination.
		Implementing social mobilisation activities to address vaccine hesitancy and improve public trust in the malaria vaccine.
		Incorporate malaria vaccine messaging into existing malaria information education and communication materials.
		Partnering with community leaders, religious organisations and civil society organisations to promote malaria vaccination.

Priority investment areas	Objective	Illustrative activities
Vaccine Preventable Diseases (VPD) and Safety Surveillance	Strengthen malaria case reporting, tracking and surveillance systems	Strengthen malaria case reporting and tracking to include malaria vaccine coverage and effectiveness data. Support the integration of malaria vaccine into existing VPD surveillance systems. Strengthen existing sentinel surveillance sites to include monitoring the impact of the malaria vaccine on disease incidence. Incorporate malaria vaccine into existing adverse events following immunisation (AEFI) surveillance reporting tools.
Supply Chain	Ensure efficient and reliable supply of vaccines	Implementing logistics management information systems to track malaria and other vaccine distribution and prevent stockouts. Supporting the development or updating of national supply chain strategies that include malaria vaccines. Training supply chain personnel in vaccine management and logistics requirements of malaria vaccine. Expanding and maintaining cold chain equipment to ensure proper storage of malaria vaccines.
Health Information Systems and Monitoring and Learning	Improve data collection, analysis, and use for decision making in vaccination	Developing and enhancing digital health information systems to include malaria vaccination data. Providing technical assistance for the implementation of electronic immunisation registries that include malaria vaccination and other interventions. Supporting the use of data analytics to monitor vaccine coverage and identify gaps. Facilitating peer learning and knowledge exchange on best practices in malaria and malaria vaccination.
Governance, policy, strategic planning, and programme management	Strengthen national and subnational policy and planning, and programme management capacity.	Assisting in the development of national policies and guidelines for malaria vaccination, including integration into existing malaria control, immunisation strategies and health sector plans. Building the capacity of national immunisation technical advisory groups (NITAGs), in collaboration with technical working groups (TWGs) supporting National Malaria Control Programs (NMCPs), to make evidence-based decisions on malaria vaccine introduction, scope, and schedule adjustments based on national and subnational data and context. Supporting the creation or updating of multi-year immunisation plans that include updated malaria vaccination strategies. Enhancing programme management skills through training and technical assistance.
Health financing	Ensure sustainable financing for vaccination programmes	Assisting countries in developing financial sustainability plans for their immunisation programmes, especially for malaria vaccination. Supporting the integration of malaria vaccine costs into national health budgets. Facilitating donor coordination to ensure aligned and complementary funding for malaria vaccination initiatives.

Annex 3: Global Fund RSSH-PPR modules and interventions that include activities relevant to systems support for the roll-out of the malaria vaccines

Interventions and activities (as per the modules and interventions outlined in the [Global Fund Modular Framework](#)) to support integration of malaria vaccination activities into systems for health, as well as those that are excluded, are summarised below. The equivalent C19RM interventions⁵ are listed in *italics*.

GC7 Module	Relevant interventions	Notes on vaccine relevant activities
Health sector planning and governance for integrated people-centered services	Health sector planning and governance for integrated people-centered services <i>(C19RM intervention: Country level coordination and planning)</i>	Support inclusion of malaria programming, including vaccines, into broader health sector programming and plans.
	Integration/coordination across disease programmes and at the service delivery level <i>(C19RM intervention: Country level coordination and planning)</i>	Support coordination of malaria and EPI programmes (e.g. cross-programmatic coordination mechanisms such as joint technical working groups) at national and sub-national level.
Community systems strengthening	Community-led research and advocacy <i>(C19RM intervention: Community led advocacy and research)</i>	Support social and behaviour change communication (SBCC) for malaria vaccines at community level integrated within broader malaria messaging.
	Community-led monitoring (CLM)	Include monitoring of malaria vaccine provision and uptake into broader existing/planned CLM activities
Health Financing Systems	Health financing data and analytics	Support health financing data analytics for vaccine deployment (and co-financing) as part of a holistic package of interventions.
Health products management systems <i>(C19RM intervention: Health products and waste management systems)</i>	Policy, strategy, governance	Support improved governance, policy and strategy for health product management, including malaria products and malaria vaccines (noting that malaria vaccines need to continue to be managed within vaccine management systems).
	Storage and distribution capacity, design & operations	Includes coordination, planning and budgeting, and logistics for commodity supply chains. Excludes procurement and maintenance of cold chain equipment dedicated to vaccines.
	Regulatory/quality assurance support	Support pharmacovigilance systems in routine service delivery. If immunisation adverse event monitoring is not already incorporated, vaccine incorporation should be funded by Gavi or other resources.
	Planning and procurement capacity	Excludes procurement of malaria vaccines and ancillary equipment.
	Avoidance, reduction and management of health care waste	Support waste management for routine service delivery. If additional waste management (e.g., sharps containers) are needed to deliver vaccines through ITN or SMC campaigns, additional costs should be funded by Gavi or other resources.

GC7 Module	Relevant interventions	Notes on vaccine relevant activities
Health products management systems (continued) <i>(C19RM intervention: Health products and waste management systems)</i>	Supply Chain information systems	Support inter-operability of supply chain information systems (e.g. Logistics Management Information Systems - LMIS) that cover vaccines and other malaria and health commodities. Support interoperability of supply chain information systems with health management information systems (HMIS) that include malaria information, including vaccines.
	Human Resources for Health (HRH) and Quality of Care In-service training (excluding community health workers) Integrated supportive supervision for health workers (excluding CHWs)	Support opportunities for integration across diseases, and between diseases and EPI/ RMNCAH platforms as feasible within the context of primary health care. Support training for health workers on malaria interventions that includes vaccines. Excludes support for adding <i>malaria vaccine-only</i> modules into EPI trainings. Support integrated supportive supervision or group problem solving supported, combined with training (in line with guidance above).
Monitoring and Evaluation Systems	Routine reporting	Support inclusion/interoperability of malaria vaccine data into malaria repositories. Support modification of existing health management information systems and its digitalisation for deployment of malaria-specific vaccinations. Excludes malaria vaccine specific M&E, including support for EPI reporting.
	Surveillance for HIV, tuberculosis and malaria	Support investments for malaria disease surveillance and survey activities (if different from Routine Reporting investments above). Include coordination and activities to ensure that data stemming from malaria vaccines M&E is incorporated into broader epidemiological analysis and sub-national tailoring.
	Surveillance for priority epidemic-prone diseases and events <i>(C19RM intervention: Surveillance systems)</i>	Support inclusion of malaria data into integrated disease surveillance and response (IDSR) systems including indicator- and event-based surveillance for epidemic-prone diseases. e.g. DHIS2-based IDSR module.
	Surveys	Support for adding vaccine-related questions into existing malaria and integrated surveys. Excludes support for dedicated EPI surveys.
	Analyses, evaluations, reviews and data use (TBD)	Support for data analyses and programme/mid-term reviews to inform sub-national tailoring, including changes in demand patterns for malaria commodities due to vaccine roll out. Excludes support for malaria vaccine-only evaluations, studies, reviews.
Programme management	Coordination and management of national disease control programmes	Support monitoring and reporting of routine malaria programme operations, and coordination with EPI programmes.

Annex 4: Mapping of Global Fund GC7 Modules and Gavi Investment Areas

The following table illustrates areas of Global Fund RSSH-PPR modules and Gavi investment areas with illustrative activities that support introduction and scale-up of the malaria vaccine that can be funded by either or both organisations.

Key for reading the illustrative activities:



Global Fund GC7 Module	Gavi Investment Area(s)	Illustrative activities that can be funded by either or both organisations	
Not part of Global Fund RSSH, typically within disease-specific modules	Service delivery		– Train health workers on malaria vaccine administration and integrating malaria vaccination into routine immunisation schedules. – Strengthen outreach services to reach zero-dose and missed communities, especially in high-burden malaria areas, with malaria vaccination. – Develop and utilise tools to strengthen defaulter tracking and continuity of immunisation through the second year of life. – Enhance mobile outreach and community-based health services to include malaria vaccine and other integrated service delivery. – Support health facilities with the necessary equipment and supplies for safe vaccine storage, administration, and disposal of waste. Incorporate malaria immunisation into national quality improvement plan. – Provide all childhood vaccines along with malaria vaccine as scheduled at malaria visits or seasonal campaign.
Health sector planning and governance for integrated people-centered services	Governance, policy, strategic planning, and programme management	Funded by either organisation	– Support inclusion of malaria programming, including vaccines, into broader health sector strategies programming and plans. – Support coordination of malaria and EPI programmes (e.g. cross-programmatic coordination mechanisms such as joint technical working groups) at national and sub-national level.
			– Assist in the development of national policies and guidelines for malaria vaccination. – Build the capacity of national immunisation technical advisory groups (NITAGs), in collaboration with technical working groups (TWGs) supporting National Malaria Control Programs (NMCPs), to make evidence-based decisions on malaria vaccine introduction, scope, and schedule adjustments based on national and subnational data and context. – Support the creation or updating of multi-year immunisation plans and National Immunization Strategies (NIS) that include updated malaria vaccination strategies.
Community systems strengthening	Demand and community engagement	Funded by either organisation	– Support social and behaviour change (SBC) for malaria vaccines at community level integrated within broader malaria messaging. – Include monitoring of malaria vaccine provision and uptake into broader existing/planned CLM activities.
			– Conduct community awareness campaigns to educate the public on the benefits and safety of the malaria vaccine. – Develop and distribute educational materials on malaria prevention and the role of malaria vaccination. – Implement social mobilisation activities to address vaccine hesitancy and improve public trust in the malaria vaccine. – Incorporate malaria vaccine messaging into existing malaria information education and communication materials. – Partner with community leaders, religious organisations and civil society organisations to promote malaria vaccination.

Global Fund GC7 Module	Gavi Investment Area(s)	Illustrative activities that can be funded by either or both organisations	
Health Financing Systems	Health Financing	Funded by either organisation	– Support health financing data analytics for vaccine deployment (and co-financing) as part of a holistic package of interventions.
			– Assist countries in developing financial sustainability plans for their immunisation programmes, especially for malaria vaccination. Support the integration of malaria vaccine costs into national health budgets. – Facilitate donor coordination to ensure aligned and complementary funding for malaria vaccination initiatives.
Health products management systems	Supply Chain	Funded by either organisation	– Support coordination, planning and budgeting, and logistics for commodity supply chains. – Support interoperability of supply chain information systems (e.g. Logistics Management Information Systems - LMIS) that cover vaccines and other malaria and health commodities.
			– Support interoperability of supply chain information systems with health management information systems (HMIS) that include malaria information, including vaccines. – Support improved governance, policy and strategy for health product management, including malaria products and malaria vaccines (noting that malaria vaccines need to continue to be managed within vaccine management systems). – Strengthen⁶ existing pharmacovigilance systems in routine service delivery. – Support waste management for routine service delivery.⁷
			– Support the development or updating of national supply chain strategies that include malaria vaccines. – Train supply chain personnel in vaccine management and logistics requirements of malaria vaccine. – Expand and maintain cold chain equipment to ensure proper storage of malaria vaccines.⁸
Human Resources for Health and Quality of Care	Human Resources for Health; Service Delivery	Funded by either organisation	– Support opportunities for integration across diseases, and between diseases and EPI/ RMNCAH platforms as feasible within the context of primary health care. – Support training for health workers on malaria interventions that includes vaccines. – Support integrated supportive supervision that includes underserved communities, combined with training (in line with guidance above).
			– Provide leadership training and capacity-building programmes for healthcare workers focused on malaria vaccine administration and cold chain management. – Support recruitment and retention strategies for health workers in malaria endemic and underserved areas. – Offer continuous professional development opportunities focused on immunisation management and coordination. – Enhance pre-service and in-service education curricula to include malaria vaccination and immunisation best practices.
Monitoring and Evaluation Systems	Health information systems and monitoring and learning VPD Surveillance	Funded by either organisation	– Support inclusion/interoperability of malaria vaccine data (including coverage and effectiveness data) into malaria repositories. – Support modification of existing health management information systems and its digitalisation for deployment of malaria vaccinations. – Include coordination and activities to ensure that data stemming from malaria vaccines M&E is incorporated into broader epidemiological analysis and sub-national tailoring. – Support for data analyses and programme/mid-term reviews to inform sub-national tailoring, including changes in demand patterns for malaria commodities due to vaccine roll out. – Support for adding vaccine-related questions into existing malaria and integrated surveys.

Global Fund GC7 Module	Gavi Investment Area(s)	Illustrative activities that can be funded by either or both organisations	
Monitoring and Evaluation Systems (continued)	Health information systems and monitoring and learning		– Support investments for malaria disease surveillance and survey activities (if different from Routine Reporting investments above). – Support inclusion of malaria data into integrated disease surveillance and response (IDSR) systems including indicator- and event-based surveillance for epidemic-prone diseases. e.g. DHIS2-based IDSR module.
	VPD Surveillance		– Support comprehensive, data driven high level EPI review meetings. – Support the routine use of data analytics to monitor vaccine coverage – Facilitate peer learning and knowledge exchange on best practices in malaria and malaria vaccination. – Support the integration of malaria vaccine into existing VPD surveillance systems. – Incorporate malaria vaccine into existing adverse events following immunisation (AEFI) surveillance reporting tools.
Programme Management	<i>No analogous investment area within Gavi HSS</i>		– Support monitoring and reporting of routine malaria programme operations, and coordination with EPI programmes.

Endnotes

1. ‘Malaria vaccines: WHO position paper’ WEEKLY EPIDEMIOLOGICAL RECORD, NO 19, 10 MAY 2024; 225–248
<http://www.who.int/wer>.
2. <https://www.gavi.org/news/document-library/gavi-vaccine-funding-guidelines>.
3. <https://iris.who.int/bitstream/handle/10665/376901/B09044-eng.pdf?sequence=1>.
4. <https://www.theglobalfund.org/en/programmatic-monitoring-grants/>.
5. COVID-19 Response Mechanism (C19RM) guidance is available on the Global Fund website:
<https://www.theglobalfund.org/en/covid-19/response-mechanism/how-to-apply/>.
6. If immunisation adverse event monitoring is not already incorporated, it should be funded by Gavi or other resources.
7. If additional waste management (e.g., sharps containers) are needed to deliver vaccines through ITN or SMC campaigns, additional costs should be funded by Gavi or other resources.
8. Cold chain equipment that exclusively intended for vaccine storage and transport will not be financed by the Global Fund.