

# MEDIA FACTSHEET

## Global mpox vaccine stockpile launch

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# Mpox stockpile 101

## What is it?

- A **new global emergency stockpile of mpox vaccines** designed to enable rapid deployment of vaccines to countries experiencing mpox outbreaks, helping contain them before they spread.

## Why a stockpile?

- Some diseases pose a significant public health and health security threat, but the demand for vaccines is unpredictable because it is largely tied to the occurrence of outbreaks.
- Doses aren't manufactured due to this lack of a reliable market and predictable financing, and when an emergency does occur, there are often delays in access to vaccines – particularly for lower-income countries.
- Creating and financing a global stockpile solves both challenges. A financed stockpile ensures predictable annual market for vaccines, and managing it at the global level as a public good ensures that available vaccine supply supports public health goals and doses are rapidly and equitably available to those who need it most during an emergency.

## What vaccine and manufacturer?

- The stockpile could contain the two vaccines that are approved by WHO:
  - The **LC16 vaccine** manufactured by KM Biologics
  - The **MVA-BN vaccine** manufactured by Bavarian Nordic
- The final composition will be confirmed when the tender process for doses is finalised.

## How many doses?

- This will depend on the terms of final agreements with the manufacturers, expected to be available shortly.
- In the long-term, the size of the stockpile will be shaped by an assessment of demand for the vaccines over the coming years.

## Who can use it?

- **Any country experiencing an mpox outbreak** can request vaccines from the stockpile.
- For low- and lower-middle income countries, Gavi covers the cost of doses and the operational costs of their delivery and administration to affected populations.
- All other countries must reimburse Gavi for doses received from the stockpile.

## Who funds it?

- Funding for the mpox vaccine stockpile as a whole, as well as the operational costs of delivery and administration of the vaccine in lower-income countries, is provided by **Gavi**.

## Who manages it?

- As with all global emergency vaccine stockpiles funded by Gavi, the use of the mpox stockpile for outbreak response is managed by the **International Coordinating Group (ICG) on Vaccine Provision** – a group of organisations with expertise in public health and emergency response that consists of WHO, UNICEF, IFRC and MSF.
- Countries send requests to the ICG, which then evaluates and confirms an allocation. Doses are then shipped rapidly by UNICEF.

## When will it become operational?

- The stockpile is expected to begin operations this month, in **September 2026**.

## How did the stockpile come into existence?

- **[2022]** A global mpox outbreak triggered the declaration of a **Public Health Emergency of International Concern (PHEIC)** and saw lower-income countries left behind when it came to **access to vaccines**. This underscored both the public health and security risk posed by mpox as well as the need to support equitable access.
- **[2022]** As a result, when Gavi began planning its investments in new vaccines for its next strategic period (2026-2030), **mpox vaccines were included in the assessment process for potential inclusion in the Gavi portfolio**.
- **[2024, June]** A final Vaccine Investment Strategy was approved in principle by Gavi's Board, and it included a **decision to establish a global mpox vaccine stockpile**, and to invest in a learning agenda to improve the availability of data on mpox vaccination.
- **[2024, August]** Mpox outbreaks in Africa led to the **declaration of a second Public Health Emergency of International Concern (PHEIC)** by the WHO.
- **[2024, September]** WHO prequalified the **MVA-BN mpox vaccine** and brought together partners by establishing an mpox Access and Allocation Mechanism. With the setup of a global stockpile still two years away but WHO approvals in place, **Gavi leveraged its "First Response Fund" mechanism to [secure 500,000 doses of mpox vaccine](#)**, and helped coordinate dose donations to impacted countries. In total, Gavi facilitated the delivery of more than a million doses, becoming the largest source of supply for the global response.
- **[2025]** Thanks to the efforts of countries and partners, **WHO declared that the mpox PHEIC was over**.
- **[2025, July]** By July 2025, partners had finished work on an investment case and the **Gavi Board formally approved the establishment and financing for the mpox stockpile**.
- **[2025, December]** Gavi published a **mpox vaccine market shaping roadmap**, outlining multi-year forecasts for demand and supply – providing critical information for manufacturers and other partners.
- **[2025-2026]** Partners have been **working to make the stockpile operational**. The ICG Secretariat has coordinated the ICG partners to operationalize the stockpile – e.g. establishing the target stockpile size and the development of forms and tools required for country applications – Gavi's

Alliance partner UNICEF has been leading negotiations on tenders to secure the vaccine doses, and Gavi and WHO are working together to establish the process that will enable Gavi-supported lower-income countries to access funding for operational costs of vaccination campaigns.

- [\[2026, September\]](#) The stockpile is **expected to be operational in September 2026**.

## Fighting major emergencies with vaccines

Vaccines are one of the most effective tools for controlling deadly outbreaks and preventing their spread across borders. A [major study of emergency vaccination in response to outbreaks](#) of five diseases over nearly 25 years shows that **vaccines helped reduce cases and deaths by nearly 60% on average**, and lowered the risk of large outbreaks.

Here's a quick overview of **how access works during emergencies where vaccines are a vital public health good** that must be made available to those that need them most.

### Cholera, Ebola, meningitis, mpox, and yellow fever outbreaks

- Each of these diseases has a Gavi-funded **global vaccine stockpile**, available for use by any country in the world.
- Gavi's funding ensures a predictable market for vaccines, and the ICG leverages its expertise to ensure the available supply is used for greatest public health impact by evaluating and approving country requests.

### Measles outbreaks

- The Measles & Rubella Partnership focuses on enabling measles vaccination around the world and supports emergency vaccination through its **Outbreak Response Fund (ORF)**.
- Through the ORF, Gavi funds doses and vaccination activities for lower-income countries struggling with measles outbreaks.

### Outbreaks of other diseases covered by Gavi's vaccine portfolio

- Gavi provides extra support to countries that are experiencing fragility and/or conflict and suffering from outbreaks of diseases – for example, diphtheria – where Gavi already invests in vaccines through the normal portfolio offered to countries.

### Major outbreaks of diseases not covered by Gavi's vaccine portfolio

- When there is a major emergency where vaccines are important but no mechanism exists to ensure access, the **Gavi First Response Fund (FRF)** steps in.
  - The FRF is designed to fill a clear gap identified after the COVID-19 pandemic – the need for immediate financing to support vaccine access and response, without being delayed by the need to mobilise traditional funding for the long-term response.

- The FRF was used for the first time in 2024, when it was used to procure mpox vaccines within weeks of WHO declaring an emergency, and days after a vaccine received WHO approvals.
- If there is an extended emergency of a much larger-scale – for example, a pandemic, the [Day Zero Financing Facility \(DZF\)](#) is Gavi's pandemic financing framework for vaccines.
  - The Facility is designed to mobilise resources immediately when a health emergency emerges, supporting faster and more effective global responses.
  - The FRF is one part of this Facility, which also includes financing tools that allow pledges from donors to be rapidly converted into funding – enabling rapid action without having to wait for grant agreements to be signed or funding to be transferred.

## Content & Resources

### QUOTES

**Dr Sania Nishtar, CEO of Gavi, the Vaccine Alliance:**

*“During the 2022 mpox outbreak, lower-income countries were left behind when it came to access to vaccines and it was clear that a mechanism was needed to ensure this global public good could be accessed by those who need it most.*

*Core to the Gavi Leap approach is increasing our responsiveness to country needs, and the bottom line is that any country in the world – not just those with the ability to pay the most – should be able to use this tool to save lives.*

*That is why Gavi supported the international response to the 2024 global mpox emergency by securing rapid access to doses through our First Response Fund, and why our Board agreed to establish and finance a global stockpile managed by our ICG partners. Our hope is that this stockpile will keep the world safer from the threat of this deadly disease.”*

**Dr Emanuele Capobianco, Director of Global Health Security, Gavi:**

*“COVID-19 taught us that when a major emergency occurs, immediate access to medical countermeasures for those who need them the most is an absolutely essential part of the response. Gavi’s First Response Fund was set up for precisely this purpose – and used successfully in the case of the 2024 mpox emergency. The world needs similar tools for other countermeasures.*

*Then, if we expect a disease to continue to pose a threat, there needs to be a long-term sustainable solution to ensure access. This is the role of the global stockpile. Predictable funding and demand from Gavi ensures supply is available and lower-income countries facing emergencies have support. That available supply is then used to achieve the greatest public health impact, thanks to allocation decisions made by the four ICG partner organisations, who have deep expertise in public health and emergency response.”*

**Dr Francisco Luquero, Head of High-Impact Outbreaks, Gavi:**

*“Rapid access to vaccines is a gamechanger when it comes to outbreaks. Studies looking at major outbreaks over 25 years have shown that emergency vaccination has reduced cases and deaths by nearly 60% on average – with the impact even higher for some diseases. When it comes to mpox, recent emergencies have made clear the public health and health security risk the disease poses. Vaccines are a vital tool to mitigate this risk.”*

## SPOKESPERSONS AVAILABLE FOR INTERVIEW

**Dr Emanuele Capobianco, Director, Global Health Security** [English, Italian, Portuguese]

Dr Emanuele Capobianco has an MD, and Master’s degrees in Public Health and International Humanitarian Action. Dr Capobianco brings 25 years of experience in policy development and implementation of health programmes in low and middle-income countries with specific expertise in epidemics, fragile settings, and maternal/child health. Before joining Gavi, he was Chief Strategy and Impact Officer at the WHO Foundation, and before that Director of Health and Care at the International Federation of the Red Cross and Red Crescent Societies (IFRC) from 2017 to 2021, where he was the IFRC lead and spokesperson for COVID19 and the emergency coordinator for the response to several Ebola outbreaks in DRC. Dr Capobianco has also worked with the Partnership for Maternal, Newborn & Child Health, the Global Fund, World Bank, UNICEF and WHO including in Mozambique, Somalia, Afghanistan and India.

**Dr Francisco Luquero, Head, High Impact Outbreaks** [English, French, Spanish]

Dr Francisco Luquero has an MD and PhD in infectious disease epidemiology, and a Master’s degree and residency in Public Health. In his current role as Head of High Impact Outbreaks in Gavi’s Global Health Security team Dr Luquero oversees Gavi’s support to outbreak response and preventive vaccination for epidemic prone diseases, including Ebola, cholera, meningitis and yellow fever. Prior working at Gavi he was the Deputy Director of the Intervention Epidemiology Department at Epicenter (the research branch of Médecins Sans Frontières) and he worked at the Johns Hopkins School of Public Health, where he serves as an Associate Scientist. Over several decades, Dr Luquero has led pioneering work in Africa in the evaluation of the feasibility, acceptability and vaccine effectiveness for epidemic prone diseases like cholera, measles, typhoid fever and Ebola.

## PHOTO + VIDEO

- [Sierra Leone starts mpox vaccination](#) (Photos + b-roll, Sierra Leone, 2025)
- [Arrival of 200,000 doses of MVA-BVN mpox vaccine in DRC](#) (Photos + b-roll, DRC, 2025)
- [Mpox vaccination in DRC](#) (Photos + b-roll, DRC, 2024)
- [Arrival of mpox vaccines in DRC](#) (Photos + b-roll, DRC, 2024)
- [Photo of manufacturing at the Bavarian Nordic factory](#) (Single photo, Denmark, 2019)

## STORIES FROM THE COMMUNITY

The below is a selection of the most recent pieces on Gavi's VaccinesWork platform. For the full list of mpox related articles, see [here](#). All material is available for reposting with attribution under creative commons.

- [How vaccine trials in Congo could help protect mothers and children from Mpox](#) (2026)
- [In Comoros, containing mpox means vaccinating, tracing – and rebuilding trust](#) (2026)
- [In Madagascar, stigma is undermining the fight against mpox](#) (2026)
- [On Kenya's borders, the Ministry of Health works with truck drivers and sex workers to fight mpox](#) (2026)
- [In Malawi's townships, 'relatable' youths step up as mpox peer educators](#) (2026)
- [Sierra Leone's mpox case-count is plummeting. Can the country get to zero new infections?](#) (2025)
- [How the mpox vaccine has changed lives – and minds – in Kinshasa](#) (2025)
- [In Kaduna, Nigeria, all hands are on deck to fight an mpox outbreak](#) (2025)
- [How a new global vaccine stockpile will help to counter the ongoing mpox threat](#) (2025)