Gavi Evaluation Advisory Committee (EAC)

BOARD MEETING
Rob Moodie
10-11 June 2015, Geneva
Debrief EAC meeting (18-19 March 2015)

Outcomes and impact evaluation of Advance Market Commitment for pneumococcal vaccines
- Decision: Approval of the RFP

Gavi Full Country Evaluations (FCE)

Health system strengthening (HSS) grant evaluations

Gavi Evaluation preliminary workplan
Gavi full country evaluations: Overview

Conducted in four countries: Bangladesh, Mozambique, Uganda, and Zambia

**Goal:** Examine and quantifying barriers to and drivers of immunization program improvement, with emphasis on Gavi, the Vaccine Alliance

Evaluates all relevant Gavi support across all phases

2013-2016

Consortium of partners
Prospective monitoring & evaluation platform

Systematic secondary data analysis with complementary primary data collection

Inputs
- Resource tracking

Process
- Observation
- Document review
- Key Informant interviews

Outputs
- Health facility surveys
- HMIS

Outcomes
- Household surveys
- DBS
- Small-area estimates

Impact
- Vaccine effectiveness
Principles of the Gavi FCE

Harmonizing monitoring and evaluation activities in each country by leveraging and integrating available data;

Strengthening country ownership and capacity, by partnering with in-country institutes and undertaking shared learning activities;

Providing timely, regular, and systematic feedback to countries, Gavi, and partners.
FCE - New vaccine introductions

- Uganda - PCV: Pentavalent ratio by district a ratio of 1 indicates that PCV has the same number of doses delivered as Pentavalent vaccine
FCE- Health systems strengthening

- Zambia: HSS Application

LIMITED EXPERIENCE IN HSS APPLICATION PROCESS

COMPETING PRIORITIES FOR THE GOVERNMENT OF ZAMBIA AND OTHER STAKEHOLDERS

GAPS IN ORIENTATION AND TRAINING BY WHO OF STAKEHOLDERS IN HSS APPLICATION PROCESS

ROLE AND RESPONSIBILITIES FOR HSS STRUCTURED DIFFERENTLY THAN FOR NEW VACCINE SUPPORT

ONGOING ADAPTATION TO MINISTERIAL REALIGNMENT

EXPECTED OUTCOMES

- Success
- Response
- Context

CHALLENGES

- Delayed application
- Unclear writing roles and responsibilities

ROLES AND RESPONSIBILITIES FOR HSS STRUCTURED DIFFERENTLY THAN FOR NEW VACCINE SUPPORT

COORDINATION AND COMMUNICATION CHALLENGES BETWEEN PARTNERS

LATE RECRUITMENT OF CONSULTANT

LIMITED EXPERIENCE IN HSS APPLICATION PROCESS

KEY

- Root cause
- Challenge
- Consequence
- Response
- Success
- Context
FCE - Partnership

- Uganda: HPV application partnership network

Ties weighted by reported trust score, nodes colored by organization type and sized by “degree centrality” (i.e., how many ties they have)
Gavi FCE in 2015-2016

**Broadened outcome and impact assessment**
- Integrated health facility and household surveys including biomarker measurement
- Causal analysis based on small-area estimates
- Vaccine effectiveness

**Key cross-country focus areas presently identified**
- Health system strengthening (new PBF support window)
- Partnership including technical assistance
- Multiple support streams including multiple vaccine introductions

**Assessment and baseline for new policies and procedures**
- Grant management and monitoring including joint appraisal
- Partner engagement framework
- 2016-2020 strategy
<table>
<thead>
<tr>
<th>Year</th>
<th>Description</th>
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<tr>
<td>2011</td>
<td>Gavi Board approved Performance Based Funding (PBF) for cash based support (PBF is designed to help strengthen focus on performance and immunisation outcomes)</td>
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<td>2012</td>
<td>PBF is the default mode for HSS support for all new HSS applicants starting in 2012 (second generation HSS grants or HSS II)</td>
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<td>2013</td>
<td>Significant revision to HSS guidelines</td>
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<td>2014</td>
<td>Gavi introduced into its new guidelines a recommendation for independent mid-grant evaluations and a requirement for independent end-of-grant evaluations (only for new applications submitted from 2014 onward)</td>
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**Mar 2015**

The Evaluation Advisory Committee (EAC) noted that none of the countries with HSS II grants, which include PBF, are sufficiently advanced to undergo evaluation. The EAC recommended:

- a discussion with the Board regarding the timing of a wider evaluation of the HSS grant window – including of the PBF element
- that the Secretariat commission a meta-review of existing country evaluations (which all relate to first generation HSS grants or HSS I)
- Conduct a 2 hour technical briefing before the December 2015 Board meeting
## Gavi evaluation preliminary workplan

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<thead>
<tr>
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<th>2015</th>
<th>Preliminary 2016 / 2017</th>
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<tr>
<td><strong>Thematic evaluations</strong></td>
<td>• Outcomes &amp; Impact Evaluation of the AMC for pneumococcal vaccines</td>
<td>• Evaluation of Gavi Fragility and Immunisation Policy</td>
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<td>• HSS meta-review (HSS I) – ToR available, estimated to be undertaken Q2-3 2015</td>
<td>• Grant Application, Monitoring and Review (GAMR) evaluation</td>
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<td>• Evaluation of the technical assistance provided by partners to countries</td>
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<td>• Evaluation of Gavi HPV Support</td>
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<td>• Lessons learned from IPV programme</td>
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<td><strong>HSS end-of-grant evaluations</strong></td>
<td>Gavi led</td>
<td>• Nepal</td>
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<td>• Madagascar</td>
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<td>Country led</td>
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<td>• Ghana</td>
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<td>• Cote d’Ivoire</td>
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<tr>
<td><strong>Final Evaluation of Gavi Support</strong></td>
<td>• Albania</td>
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<td>• Ukraine (to be confirmed)</td>
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<td>• Bhutan, Honduras, Mongolia, Sri Lanka (preparation of the RFP)</td>
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<td><strong>Full Country Evaluation (FCE) (2013-2016)</strong></td>
<td>• Bangladesh / Mozambique / Uganda / Zambia</td>
<td>• Bangladesh / Mozambique / Uganda / Zambia</td>
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THANK YOU