GAVI’S SUPPORT FOR EMERGENCY VACCINE STOCKPILES

BOARD MEETING
Wilson Mok
7-8 December 2016, Abidjan, Côte d’Ivoire
OVERVIEW OF CURRENT ENGAGEMENT (1)

Gavi financial support:
- Vaccine costs
- Operational costs
- PEF funding (stockpile management and disease focal points)

Yellow fever
Meningitis
Cholera
## OVERVIEW OF CURRENT ENGAGEMENT (2)

### Approach

- International Coordinating Group (ICG) manages each stockpile; decisions on country requests
- Gavi funding disbursed to WHO, UNICEF
- WHO: Secretariat to ICG

### Stockpile use: since 2006 …

- 30 countries accessed stockpiles, 27 Gavi-supported
- 113 approved requests
- 72 million doses
- ~US$ 90 million disbursed
THREE AREAS FOR ENHANCEMENT

- Strategic design
- Effective implementation
- Accountability
STRATEGIC DESIGN

Lessons learned

- Piecemeal investments, not systematic
- Time-limited funding, not integrated within disease strategy
- Lacking processes when unforeseen needs arise
- Policies unclear or inconsistent

Proposed principles

- Stockpile investments integral part of comprehensive disease strategy
- Non-Gavi-supported countries access vaccine with reimbursement post-hoc
- All Gavi-supported countries access vaccine and operational support up to $0.65/targeted person
EFFECTIVE IMPLEMENTATION

Lessons learned

- Comparative advantage of Alliance partners not fully harnessed
- Single year forecasts, lacking structured approach
- Multiple procurement channels
- Limited country capacity

Proposed principles

- Multi-year forecasts via collaborative, Alliance-wide effort
- Single procurement agency, with agreed exceptions
- Strengthening country capacity through existing funding approaches
ACCOUNTABILITY

Lessons learned

- Insufficient transparency on ICG dose allocation decisions
- Limited information impairs coordination, communication
- Performance indicators not clearly defined
- Inconsistent country post-campaign evaluation

Proposed principles

- Transparent decision criteria; Gavi Secretariat observes decision process and participates on broader strategic issues
- Real-time sharing of information
- Reporting provides visibility to outcomes and lessons for mitigating future outbreaks
FINANCIAL IMPLICATIONS

- Investments no longer time-bound
  - Meningitis beyond 2017
  - Cholera beyond 2018 for emergency use of stockpile
  - Operational cost support for yellow fever and meningitis set at up to $0.65 / targeted person

- **Meningitis**: $2M for 2017; $47M for 2018-2020
- **Cholera**: $39M for 2019-2020
- **Yellow fever**: increased operational support included separately in paper on update of comprehensive YF strategy
RECOMMENDATION

The Gavi Alliance Programme and Policy Committee recommended to the Gavi Alliance Board that it:

a) **Approve** the principles set out in Figure 1 of Doc 13 for Gavi’s support for emergency stockpiles of Gavi-supported vaccines as an integral part of integrated disease control strategies, as amended by discussions at the PPC, overriding previous Board decisions on Gavi’s support for emergency stockpiles; and

b) **Note** that additional funding associated with the adoption of the principles for the period 2017-2020 amount to approximately US$86 million for meningitis and cholera.
Thank you