1. Chair’s report

1.1 Finding a quorum of members present, the meeting commenced at 08.40 Geneva time on 22 June 2016. Ngozi Okonjo-Iweala, Board Chair, chaired the meeting.

1.2 The Chair welcomed new Board members and Alternate Board members, as well as René Karsenti, Chair of the International Finance Facility for Immunisation (IFFIm), other directors of the IFFIm Board and Rob Moodie, Chair of the Evaluation Advisory Committee. The Chair noted that departing members would be recognised for their service at the dinner that evening.

1.3 The Chair discussed changes to the presentation of the Board pack in order to reduce the volume and technical density of the materials provided to Board members in preparation for the meeting and invited Board members to continue to provide feedback on this in order to ensure continuous improvement. She also indicated that as Chair her wish is for less formality, more exchange and dialogue between Board members at the meetings.

1.4 The Board met in executive session on the evening of 21 June and again on 23 June to discuss a number of items including the Board and Committee self-evaluation process and to review the CEO performance appraisal process.

1.5 In relation to the self-evaluation process, the Chair highlighted the opportunity that this provides, not only for her as new Board Chair but also for the Board, to address any issues which could improve Board performance. The ultimate aim is to improve the efficiency and effectiveness of the Board to ensure that it is fit for purpose to deliver on the new strategy.

1.6 Standing declarations of interest were tabled to the Board (Doc 01a in the Board pack). The Chair thanked Board Members and Alternate Board members for responding promptly to the Secretariat’s request for their updated Conflicts of Interest Declarations this year and highlighted that this is an important part of the Board’s integrity efforts and governance. The Chair noted that in the context of the items for decision on the agenda, there were a number of Board members who would have conflicts of interest and that these would be raised at the appropriate time and recorded in the applicable parts of the minutes.

1.7 The Board noted its minutes from 2-3 December 2015 (Doc 01b), which were approved by no objection on 12 April 2016. The Board also noted its workplan (Doc 01c) and the Chair encouraged Board members to contribute to the forward plan by raising issues which they may wish to add either with her directly or with the Secretariat.
2. **Consent agenda**

2.1 The consent agenda included the recommendation of the Governance Committee for Board and Committee member appointments (Doc 02a), Board Travel Policy review (Doc 02b), and Gavi Alliance ad-hoc appeals tribunal (Doc 02c). It also included the recommendations of the Independent Committee Review (IRC) for a Programme funding request for new vaccine support (Doc 02d) as well as recommendations from the Programme and Policy Committee for the Oral Cholera Vaccines operational cost support (Doc 02e), Men A bridge funding (Doc 02f) and the Co-financing of Japanese Encephalitis vaccine (Doc 02g). An additional recommendation from the Governance Committee in relation to Vice Chair Appointment (Doc 02h) had been circulated to the Board following the Governance Committee meeting on the previous day.

**Decision One**

The Gavi Alliance Board:

a) **Appointed** the following Board members:

- **Irene Koek** of the United States as Board Member representing the United States on the donor constituency anchored by the United States in the seat currently held by Katie Taylor of the United States effective immediately and until 30 June 2017.
- **Helen Rees** as an Unaffiliated Board member in the seat currently held by Sania Nishtar effective immediately until 30 June 2019.
- **Ramjanam Chaudhary** of Nepal representing the developing country constituency in the seat currently held by Khaga Raj Adhikari of Nepal effective immediately and until 31 December 2017.
- **David Loew** as a Board member representing the vaccine industry industrialised countries in the seat currently held by Olivier Charmeil effective immediately and until 31 July 2017.

b) **Reappointed** the following Board member:

- **Donal Brown** of the United Kingdom as Board Member representing the United Kingdom on the donor constituency anchored by the United Kingdom until 31 December 2016.

c) **Appointed** the following Alternate Board members:

- **Jason Lane** of the United Kingdom as Alternate Board Member to Donal Brown of the United Kingdom, representing the donor constituency anchored by the United Kingdom, in the seat currently held by Jo-Ann Purcell of Canada effective immediately and until 31 December 2016.
- Bounkong Syhavong of Lao PDR as Alternate Board Member to Ramjanam Chaudhary of Nepal representing the developing country constituency in the seat currently held by Eksavang Vongvichit of Lao PDR effective immediately and until 31 December 2017.

d) **Appointed** the following to the Executive Committee effective 1 July 2016:

- Donal Brown until 31 December 2016.

e) **Appointed** the following to the Governance Committee effective 1 July 2016:

- Donal Brown until 31 December 2016.

f) **Appointed** the following to the Audit and Finance Committee effective immediately:

- Alexandru Cebotari (Committee Delegate) until 31 December 2017.
- Emmanuel Maina Djoulde (Committee Delegate) until 31 December 2017.

g) **Appointed** the following to the Programme and Policy Committee effective immediately:

- Helen Rees (Board member) in the seat currently held by Sania Nishtar (Board member) until 31 December 2017.
- Brad Gessner (Alternate Board member) in the seat currently held by Zulfiqar A. Bhutta (Committee Delegate) until 31 December 2017.
- Rama Lakshminarayanan (Alternate Board member) in the seat currently held by Robert Oelrichs (Committee Delegate) until 31 December 2017.
- Syed Monjurul Islam (Committee Delegate) in the seat currently held by Shanta Bahadur Shresta (Committee Delegate) until 31 December 2017.

*Board members who were candidates for these positions, or whose organisations or constituencies provided candidates for these positions, did not participate in voting on these appointments.*

**Decision Two**

The Gavi Alliance Board:

- **Approved** amendments to the Board Travel Policy as outlined in Appendix 1 to Doc 02b.
Decision Three

The Gavi Alliance Board approved:

a) the appointment for a term of three years of Professor Dr. Claude Rouiller as President of the Gavi Ad Hoc Appeals Tribunal; and 

b) the appointment for a term of three years of Ms Anne Trebilcock as legal expert to serve on the Gavi Ad Hoc Appeals Tribunal in case of unavailability of its President.

Decision Four

The Gavi Alliance Board:

Programmes


Budgets

b) Endorsed a net increase in programme budgets by US$ 0.2 million for the period 2017 to implement the IRC recommendations in (a).

These endorsements would constitute acknowledgement of such budget amounts but would not constitute a funding approval, decision, obligation or commitment of the Alliance or its contributors.

Decision Five

The Gavi Alliance Board:

• Agreed to a portion of the already approved Gavi contribution to the global oral cholera vaccine stockpile being used for operational costs for Gavi-supported countries (low income, Phase 1 and Phase 2 countries), for which the estimated costs are US$ 20 million in the period 2016-2018.

Decision Six

The Gavi Alliance Board:

• Approved an amount of up to US$ 15 million of bridge funding to meet meningitis emergency outbreak needs of the 26 countries in the African meningitis belt in the 2016-2017 and 2017-2018 transmission seasons to be managed through the Meningitis International Coordination Group (ICG). The bridge-funding amount includes estimated costs for the procurement of polysaccharide and conjugate vaccines, devices and shipment and operational cost.

Laura Laughlin (IFPMA) and Adar Poonawalla (DCVMN) recused themselves and did not vote on Decision Six.
Decision Seven

The Gavi Alliance Board:

- Agreed that Gavi and countries shall co-finance Japanese Encephalitis vaccine used in routine vaccination programmes.

Decision Eight

The Gavi Alliance Board:

- Reappointed the current Board Vice Chair, Flavia Bustreo, for a second term as Board Vice Chair initially to 30 June 2017.

Jean-Marie Okwo-Bele (WHO) recused himself and did not vote on Decision Eight.

3. 2016-2020 Strategy: Implementation and progress

3.1 The Chair introduced this item by informing Board members that in the context of her first meeting as Board Chair, and as Gavi is now into its new strategic period, she had asked the CEO to start the meeting with a presentation on implementation and progress of the strategy to date.

3.2 Seth Berkley, CEO, reviewed the strategic periods within Gavi since inception in 2000 and relayed both achievements and challenges to date. He highlighted that the new mission continues the introduction of new vaccines but also enhances focus on equitable access to vaccines in lower income countries, and on coverage, equity and sustainability to ensure that immunisation can continue in countries when Gavi support ends.

3.3 The CEO reviewed the four strategic goals, outlining what has already been put in place, what will become operational following decisions at this meeting and issues which are being worked on and which will come back to the Board in the future for discussion and decision. He mentioned two significant changes for Gavi during this strategic period, namely the foundational support being provided to Partners to help deliver on Gavi’s mission, and the country-centric approach.

3.4 The CEO provided information on the forecasted impact by vaccine towards preventing future deaths during the 2016-2020 period, as well as the forecasted % of deaths averted in the ten countries where the impact is expected to be highest.

3.5 The CEO noted that it is premature to determine if the strategic objectives are on track at this point, as Gavi is only six months into the implementation phase. He did however express that early indications seem to suggest that these new strategic objectives are having a positive impact with regard to intensifying engagement in countries.
3.6 He concluded his presentation by giving examples of countries where the greater focus on coverage and equity can already be seen in action, and he referred to the work being carried out in the Democratic Republic of Congo (DRC) in relation to cold chain equipment optimisation.

Discussion

- Board members indicated that they found it useful to have this presentation as it enabled them to have a high-level overview of the strategy implementation and to frame the discussions that would be taking place later during the meeting.

- In response to a request from a Board member, the CEO indicated that it would have been premature for this meeting to present a dashboard on the progress of implementation of the strategy but that this would be available from the December 2016 meeting onwards.

- It was agreed that it would be useful to ensure standardisation of the terminology being used across the Alliance including in Board papers (e.g. transition v. graduation).

- In response to a question from a Board member, the CEO relayed that Gavi currently serves approximately 60% of the birth cohort in the world, and about 45-50% of children in the world get vaccinated through Gavi supported programmes.

- Board members agreed on the importance of getting accurate data, including at the sub-national level, in particular to enable correct measurement of Gavi’s coverage and equity targets.

4. CEO’s report

4.1 Seth Berkley, CEO, delivered his report to the Board (Doc 04). He indicated that we are entering a transition period in that there are uncertainties with regard to some national elections and senior leadership transitions within the WHO and UN over the coming months.

4.2 He referred to the need to continue to work to ensure the endorsement of a vaccine indicator within the framework of the sustainable development goals (SDG) and in this context proposed that a letter be sent by the Chair, on behalf of the Board, to the UN statistical commission to reiterate this message. He noted that one of the challenges is to convey how vaccination programmes align with greater health system integration as a platform for universal health coverage.

4.3 The CEO conveyed that the focus on disease outbreak such as Ebola and Yellow Fever is having a significant impact on shaping the global health agenda around these issues and he commented that it is difficult to predict how the subsequent disease outbreaks will evolve.
4.4 He expressed concerns about yellow fever as the most pressing global health concern in the future because it has spread so rapidly both within Angola and across national borders. The CEO emphasised that Gavi has been working with WHO to manage the outbreak including expanding Gavi support for the yellow fever stockpile and to review the strategy for routine immunisation, campaigns and stockpiles and that a yellow fever strategy is to be brought to the PPC and to the Board for consideration in October and December 2016 respectively.

4.5 The CEO noted that Gavi needs to keep continued focus on diseases such as measles to ensure that related health burdens do not resurface and require additional intervention efforts. In this context he provided information on progress of implementation of Gavi’s new measles-rubella strategy.

4.6 The CEO briefly mentioned a variety of new initiatives to tackle emerging health emergencies and looks forward to Gavi offering support, where appropriate, to those programmes. In this context he reminded Board members that a number of related issues will be brought to them for discussion/decision over the coming year, namely support for vaccine stockpiles and Gavi’s role in fragile settings and humanitarian emergencies.

4.7 The CEO noted the critical consideration of how vaccines can help to reduce antimicrobial resistance. He provided an update on the work being carried out to eradicate polio and conveyed the necessity to have a discussion with the Global Polio Eradication Initiative (GPEI) and GPEI donors about support for IPV post-2018.

4.8 The CEO provided an overview on the expected overall results of the 2011-2015 strategic period, highlighting that it is unlikely that the 2015 targets for coverage, equity and drop-out will be met. He noted improvements in country co-financing efforts, which was at a higher rate than expected. He also noted Gavi’s market shaping results in terms of achieving lower vaccine prices, whilst regretting a number of vaccine supply shortages over the past months.

4.9 The CEO highlighted a number of countries which had introduced new vaccines since the last Board meeting, as well as continued work to engage at the highest political level, including Ministers of Finance. In this context he referred to the incredible value of the return on investment of immunisation in developing countries, as outlined in an article in Health Affairs in February 2016.

4.10 He provided an update on work being done in some of Gavi’s priority countries and also referred to work being done to reboot Gavi’s HPV vaccine programme and it is expected that further information on this will be brought to the PPC and the Board later this year.

4.11 The CEO gave a progress report on implementation of the cold chain equipment optimisation platform, and highlighted the critical need to keep at the forefront of innovation, referring in particular to the partnership with UPS and Zipline to explore the use of drones to deliver vaccines in Rwanda.
Discussion

- The Board member representing the World Bank wished to clarify information in relation to World Bank support to Nigeria which had been mentioned in the CEO’s written report. He indicated that the World Bank has provided a US$ 410 million credit for polio eradication and that the Bank has provided an additional credit of US$ 150 million within the north east transition and stability programme, which includes results based financing incentives linked to increased DTP3 coverage in that area.

- In line with the CEO’s proposal, Board Members agreed that a letter should be sent on their behalf by the Chair to the UN statistical commission in relation to the need to include a vaccine indicator within the framework of the SDGs.

- In the context of increasing concerns around yellow fever outbreaks, Board members welcomed the fact that a comprehensive yellow fever strategy is being developed and will be brought to them later in the year.

- The importance of differentiating between government ownership and country ownership was highlighted, and the importance of the role of communities was stressed. In this context, the Board member representing the CSO constituency proposed a pre-Board technical briefing session in December 2016 on the role CSO’s play in contribution to increasing coverage and equity.

- Concerns were expressed in relation to potential reputational risks for Gavi due to its role in the polio eradication initiative in light of the current vaccine stock shortages and Board members noted that it is foreseen that consideration on Gavi’s role post 2018 is on the workplan for both the PPC and the Board going forward.

- Board members welcomed the information that HPV will be on the PPC and Board work plans for their respective meetings later this year, in particular as this is an important programme for Gavi to achieve its targets during this strategic period.

- A number of Board members reiterated, as had been discussed at the Board retreat earlier in the year, that they would like to see risk as a standing item on the agenda for Board meetings going forward.

- Board members noted that sustainability is a critical issue for a number of countries and it was suggested that it could be useful to develop a network of transitioned countries, who could support each other, work together and share experiences, perhaps also continuing to work with Gavi and UNICEF in relation to vaccine procurement through joint and pooled procurement systems and policies.

- A number of Board members commended the work and progress by both the Secretariat and countries to ensure that co-financing obligations are met.

- Board members also welcomed the fact that the issue of Gavi’s role in stockpiles will be on their agenda later in the year. In a related discussion on vaccine shortages and the different reasons behind these it was proposed that it might be
useful to have a pre-Board technical briefing session on this, as a follow on from a similar discussion hosted by SAGE during its meeting in April 2016.

- Board members indicated their support for looking at ways to increase partnerships, as demonstrated by the Rwanda/UPS/Zipline drone project.

5. Committee Chair and IFFIm Board reports

5.1 The Chair introduced this item, underlining the importance of the work of the committees and appreciation for the service of Board members, Alternate Board members and their Committee Delegates on these Committees.

Executive Committee

5.2 The Chair delivered the report of the Executive Committee noting that since the December 2015 Board meeting, one in-person meeting of the Executive Committee had been held on 18 March 2016. During this meeting the Committee had a discussion on the CEO appraisal process for which there is now a more systematic and structured approach, including agreed KPIs based on both short-term operational and longer term strategic goals and objectives, which the Chair will discuss with the CEO on a quarterly basis with an in-person review with the Executive Committee in November. During the meeting the Committee received a report from the CEO, which included country updates on Nigeria, India and Pakistan and discussed stockpile shortages relating to the Yellow Fever outbreak in Angola and neighbouring countries. There was also a discussion regarding Gavi’s participation in the Polio Steering Committee (PSC) and the International Coordinating Group (ICG).

Governance Committee

5.3 Flavia Bustreo, Vice Chair of the Board and Governance Committee Chair, highlighted that the Governance Committee has been incredibly engaged since the beginning of the year in the design of the process for the Board and Committee self-evaluation. She highlighted the importance of Board members engaging in the process through the on-line survey, which has a 70% response rate to date, and the in-person interviews which will be commencing shortly. She reported that the Governance Committee plans to have a meeting in early autumn to discuss the initial findings and proposed recommendations of the self-evaluation.

5.4 In addition to the self-evaluation related work, the Governance Committee continues to work on strengthening the process for the recruitment and selection of Unaffiliated Board members, has been having discussions in relation to the donor constituency groups and the importance of ensuring the engagement of new donors, as well as continues to monitor gender balance on the Board and Board Committees and will work actively to ensure the ratio is back on track in the near future.
Programme and Policy Committee

5.5 Richard Sezibera, Programme and Policy Committee (PPC) Chair, delivered the report of the PPC noting that the Committee had met on 12-13 May 2016 in Arusha, Tanzania. He had unfortunately not been able to attend the meeting himself due to a last minute request from his President to remain in Rwanda for important matters of the State and he thanked PPC members for their understanding and in particular Jean-Marie Okwo-Bele who had stepped in to chair the meeting on his behalf. He informed Board members that while in Arusha the PPC had also held a one day retreat and had had the opportunity to take part in a field visit to see first-hand some of the immunisation related work being carried out in the region.

5.6 During its meeting the PPC had considered a number of recommendations, three of which had already been approved by the Board on the Consent Agenda for this meeting. He highlighted that the issue of Gavi’s role in stockpiles had been raised on numerous occasions during the meeting and that the PPC looked forward to having a more in-depth discussion on this at its meeting in October 2016.

5.7 The PPC had had an opportunity to deliberate on three strategic questions relating to HPV, Gavi’s possible involvement in the continuation of the IPV programme beyond 2018, and how best to resolve questions around the eligibility status of countries that do not have an assigned GNI per capita figure by the World Bank and are only classified as Lower Middle Income Countries. All three of these questions will be on the agenda for further discussion and consideration at the PPC meeting in October 2016.

5.8 The PPC had discussed and agreed on recommendations to the Board in relation to Gavi’s health system strengthening support (HSIS) and the 2016-2020 supply and procurement strategy, both of which were being presented to the Board for decision at this meeting.

5.9 The PPC had received a comprehensive presentation on the market shaping results for the 2011-2015 strategic period and were pleased to note that Gavi had achieved all of its objectives for this period under strategic goal 4.

5.10 The PPC had also received an update on the malaria vaccine pilot proposal developed by WHO, and options to fund the implementation of these pilots as had been requested by WHO, and had agreed to recommend limited funding for the pilots with a number of contingencies and asked the Secretariat to convene an external review of the budget before this Board meeting. A report from this review is included in the materials which have been prepared for the Board.

5.11 PPC members had also received a comprehensive update on both the Partners’ Engagement Framework and the Alliance Accountability Framework and were appreciative of both the direction and the progress, in particular the strong country focus of PEF and introduction of Alliance KPIs, and the PPC Chair commended the Deputy CEO and the Secretariat for their work in bringing this together.
5.12 The PPC had also received a presentation on the proposed comprehensive approach to sustainability which included information on the focus areas for Gavi investments in immunisation finance, on the support that would be provided to transitioning countries from early on, on the next steps which would include design and coordination of interventions, integration of the comprehensive approach and operationalisation of interventions through the PEF. In this context PPC members had very much appreciated hearing from Minister Batres on her experience from the perspective of a transition country.

5.13 Finally, as a follow up to discussions which had been initiated during the PPC retreat on 10 May, PPC members took a close look at the Committee workplan for the coming year and, looking at the priorities, agreed that technical expert groups should be set up for the work to be carried out in relation to 2 important reviews - review of Gavi’s fragility and immunisation policy and the review of Gavi’s involvement in supporting vaccine stockpiles. Concept notes for each of these groups have since been shared with PPC members and a process is in place to appoint a PPC focal point for each of the groups.

**Discussion**

- A short discussion ensued in relation to the appropriateness of holding Committee meetings in-country, in particular in relation to the additional financial and human resources required, as well as security concerns that may need to be addressed. It was agreed that the end of year Board meeting should be held in-country but that stand-alone Committee meeting should normally be held in Geneva or in Washington DC with exceptions to be discussed and agreed by the Board. It was also agreed that the Secretariat should be more mindful of reputational risk when large groups of Secretariat and other Alliance stakeholder staff are travelling to meeting, and that the class of travel should be adapted accordingly.

**Audit and Finance Committee**

5.14 David Sidwell, Audit and Finance Committee (AFC) Chair, attending for this session by telephone, expressed his appreciation to the Chair for having been permitted to deliver his report in this manner, as it had not been possible for him to attend this meeting in person due to to another Board engagement. He noted that the AFC had held two meetings since the December 2015 Board meeting, one by teleconference on 26 February 2016 and one in-person meeting on 4 May 2016.

5.15 The independent auditors, KPMG, had outlined their plan and audit strategy for the audit of the 2015 financial year end and the Secretariat had presented the 2015 financial reporting plan. The Committee was comfortable with the scope and timelines presented, and things are on track for on-time completion of the audits along with the various tax filings and other statutory filings across the five Gavi legal entities.

5.16 The AFC had received a report from the Secretariat on updates to Gavi’s accounting policies, and AFC members noted that the Secretariat is currently working with the World Bank to explore the possibility of accelerating the timing of delivery of the Annual Financial Report in future years.
5.17 The AFC had received a report from the Managing Director, Audit and Investigations on a range of topics including: Audit & Investigations reorganisation; Whistleblower reporting; Programme Audit - 2015 and 2016 plans; Internal Audit – 2015 and 2016 plans; 2015 External Quality Assessment (EQA).

5.18 The Committee had a rich discussion on the AFC Charter which is being reviewed with the help of an external consultant, as well as on a new format for the committee workplan going forward. The Committee discussed the skill sets required for AFC members, and looked forward to continuing these discussions, also in the context of the ongoing Board and Committee self-evaluation. The Committee also discussed a proposal in relation to the development of an Alliance operating expense ratio.

5.19 Finally, the Committee discussed risk management, also following on from the related discussions at the Board retreat. It was agreed that the AFC will review a redesigned Corporate Risk Register and Risk & Assurance Report for Board approval in December 2016, including allocation of top risks to Committees. The redesigned Corporate Risk Register will categorise, prioritise and quantify top risks as part of Risk & Assurance Report to the Board.

Investment Committee

5.20 Stephen Zinser, Investment Committee Chair, delivered the report of the Investment Committee, which had met twice since the December Board meeting, on 12 February 2016 and 4 May 2016 by teleconference. He updated the Board on the macro environment and markets, the portfolio and performance review, on the key highlights for 2016 so far and the key priorities for the rest of the year.

5.21 He cautioned that the fiscal arena is entering unprecedented times as central banks are seeing diminishing returns from key market-friendly initiatives, fiscal spending and structural reforms are to be expected, inflation is modest now but poses a threat if policies are not appropriately adapted, and the outcome of the Brexit referendum is likely to have an impact on the markets.

5.22 He commented that equity market performance is mixed, that sovereign bonds are seen as risk havens and yields have been pushed to record low levels and that US fixed income markets which have positive, nominal yields are seen as attractive on a relative basis.

5.23 He reviewed the short-term and long-term investment portfolio objectives, highlighting that long-term objectives are to generate a positive real (after inflation) return, to generate income for current spending, to provide a prudent degree of growth in assets to support future spending, to provide for prudent diversification of investments to minimise correlation among investment strategies, to maintain liquidity to meet unanticipated operating requirements, and to maintain overall portfolio volatility with acceptable risk levels.

5.24 He provided information on the returns of Gavi’s investment portfolio, informed Board members that the Committee had an opportunity to review its first internal audit of investment management processes and evaluate the risks. He confirmed
that the Committee continues its review of semi-annual screening. The Committee requested that a practice of enhanced engagement with prospective and existing managers be initiated with discussions around the 2% limit defined in the socially responsible investment (SRI) policy.

**Evaluation Advisory Committee**

5.25 Rob Moodie, Evaluation Advisory Committee (EAC) Chair, delivered the report of the EAC noting that it had had one in-person meeting since the December Board meeting on 15-16 March 2016. He reported that the EAC had received an extensive report on the Full Country Evaluations project and that discussions are ongoing in relation to finalising the post-2016 approach to the project including exploring potential Gavi-Global Fund collaboration.

5.26 He informed Board members that the EAC had approved a Request for Proposals for evaluation of the technical assistance (TA) to be provided within the framework of the Partners’ Engagement Framework (PEF), and that the EAC looked forward to being involved in designing the evaluation approach for HSIS.

5.27 Finally, he informed Board members that the EAC had been involved in reviewing the quality and usefulness of the outcomes and impact evaluation of the Advanced Market Commitment (AMC) pilot for pneumococcal vaccines and the final evaluation of Gavi support to Albania.

**International Finance Facility for Immunisation**

5.28 René Karsenti, Chair of the IFFIm Board, delivered a report of the activities of the IFFIm Company. He conveyed that IFFIm has funded Gavi for the last 10 years in a total amount of US$ 2.5 billion, a figure that represents 28% of the total Gavi funding. During the next five years, IFFIm expects to provide US$ 1.3 billion to Gavi, or approximately 16% of the total Gavi funding during the 2016-2020 strategic period.

5.29 Dr Karsenti informed Board members that Australia has signed its A$ 37.5 million pledge agreement and that IFFIm is working with both France and the Netherlands to complete their respective pledge agreements.

5.30 Dr Karsenti indicated that discussions are ongoing among IFFIm donors, the IFFIm Board and the Gavi Secretariat on how IFFIm might be leveraged further to help achieve Gavi’s goals. He reported on discussions at the IFFIm donors workshop which was held on 20 June 2016 and that some areas identified where IFFIm might be leveraged in the future could include a financing tool for a Gavi outbreak response if the Gavi Board decides to play a role with a given vaccine, as a financial guarantor to support Gavi’s market shaping activities or, if approved by the Board, to incentivise vaccine production for late-stage vaccine candidates or listed vaccines.

5.31 Finally, Dr Karsenti informed the Board that the IFFIm Board is involved in a number of discussions related to replicating features of IFFIm for global goals. He indicated that the demand for innovative finance and “surge funding” is growing,
that IFFIm has been approached by the sanitation and hygiene sector and that discussions with the education sector and on climate change impact are also taking place.

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6. **Gavi-Global Fund approach to collaboration**

6.1 Seth Berkley, CEO, and Mark Dybul, Executive Director, Global Fund, made a joint presentation to the Board on the Gavi-Global Fund approach to collaboration. Dr Dybul expressed his appreciation to the Chair and the CEO for inviting him to present to the Gavi Board in this way.

6.2 They started by presenting an overview of both organisations in terms of mission, expenditure, Board structure, core partners and Secretariat size. They provided a comparison between the Gavi and Global Fund funding models and highlighted that the proposed approach is to actively collaborate in areas where there is clear added value. Five such areas have been identified, namely Monitoring & Evaluation/Data, Risk/Audit, Health systems, HQ operations (including a joint campus) and Sustainability/Health financing.

**Discussion**

- Board members welcomed the joint presentation and agreed that the areas identified appear to be those where collaboration would be beneficial to both organisations. They looked forward to a paper being brought to them at the appropriate time when more concrete guidance is required from their side.

- While Board members welcomed the approach to create efficiency and synergy, with an opportunity for each organisation to learn from each other in terms of best practices, some members cautioned against collaboration for the sake of collaboration, which could in some instances have the inadvertent effect of slowing up processes or even lead potentially to mission creep. The CEO noted that it is indeed important to focus on the areas where the collaboration would be most productive without losing the individual identity of each organisation.

- In relation to the work of the two organisations at country level, Board members agreed that it would be important to have the country perspective and also that of the development partners as this would be useful when working on further developing the framework for collaboration. It would also of course also be important to hear the demand perspective from the Global Fund.

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7. **Financial update**

7.1 Barry Greene, Managing Director, Finance and Operations, presented a financial update on 2015 and quarter one of 2016, an overview of 2011-2015 and the outlook for 2016-2020 (Doc 07).
7.2 He noted that for 2015 the programme expenditure was 89% of the initial projection, with the underspend relating mainly to Ebola, and that resource inflows were 8% above the initial projection, due to earlier than expected completion of some donor pledges.

7.3 In relation to the 2011-2015 strategic period, Mr Greene noted that in relation to the forecast presented to the Board in July 2011, the actuals at end December 2015 indicated a reduction of US$ 0.3 billion in qualifying resources due to Gavi deferring IFFIm proceeds, while the figures in relation to forecasted expenditure remained stable.

7.4 Mr Greene reviewed the financial implications of the decisions which the Board would be considering at this meeting and noted that should all of the decisions be approved, US$ 280 million would remain available for future investments through 2020, contingent on donor pledges being contributed and extended to 2020. He also reviewed some potential future investment opportunities, some of which would be contingent on additional resources being made available.

7.5 Finally, he informed the Board that regarding the availability of resources, the Audit and Finance Committee, at its meeting on 4 May 2016, had reviewed the financial implications of the potential funding decisions being put to the Board at this meeting and concluded that they could be approved in accordance with the programme funding policy.

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8. Report from Audit and Investigations

8.1 Simon Lamb, Managing Director, Audit and Investigations, provided the Board with a report on his activity (Doc 08). He provided an update on the re-organisation of the audit function within the Secretariat, on the status of country reimbursements where misuse of funds had been identified, and provided information on both the internal audits and the programme audits conducted in 2015 and planned for 2016.

Discussion

- Board members commended the work being done by the audit and investigations team.

- They noted that the programme audits team has a dual, and at times conflicting, responsibility when engaging with countries to identify where problems may arise but also to maintain a good relationship with the country to enable them to strengthen their programmes and processes.

- It was suggested that some attention needs to be devoted to how misuse can be prevented as opposed to simply attempting to catch those follow on problems, and it was noted that this would require close coordination in-country.

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9. **Malaria vaccine pilots**

9.1 The CEO introduced this item (Doc 09) highlighting that there have been regular exchanges and close engagement on this issue with WHO, UNITAID and the Global Fund over the past few months.

9.2 Judith Kallenberg, Head of Policy, presented information to the Board on the malaria vaccine developments and Gavi involvement since 2013 and on the malaria vaccine pilot proposal developed by WHO. She highlighted the pilot milestones, the risks of investment and the considerations for a funding commitment.

9.3 Pedro Alonso, Director, WHO Global Malaria Programme, commented that the unique development of a malaria vaccine, which has been advanced to this stage through all of the various research and regulatory obstacles, should not be overlooked or dismissed given the scale of the malaria problem in Africa and the potential benefits from this vaccine if used in conjunction with other treatment/prevention techniques. Dr. Alonso stated that this malaria vaccine represents a major tool, though not a perfect remedy, which has the potential to save many children’s lives in Africa. He noted that imperfect tools are frequently used to combat the present-day malaria problem with incredible success over the past 15 years, and this malaria vaccine is a historical development with the potential to reduce the mortality rate even further.

**Discussion**

- Board members representing the African region expressed strong support for the pilots, noting the burden of malaria on their countries and the need to understand the potential value of this vaccine in a real-life setting.

- Board members were supportive of this initiative but did draw attention to the importance of the contingencies outlined in the proposed decision, stressing that they required careful consideration due to the multiple complexities surrounding the implementation of this pilot programme.

- Board members noted that approval of this decision would be an important signal to industry to continue to contribute to the quest for new vaccines for low income countries.

- Board members noted that the vaccines for the pilots are being donated by the manufacturer and it was highlighted that one important consideration for the future for countries will be the price of the vaccine and that it would be useful for them to have information on this sooner rather than later.

**Decision Nine**

The Gavi Alliance Board, using available resources from the current strategic period, and contingent upon WHO securing funding from other sources to fully finance the Malaria Vaccine Pilots:
a) **Approved** in principle an amount of up to US$ 27.5 million (equivalent to half of the funding request) for Phase 1 of the WHO-led Malaria Vaccine pilots to be implemented during 2017-2020; and

b) **Noted** that this investment is contingent upon:
   i. Other funders contributing an equivalent amount to cover the pilot costs;
   ii. Independent review of the proposed budget amount ensuring that this is being done as cost effectively as possible;
   iii. Further assessment of the selection of pilot settings;
   iv. Close engagement with the Global Fund and UNITAID including through the proposed Funders Forum;
   v. WHO seeking input from Alliance partners in the planning and implementation of the pilots;
   vi. Communication that this investment is for implementation evaluation of a newly licensed vaccine as distinct from R&D;
   vii. Clear communication that this recommendation does not constitute a precedent for future funding related to the implementation of the malaria vaccine regardless of the outcome of the pilots, nor for future funding of similar pilots for other vaccines;
   viii. Quarterly reports, including active monitoring of key risks, to the PPC, and a detailed report to the PPC and Board on progress no later than 2019.

David Loew (IFPMA) and Adar Poonawalla (DCVMN) recused themselves and did not vote on Decision Nine.

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10. **Chair’s reflections on the day**

10.1 The Chair provided some reflections on the Board’s deliberations during the first day of its meeting.

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11. **Chair’s overview**

11.1 The Chair reflected briefly on the previous day’s discussions, highlighting that it demonstrated the best of what the Board and the Alliance is supposed to deliver and the Board performing at its best. She thanked the developing country representatives for their strong participation in the malaria discussion and all Board members for their participation in this informed impassioned discussion. She anticipated similar discussions around the issues introduced today.

11.2 She then introduced a short film on the recent Ebola experience in Liberia.

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12. Health system and immunisation strengthening support

12.1 Anuradha Gupta, Deputy CEO, introduced this item (Doc 12) acknowledging the contribution of a wide range of Alliance partners and stakeholders to the work which had been carried out to enable finalisation of the framework being recommended today to the Board by the PPC for approval.

12.2 Gunilla Carlsson, who had chaired the Steering Committee which guided the HSIS work, stressed that strengthening the local health systems in order to expand immunisation programmes is the only way Gavi will be able to reach the elusive fifth child. She highlighted the transaction costs and difficulties with oversight in executing health system and immunisation strengthening programmes and reinforced the need to assist the recipient countries in mobilising their own assets and resources to complement the funds provided by Gavi.

12.3 Judith Kallenberg, Head, Policy, and Alan Brooks, Director, Health Systems and Immunisation Strengthening, outlined Gavi’s current approach which includes multiple, fragmented forms of support. They reviewed what have been identified as the key strengths of the current model as well as the key areas for improvement. They outlined an overview of the proposed changes which aim to support countries to reach all children, regardless of geography, socioeconomic status or gender-related barriers.

Discussion

- Board members expressed support for the proposed framework and welcomed the proposal to set aside at least US$ 1.3 billion for HSS disbursements during the 2016-2020 strategic period.

- Board members welcomed the emphasis on country ownership and highlighted that in order for the approach to be successful clear communication and close coordination will be needed in countries with other development partners, in particular as Gavi’s resources in this area are limited.

- Board members highlighted the importance of ensuring a strong focus on results through good monitoring and evaluation and supported in-country dialogue when defining Gavi’s support but cautioned against micro managing at the country level.

- The importance of ensuring that civil society organisations are involved at the country level was highlighted as this is an area where they can play an important role.

Decision Ten

The Gavi Alliance Board:

a) Approved the Framework guiding implementation of Gavi’s Health System and Immunisation Strengthening support attached as Annex A to Doc 04 to the PPC;
b) **Approved** the Implications for previous Board decisions and Board-approved policies, as well as the implementation plans as set out in Annex B attached to Doc 04 to the PPC, noting that the PPC recommended implementation immediately following the Board decision, taking into account feasibility for countries and realistic timelines for ensuring smooth and efficient scale up of implementation;

c) **Approved** the modifications to Gavi’s Co-Financing Policy regarding co-financing for measles and measles-rubella follow-up campaigns as set out in Appendix 2 to Doc 12;

d) **Agreed** that an amount of at least US$ 1.3 billion is available for HSS disbursements (including performance payments) for grant programme years in the 2016-2020 strategic period, with additional funding being subject to future Board decisions.

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13. **Partners’ Engagement Framework & Alliance Accountability Framework**

13.1 Anuradha Gupta, Deputy CEO, provided an update to the Board on the Partners’ Engagement Framework (PEF) and the Alliance Accountability Framework (Doc 13). She commented that the two most distinguishing features of this new model are the strong country centric approach and enhanced accountability for outcomes at the country level. She highlighted that under the PEF, countries will be engaged in the identification of TA needs and in the choice of TA providers.

13.2 The PEF will also leverage the comparative advantage of each partner, clarify roles, responsibilities, and more significantly harmonise Gavi investments with other bilateral investments at the country level. The PEF will also embed technical support in countries to transfer skills and ensure that the country staff is able to take responsibility for managing the programmes efficiently.

13.3 She indicated that approximately 50% of PEF funding for Partners will go to WHO and UNICEF at the country level, with additional resources being allocated to them at the regional and global levels. She highlighted the differentiated approach in relation to the allocation of resources per country and the tailored approach for support based on the country context.

13.4 She outlined that there will be a comprehensive, interlinked Alliance Accountability Framework and concluded by indicating that the key success factors relate to change management within core partner agencies, rapid on-boarding of staff with the right competencies, embracing PEF functions/TCA deliverables and the harmonisation of technical assistance (TA) across partners.

**Discussion**

- Board members strongly commended and endorsed the overall approach, with a country focus and improved accountability at all levels, and looked forward to hearing from countries and partners as we move forward on implementation.
• Board members appreciated in particular the fact that countries will now have visibility on the resources that are allocated to them and that they themselves will have a voice in designing the technical assistance that they need. It was noted that this new model creates opportunities for countries to drive the whole process and the success of this model is therefore going to depend on the ability of the countries to exercise leadership.

• Board members indicated interest in the fact that there is going to be an independent prospective evaluation of the technical assistance provided to the countries within the context of the PEF.

• Board members welcomed the increased engagement of the World Bank which has a clear comparative advantage to take the lead in relation to financial sustainability and in particular in helping to improve access to Ministers of Finance in this context.

• Board members noted that the functionality of the Inter-Agency Coordination Committees (ICC) is a recurrent theme and that this will be looked at closely in the work to be carried under within the remit of the leadership, management and coordination strategic focus area.

• It was suggested that it could be useful at some stage to do a comparison of this new business model with the previous model and the Secretariat noted that in the context of implementing this new model there is a huge learning agenda and opportunities to course correct if and when needed.

• Board members noted that the Alliance needs to accelerate the recruitment of expanded Partners to better respond to the country needs that cannot be best served by core partners.

• Board members agreed on the importance of ensuring that all of their representatives at country level are fully briefed on the PEF so that they may contribute to its success at the country level.

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14. **Country Programmes: Sustaining Immunisation Gains**

14.1 Santiago Cornejo, Director, Immunisation Financing and Sustainability, set the context for this session, noting significant improvement in the timeliness of payment of co-financing by countries. He highlighted that there is a more comprehensive approach to sustainability within the Alliance which builds on and operationalises existing building blocks. Elements of this approach include a sustainability vision, investment principles, sustainability tracers and strengthening immunisation financing. He provided an overview of the 30 countries entering the accelerated transition phase by 2020 and outlined the enhanced support that will be available to them during this strategic period.

14.2 Christoph Kurowski, Global Solutions Lead for Health Financing at the World Bank, presented information on the role of the World Bank in contributing to this
sustainability approach. He indicated that the Bank is primarily focused on resolving system bottlenecks that benefit the sustainability of immunisation programmes with positive ripple effects on other health outcomes.

14.3 Minister Edna Yolani Batres, Honduras, gave a presentation from the perspective of her country, which would be fully transitioning out of Gavi support. She highlighted the achievements of the national immunisation programme in her country with Gavi support over the years, including HPV this year. She also provided information on how the immunisation programme is and will be financed and outlined some of the actions which had been undertaken to ensure sustainability of financing for immunisation, including negotiations with the Minister of Finance and the development of an EPI multi annual plan. She took this opportunity to call for Gavi to explore a strategy for fully self-financing countries to access limited support for the introduction of future vaccines and expressed concerns about challenges fully self-financing countries might face once they no longer have assurances that manufacturers will offer prices similar to those Gavi pays.

**Discussion**

- Board members appreciated the presentations and in particular the presentation from Minister Batres which demonstrated a concrete example of the issues facing transitioning countries.

- Board members were also very appreciative of the approach to sustainability which has an ambitious target, but which should be possible to achieve if the Alliance works together.

- Board Members also welcomed the fact that the Bank is reengaging with Gavi, in particular in the context of the important role they play in the implementation of health financing system assessments for countries but also highlighted the need for the Bank to deliver soon.

15. **Supply and procurement strategy 2016-2020**

15.1 Aurélia Nguyen, Director, Policy and Market Shaping, presented information on the review of the 2011-2015 supply and procurement strategy and outlined the three strategic priorities proposed to drive a more ambitious agenda during the 2016-2020 strategic period, namely delivering on healthy markets, taking a long-term view of markets and driving innovation to better meet country needs (Doc 15). She also highlighted the critical enablers to execute the new strategy.

**Discussion**

- Board members noted that it will be important to maintain a balance going forward to ensure that achievements in reducing vaccine prices do not inadvertently lead to some manufacturers withdrawing from the market.
• Board members representing the vaccine manufacturers highlighted the challenges they continue to face in relation to increasing regulatory requirements, which in turn increase their costs, and asked that this area not be overlooked, particularly through the role of WHO.

• Board members welcomed the proposed work on product innovation to advance equity and coverage and better suit country needs.

Decision Eleven

The Gavi Alliance Board:

• Approved the Supply and Procurement Strategy 2016-2020 attached as Annex A and the Strategy Annexes attached as Annex B to Doc 06 to the PPC.

16. Review of decisions

16.1 Philip Armstrong, Director of Governance and Secretary to the Board, reviewed and agreed the decisions with the Board.

17. Closing remarks and any other business

17.1 The Chair thanked the Secretariat and Board Members for the high quality of their interventions during the meeting.

17.2 After determining there was no further business, the meeting was brought to a close.

Dr Ngozi Okonjo-Iweala
Chair of the Board

Mr Philip Armstrong
Secretary to the Board
Attachment B

Participants

**Board members**
- Ngozi Okonjo-Iweala, Chair
- Flavia Bustreo, Vice Chair
- Bahar Idriss Abu Garda
- Edna Yolani Batres
- Donal Brown
- Gunilla Carlsson
- Tim Evans
- Raymonde Goudou Coffie
- Shanelle Hall (Alternate)
- Eivind Homme
- Ingrid-Gabriela Hoven (Day Two)
- Irene Koek
- Orin Levine
- David Loew
- Adar Poonawalla
- Angela Santoni
- Seif Seleman Rashid
- William Roedy
- Richard Sezibera
- Naveen Thacker
- Stephen Zinser
- Seth Berkley (non-voting)

**Alternates Observing**
- Kesetebirhan Admasu
- Blair Exell
- Julisman Fuad
- Javier Hernández Peña
- Felix Kabange
- Sergey Khachatryan
- Rama Lakshminarayanan
- Jason Lane
- Laura Laughlin
- Clarisse Loe Loumou
- Viola Mitchell
- Jean-Marie Okwo-Bele*
- Jan Paehler
- Wieneke Vullings

* Served as the eligible organisation’s voting member per Section 2.6.5 of the By-Laws

**Regrets**
- Ranjanam Chaudhary
- HRH the Infanta Cristina of Spain
- Yifei Li
- Geeta Rao Gupta
- Muhammad Ayub Sheikh (Alternate)
- David Sidwell
- Samba Sow
- Bounkong Syhavong

**Additional Attendees**

**EVALUATION ADVISORY COMMITTEE**
Dr Rob Moodie, Professor of Public Health, University of Malawi and Chair, Evaluation Advisory Committee

**IFFIm**
Dr René Karsenti, IFFIm Board Chair
Ms Fatimou Diop, Vice President, AFRIVAC
Mr Christopher (Edge) Egerton-Warburton, Co-founder, Lion’s Head Global Partners
Mr Cyrus Ardalan, Chairman, OakNorth Bank
Mr Didier Cherpitel, Former Secretary General and CEO, International Federation of Red Cross and Red Crescent Societies
Mr Marcus Fedder, Co-Founder and Managing Partner, Agora Microfinance Partners LLP
Ms Doris Herrera-Pol, former Global Head of Capital Markers, the World Bank
Mr Andre Prost, IFFIm Board Adviser

**BILL AND MELINDA GATES FOUNDATION**
Ms Amrita Paliwala, Program Officer, Vaccine Delivery
Ms Nicole Bates, Deputy Director
Ms Logan Brenzel, Senior Program Officer
Mr Greg Widmyer, Senior Program Officer
THE WORLD BANK
Dr Robert Oelrichs, Senior Health Specialist
Dr Christoph Kurowski, Global Lead, Health Financing

UNICEF
Dr Robin Nandy, Principal Advisor & Chief of Immunizations, New York
Dr Heather Deehan, Chief, Vaccine Centre, UNICEF Supply Division
Dr Nalinee Nippita, Senior Advisor, Programme & Partnerships

WORLD HEALTH ORGANISATION
Dr Pedro Alonso, Director, Global Malaria Programme

DEVELOPING COUNTRY GOVERNMENTS
Tanzania
Dr Catherine Sanga, Permanent Mission of Tanzania to the UN

DONOR GOVERNMENTS
Australia
Mr Brendon Brooker, Senior Policy Officer, Department of Foreign Affairs and Trade
Ms Sue Graves, Director, Sectoral Funds Section, Banks and Funds Branch, Department of Foreign Affairs and Trade
Ms Sue Elliott, Permanent Mission to the UN, Geneva
Mr Tim Poletti, Permanent Mission to the UN, Geneva

Canada
Ms Esther Fox, Senior Analyst, Department of Foreign Affairs, Trade and Development (DFATD)
Ms Sara Nicholls, Deputy Director, Immunization and Child Health

Germany
Mr Marcus Koll, Senior Policy Officer, BMZ
Mr Hendrik Schmitz Guinote, Counsellor, Permanent Mission to the UN, Geneva
Mr Tobias Luppe, Advisor, GIZ
Mr Heiko Warnken, Head of Division, German Ministry for Economic Cooperation and Development
Mr Wolfgang Bichmann, Global Health Advisor, KfW Development Bank

Japan
Ms Mio Akita, Maternal, Child and Reproductive Health Officer, Ministry of Foreign Affairs
Mr Tomoko Kubota, Counsellor, Permanent Mission to the UN, Geneva
Mr Kansuke Nagaoka, Minister, Permanent Mission to the UN, Geneva

Netherlands
Ms Jennyfer Imperator, First Secretary, Permanent Mission to the UN, Geneva

Norway
Ms Lene Lothe, Head of Health Section, NORAD
Ms Heidi Malene Nipe, Senior Adviser, Ministry of Foreign Affairs
Ms Mari Grepstad, Adviser, Norwegian Agency for Development Cooperation

Republic of Korea
Ms Suyoung Jung, Second Secretary, Permanent Mission to the UN, Geneva

Sweden
Ms Anna Hamrell, Desk Officer, Ministry of Foreign Affairs
Mr Andreas Hilmersson, Counsellor, Health and Development, Permanent Mission to the UN
United Kingdom
Ms Meena Gandhi, Health Adviser, DFID
Ms Magali Girod, FCO
Mr Lawrie Harper-Simmonds, DFID
Mr Daniel Graymore, DFID
Mr Nicolas Alexander, Administrative and Programme Officer, Deputy Programme Manager for Polio, Global Funds Department, DFID, Permanent Mission to the UN
Mr Niall Fry, Policy Adviser, Global Funds Department, DFID

United States of America
Ms Susan McKinney, Senior Technical Advisor for Immunization, USAID
Dr Elizabeth Noonan, Immunization Advisor, USAID
Mr Gib Brown, Permanent Mission to the UN, Geneva

VACCINE INDUSTRY – INDUSTRIALISED COUNTRY
Dr Laetitia Bigger, Associate Director, Vaccines Policy, International Federation of Pharmaceutical Manufacturers and Associations (IFPMA)
Dr Olga Popova, VP Global Vaccine Policy and Partnerships, Janssen/Johnson & Johnson
Dr Joan Benson, Executive Director, Merck
Dr Lyn Morgan, Senior Director, Vaccination Policy, Sanofi Pasteur
Dr Kyra Rosow, Senior Manager, Vaccines Public Affairs, Pfizer
Dr An Vermeersch, Director Global Health & Government Affairs, GSK
Dr Corry Jacobs, Director, Global Policy and Research, GSK Vaccines

VACCINE INDUSTRY – DEVELOPING COUNTRY
Ms Sonia Pagliusi, Executive Secretary, Developing Countries Vaccine Manufacturers Network International

CIVIL SOCIETY ORGANISATIONS
Mr Ayo Ipinmoye, Civil Society in Malaria Control, Immunization and Nutrition (ACOMIN), Nigeria
Dr Amon Marie-Christine Emmanuelu Adjobi, Association de Soutien à l’Autopromotion Sanitaire Urbaine (ASAPSU), Cote d’Ivoire
Ms Amy Dietterich, GAVI CSO Constituency Focal Point, Switzerland

RESEARCH AND TECHNICAL HEALTH INSTITUTES
Dr Alfred Da Silva, Executive Director, Agence de Medicine Preventive
Dr Rebecca Martin, Director, Center for Disease Control and Prevention
Dr Gena Hill, Associate Director of Policy, Center for Disease Control and Prevention

Special Advisers
Ms Chisom Okechukwu, Special Adviser to Gavi Board Chair
Ms Lidija Kamara, Special Adviser to the Gavi Board Vice Chair
Ms Coline Mahende, Special Adviser to the Board member from Tanzania
Ms Fabienne Kombo N’Guessan, Special Adviser to Board member from Cote d’Ivoire
Dr Sara Mohammed Osman Elias, Special Adviser to Board member from Sudan
Dr Rolando Pinel, Special Adviser to Board member from Honduras
Mr Ashish Pathak, Special Adviser to the CSO Board member
Dr Stephen Karengera, Special Adviser to the PPC Chair
Ms Carol Pict, Special Adviser to the Chair of the IFFIm Board

Other Observers
Mr Mark Dybul, Executive Director, The Global Fund to fight AIDS, Malaria and Tuberculosis
Ms Marijke Wijnroks, Chief of Staff, The Global Fund to fight AIDS, Malaria and Tuberculosis
Mr Harley Feldbaum, The Global Fund to fight AIDS, Malaria and Tuberculosis
Ms Ariadna Bardollet, Director of International Programmes, “La Caixa” Foundation
Ambassador John E. Lange, Senior Fellow, Global Health Diplomacy, UN Foundation
Mr Ahmed Ibrahim, Permanent Mission of Sudan to the UN, Geneva
Mr Keller Rinaudo, Founder and CEO, Zipline International Inc.
Mr Hans Peter Teufers, Director, International Humanitarian Supply Chain, the UPS Foundation
Ms Prarthna Desai, Zipline International Inc.
Dr David Lorenzo, Director, Program Management and Finance, PATH, Seattle, USA
Dr Marta Feletto, Senior Program Officer, PATH, Geneva
Dr Orianne Berraud, Program Coordinator, PATH, Geneva
Dr David Kaslow, VP PATH Product Development, PATH Seattle
Ms Eliane Furrer, Program Officer, PATH
Dr C. Johannes Van Dam, Director, HIV/TB and HSID, PATH
Dr Carla Botting, Managing Director, RTS,S Program, PATH
Dr Sally Ethelston, Director, Communications and Advocacy, Malaria Vaccine Initiative, PATH
Mr Ashley Summerfield, Consultant, Egon Zehnder UK