Section A: Introduction

- This document presents the high-level approach for operationalising the Alliance’s 2021-2025 strategy (“Gavi 5.0”). It complements Agenda Item 6 that describes the vision, mission, principles and goals of Gavi 5.0.

- The operationalisation phase will start after the Board decision on Agenda Item 6 and will be articulated around six workstreams. This paper briefly describes each of the workstreams, providing more details on the measurement framework and the review of Gavi’s core funding policies (which will encompass the approach on Eligibility and Transition, Co-financing, as well as the Health System and Immunisation strengthening (HSIS), CCEOP and Partners’ Engagement Framework (PEF) support frameworks).

- The Programme and Policy Committee (PPC) endorsed the proposed approach to operationalise the strategy and noted that it would like to be regularly updated on progress over the next 18 months. Of note, as the operationalisation of the new strategy progresses, several of the workstreams will require specific PPC and Board decisions, especially on new or amended programmes and policies under Gavi 5.0.

Section B: Operationalising the Alliance’s 2021-2025 strategy

1. Overview of the operationalisation approach

1.1 Adapting the Alliance’s operating model to the vision, mission, principles and strategic goals of the next strategic period will be critical. The Secretariat proposes to start this process earlier than for Gavi 4.0 and to use a more integrated approach to review and transform Gavi’s policies, strategic approaches, processes and tools. This phase will start following the Board decision on the Gavi 5.0 strategy (see Agenda Item 6), with critical pieces concluding within 18 to 24 months to ensure that the Alliance is ready to deliver on Gavi 5.0 starting 2021 – acknowledging that delivering on Gavi 4.0 will remain the priority over the next 1.5 years.

1.2 The operationalisation phase will build on lessons learned from the Gavi 4.0 process and the insights from external evaluations. It will include a process structured around six workstreams with an internal oversight
mechanism to ensure coordination and swift progress. The six workstreams include:

a) Development of a **theory of change for implementation of the overall strategy and measurement framework** (including indicator and target setting) – *more details provided in section 2*;

b) **Review of Gavi’s core funding policies** (i.e. Eligibility & Transition and Co-financing policies, Health System and Immunisation Strengthening (HSIS) Support Framework as well as the technical assistance components of the Partners’ Engagement Framework (PEF) and the Cold Chain Equipment Optimisation Platform (CCEOP)) – *detailed in section 3*;

c) **Refinement of programmatic approaches** where needed to mainstream innovative thinking into our support, including current strategic focus areas (including but not limited to supply chain, demand generation, data) as well as new areas which may require more deliberate approaches (including engagement with Middle Income Countries and mainstreaming of gender into Gavi programming);

d) **Review of portfolio management processes and tools** and risk appetite to ensure the right level of controls, increase efficiency, reduce transaction costs for countries, improve differentiation, and explore new models for grant making and management in conflict and emergency settings and at sub-national levels. The Secretariat will also review its current competencies, structure and resourcing to ensure it is fit for purpose to deliver on Gavi 5.0;

e) **Review of the partner engagement model**, including the approach for Technical Assistance (TA) across different country settings, the way in which TA links to other Gavi grants and to results, and the scope of investment at global and regional levels (i.e. through the PEF foundational support and targeted investments in Strategic Focus Areas);

f) A cross-cutting **approach to innovation** across immunisation products, services and practices (including private sector partnerships), with a focus on using innovations as a way to unlock equity bottlenecks. Building on the guidance received by the Board at its retreat in Ottawa and an upcoming independent evaluation of Gavi’s private sector partnerships approach, the Alliance will review its existing engagement in innovation and develop a strategic approach in line with the Alliance’s ambition.

2. **Workstream A: Development of a theory of change and measurement framework**

2.1 **The Alliance will translate the strategic goals defined in the new strategy into an overarching ‘theory of change’**. This theory of change will enable a results chain to be defined that works back from long-term goals,
objectives and outcomes to identify the pre-requisite outputs and inputs including investments from Gavi. This will be a critical step in order to better design and integrate the changes required in Gavi’s policies, strategic approaches and investments, and will also inform the definition of the measurement framework (including strategy indicators and targets).

2.2 Building on the ‘theory of change’, the Alliance will design the measurement framework, drawing on lessons learned from Gavi 4.0. This will include the indicators and targets for the new strategy and aim to achieve the right balance between outcomes, outputs and process indicators.

2.3 The PPC will have a first discussion on the measurement framework at its October 2019 meeting. Most strategy indicators and targets will be brought to the Board in June 2020 for decision, with final approval in December 2020 following inclusion of remaining indicators and targets that cannot be set until after June 2020. Of note, there might be some indicators that will require a learning agenda and might only be defined after the start of the new strategy.

3. Workstream B: Review of Gavi’s core funding policies

3.1 The Alliance will review its core funding model to ensure fit for the 2021-2025 strategic period and learn from lessons in Gavi 4.0. In a shift from past practices where policy reviews have been conducted individually, this review will take a holistic approach and review all types of Gavi funding to countries. It aims to ensure that all funding is provided in a manner that most effectively and equitably supports and incentivises achievement of the Alliance’s strategic goals, and that the Alliance’s funding model is simplified.

3.2 To deliver on the strategic priorities in Gavi 5.0, several key areas will be explored in the funding policy review including:

a) How funding can best be targeted to deliver on equity as the organising principle for Gavi 5.0. For example, via targeting non-vaccine funding (HSIS, CCEOP and TA) to focus on reaching the under-immunised and ‘zero-dose’ communities and improve equity by unblocking coverage bottlenecks (e.g. demand- and gender-related barriers); and considering a shift in allocation formula for non-vaccine funding to focus more on under-immunised and ‘zero-dose’ communities.

b) How the funding architecture can be simplified to enable leaner and more efficient portfolio management. The review will consider aligning and collapsing non-vaccine funding to allow for improved strategic and integrated planning and prioritisation, better meet country needs and priorities, align incentives, and reduce transaction costs. It will also look

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1 This review will encompass the existing policies on Eligibility & Transition and Co-financing; the Health System and Immunisation Strengthening (HSIS) support framework (including HSS (health system strengthening), performance-based funding, and VIG/Ops (vaccine introduction grants and operational support for campaigns)); CCEOP; and the technical assistance components of the PEF.

2 Gavi’s gender policy is also currently being reviewed and the Secretariat will ensure alignment across both processes.
at how to harmonise and simplify the existing co-financing architecture (which currently differs across vaccines and transition phases).

c) How the Alliance can more firmly embed programmatic sustainability in its transition model and promote greater domestic public funding for immunisation. Gavi’s eligibility threshold will continue to be based on gross national income (GNI) per capita. However, Gavi will look at incorporating programmatic considerations to possibly adjust the duration of the accelerated transition phase in case of substantial programmatic challenges. The review will also look at: how Gavi could further incentivise prioritisation of domestic public funding towards immunisation services to complement current co-financing for routine vaccines; and how non-vaccine funding might shift over time to ensure the right balance of short-term support vs long-term strengthening as countries progress in their development trajectory.

d) How Gavi can increase the impact of its funding. This includes through better aligning and coordinating with other global and country-level funders. It also involves examining how to best incentivise performance to better focus on and achieve outcomes (vs. inputs), and specifically, to support the most efficient and impactful immunisation delivery strategy (e.g. incentivising strengthened routine immunisation and high coverage campaigns).

e) How the Alliance can better differentiate and tailor support. For example, Gavi will consider applying a flexible co-financing approach in countries facing major conflicts and emergencies. The current generic ‘programme filter’ will also be removed to provide more flexibility to prioritise vaccine introductions that are most appropriate for the context.

3.3 This policy review will occur over the next 6 to 12 months. Key inputs into the review will include outcomes of recent evaluations and reviews; stakeholder engagement and consultation, especially with countries and Alliance partners; and cross-cutting and prospective analyses to identify best practices and financial and programmatic implications. A Steering Committee has been established to provide technical and strategic guidance, with members who represent key Alliance constituencies, including members of the PPC and Board, and independent experts and bring senior-level expertise across content areas. At the PPC and Board meetings at the end of 2019, the Secretariat will present policy levers and options; in mid-2020, recommendations for a final policy framework will be brought to the PPC and Board for approval.

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3 Countries are required to have DTP3 coverage ≥70% to apply for new vaccine introduction support.
4 These include ongoing and recently conducted external evaluations on HSS grants, Performance-Based Funding, TCA (targeted country assistance) and the Gender Policy. An external evaluation of the Co-financing and Eligibility and Transition Policies is currently in the planning phase, with the evaluation outputs to inform the October 2019 PPC discussion of the funding policies. Priority evaluation questions are being identified and any outcomes from the May PPC meeting of relevance to the design of this evaluation will be shared with the Evaluation Advisory Committee.
4. Conclusion and next steps

4.1 The Secretariat will initiate the operationalisation phase after the Board approval of the new strategy, ensuring strong integration and coordination between the six workstreams, and inclusion of Alliance partners and other relevant stakeholders (including countries) into the process.

Section C: Actions requested of the Board

The Gavi Alliance Board is requested to provide guidance on the high-level approach for operationalising the Alliance’s 2021-25 strategy.