Annex A: Implications / Anticipated Impact

Risk implications and mitigation for both funding of the malaria vaccine implementation programme and longer-term supply are included in the paper. The impact on countries and the Alliance and gender implications are described below.

1. Impact on countries and on the Alliance

   a) The decision to continue funding the pilots will directly affect the MVIP countries, given their investment in the routine use of vaccine. However even countries that are not currently included in the pilots are likely to have an interest in understanding how RTS,S could add to current malaria interventions, and a lack of funding to complete the pilots would jeopardise the ability to make policy and investment decisions.

   b) A number of countries have communicated their strong interest in considering introduction of RTS,S. The decision regarding whether to risk-share continued manufacturing will impact countries in terms of the supply available for their introduction and scale-up of RTS,S in the case of positive policy and investment decisions.

   c) This decision is relevant to the Alliance in several ways:

      i. Given the global burden of malaria and the public health impact, the availability of a new intervention could have significant impact in terms of contributing to the prevention of malaria-related morbidity and mortality in the longer term.

      ii. At this stage, there is an opportunity to signal the need to understand the role of RTS,S as part of a broader disease control strategy and the implications of using a partially efficacious vaccine.

      iii. The experience with RTS,S provides a learning opportunity which could enable us to plan for pilots introductions and for the future supply of vaccines without dual markets.

2. Gender implications of this decision

Full analysis of the gender implications of a malaria vaccine programme would be included in a full investment case for broader roll-out.

Looking forward to a potential malaria vaccine programme there is greater gender equity with childhood vaccines in Africa than for care-seeking behaviour, which is poorer for girls than boys. Moreover, girls are more likely to be tasked with caring for their younger sick siblings, with knock-on effects for girls’ school attendance and achievement.