

DOCUMENT ADMINISTRATION

VERSION NUMBER	APPROVAL PROCESS	DATE
2.0	Prepared by: Robert Newman, Policy and Performance	
	Reviewed by: Gavi Programme and Policy Committee	04 and 21 May 2015
	Approved by: Gavi Alliance Board	June 2015 Effective from: 1 July 2015
3.0	Reviewed by: Gavi Programme and Policy Committee	3 May 2018
	Approved by: Gavi Alliance Board	7 June 2018 Effective from: 7 June 2018
	Next review:	At the request of the Board

1. Purpose

- 1.1. The purpose of this policy is to set out the criteria – and related terms, processes and procedures - that determine which countries are eligible, and when, to apply for and receive different forms of Gavi support as they transition along a continuum of economic development to the point that all Gavi support ends.
- 1.2. This policy aims to contribute to the vision that, when countries transition out of Gavi support, they have successfully expanded their national immunisation programmes with vaccines of public health importance and sustain these vaccines post-transition with high and equitable coverage of target populations, while having robust systems and decision-making processes in place to support the introduction of future vaccines.

2. Scope

- 2.1. This policy covers the criteria for accessing Gavi support in the different phases of transition.
- 2.2. This policy does not cover criteria for prioritisation and resource allocation in case of funding shortfalls, which are covered by other Gavi policies and guidelines.
- 2.3. This policy does not cover details of the co-financing requirements in different phases of Gavi support. These are described in the Co-financing Policy.

3. Principles

- 3.1. Gavi's support focuses on lower-income countries.
- 3.2. Support is time-limited and directly linked to governments' ability to pay for vaccines, as measured by Gross National Income (GNI) per capita.

4. Definitions

- 4.1. **"GNI per capita atlas method"**: Gross national income (GNI) is the sum of value added by all resident producers plus any product taxes (less subsidies) not included in the valuation of output plus net receipts of primary income (compensation of employees and property income) from abroad. GNI per capita is GNI divided by mid-year population. GNI per capita in US dollars is converted using the World Bank Atlas method which smoothes exchange rate fluctuations by using a three-year rolling average, price-adjusted conversion factor.
- 4.2. **"Penta3 coverage"**: Percentage of infants that received three doses of pentavalent vaccine.
- 4.3. **"Eligibility Threshold"**: as defined in section 5 of this policy.
- 4.4. **"Gavi-Eligible Country"**: A country whose three-year average GNI per capita is equal to or below the Eligibility Threshold. A Gavi-eligible country is either a Low-Income Country or a Phase 1 Country.
- 4.5. **"Low-Income Country"**: A country whose GNI per capita is equal to or below the threshold for the World Bank's definition of a "Low-Income Country".
- 4.6. **"Phase 1 Country"**: A Gavi-eligible country whose GNI per capita is above the Low-Income Country threshold and whose average GNI per capita of the previous three years is equal to or below the Eligibility Threshold.

- 4.7. **“Phase 2 Country”**: A country whose three-year average GNI per capita is above the eligibility threshold, and for whom Gavi support is decreasing in accordance with section 7 of this policy.
- 4.8. **“Phase 3 Country”**: A country that is no longer receiving Gavi support and is fully self-financing Gavi vaccines, and that has access to UNICEF tenders for vaccines issued on behalf of Gavi countries, for a time-limited period.
- 4.9. **“Gavi Country”**: A Low-Income Country or a country in Phase 1, 2, or 3.
- 4.10. **“Transition”**: The period that Gavi countries are in Phase 1, 2 and 3, during which they gradually assume full responsibility for the financing and procurement of Gavi vaccines.
- 4.11. **“Transition Assessment”**: Multi-partner assessment of potential bottlenecks (programmatic, financial) that jeopardize a successful transition out of Gavi support, as well as opportunities for vaccine introductions with Gavi support.
- 4.12. **“Transition Plan”**: Government-led plan to address key bottlenecks and leverage opportunities towards successful transition
- 4.13. **“Programme Filters”**: as defined section 6 of this policy.
- 4.14. **“Multi-year commitments”**: Gavi funding commitment covering the length of a country’s comprehensive Multi-Year Plan (cMYP) or health sector plan

5. Eligibility threshold

- 5.1. Gavi’s GNI per capita threshold for eligibility was set at an amount of US \$1,500 in 2011. The GNI threshold amount for Gavi is updated annually to account for inflation and published on the Gavi website following the annual release of updated GNI p.c. estimates by the World Bank.
- 5.2. Countries are Gavi-eligible if their average GNI p.c. over the past three years is equal to or below the threshold amount. Such countries are eligible to apply for vaccine and/or Health Systems Strengthening programme support.
- 5.3. Countries will remain in Phase 1 for two additional years if: i) their average GNI p.c. over the past three years is above the threshold, and they experienced a more than 30% single-year increase in GNI p.c. in the previous five years; or ii) their average GNI p.c. over the past three years is above the threshold, they experienced a more than 20% single-year increase in GNI p.c. in the previous five years, and have a WHO/UNICEF penta3 coverage estimate below 90%.
- 5.4. If subsequent to entry into Phase 2, a country’s three-year average GNI per capita falls below the threshold amount, the country would regain its Gavi-eligible status.
- 5.5. Eligibility will not be considered for poorer states/provinces within higher income countries (i.e. Gavi will not offer sub-national support for countries that are not Gavi-Eligible).

6. Programme filter

- 6.1. Gavi-eligible countries with Penta3 coverage $\geq 70\%$, as determined by WHO/UNICEF estimates, are allowed to apply for new vaccine introduction support.
- 6.2. No Penta3 coverage filters are applied to accessing support for Japanese encephalitis (JE), Meningitis A, Yellow fever, and Inactivated Polio vaccines.

- 6.3. To be eligible to apply for measles second dose (MSD) support and for measles rubella (MR) support, a country must meet coverage criteria specified in Gavi's application guidelines that are based on the latest relevant WHO/SAGE recommendation
- 6.4. For Gavi-eligible countries, no programme filters apply to accessing support for Health Systems Strengthening.

7. Transition procedures

- 7.1. For current and future Phase 1 countries, Gavi will initiate transition assessments as early as feasible during Phase 1 (approximately 2-3 years before the projected date of entering Phase 2).
- 7.2. Based on transition plans that mitigate bottlenecks in the assessments, Gavi may provide support to Phase 1 and Phase 2 countries for the implementation of activities critical for a successful transition, covering only the period until the end of Phase 2.
- 7.3. When a country's reported average GNI p.c. over the past three years is above the eligibility threshold, Gavi will inform the country that it will enter Phase 2 effective January 1 of the next calendar year, unless the country meets the criteria specified in section 5.3 of this policy.
- 7.4. Subject to availability of funding and approval in accordance with Gavi's processes for renewals, Gavi will continue to provide support for already introduced vaccines.
- 7.5. Subject to availability of funding and approval in accordance with Gavi's processes for renewals, Gavi will honour all existing multi-year commitments for Health Systems Strengthening support to countries in Phase 2. Renewals for commitments ending in Phase 2 are restricted to those countries with Penta3 coverage below 90%.
- 7.6. Countries are eligible to apply for new vaccine support during the five years of Phase 2, provided that vaccine introductions during this phase effectively contribute to strengthening routine immunisation and increasing coverage and equity.
- 7.7. Countries that surpass the Eligibility Threshold have one year to apply for new HSS (i.e. for a country that has not received any HSS support from Gavi yet), from January 1 of the year after surpassing the Eligibility Threshold (a grace year). However, new HSS support is restricted to those countries with Penta3 coverage below 90%.

8. Timeline for implementation

- 8.1. Implementation of this policy will begin on 1 July 2015.
- 8.2. The GNI per capita eligibility threshold will be adjusted annually for inflation. The lists of eligible, Phase 2 and Phase 3 countries will also be adjusted annually based on the latest World Bank GNI p.c. data. The adjustments to both the threshold and lists of countries will go into effect the following January and remain valid for a full calendar year.

9. Primary data sources

- 9.1. GNI p.c. (Atlas method) from World Bank classifications released in July of every year to cover the previous year. Gavi will maintain a database of annual July estimates on

its website and will use these to calculate countries' three-year average GNI p.c. as well as annual GNI p.c. increases (%) in the past five years for countries that surpass the eligibility threshold.

- 9.2. Penta3 coverage from WHO/UNICEF estimates.
- 9.3. Eligibility threshold adjustment for annual inflation using World Bank deflators.

10. Effective date and review of policy

- 10.1. This policy comes into effect as of 1 July 2015 and replaces the Gavi Eligibility Policy as approved by the Board on 18 November 2009 and the Gavi Graduation Policy as approved by the Board on 18 November 2009.
- 10.2. This policy will be reviewed and updated as and when required. Any amendments to this policy are subject to Gavi Board approval.