



Agenda

1. Gavi Strategy 2011-2015, and supply and procurement initiatives

- Vaccine Investment Strategy
- Supply and Procurement Roadmaps
- Strategic demand forecasting
- Initiatives to support graduating countries

2. Gavi Strategy 2016-2020

- 2016-2020 strategy update
- Supply and procurement strategy and indicators



Four strategic goals guide Gavi's mission

Strategic goals 2011–2015



Accelerate the uptake and use of underused and new vaccines



Contribute to strengthening the capacity of integrated health systems to deliver immunisation



Increase the predictability of global financing and improve the sustainability of national financing for immunisation



Shape vaccine markets to ensure adequate supply of appropriate, quality vaccines at low and sustainable prices



"New" vaccines now routine in developing world: pentavalent in all 73 Gavi countries

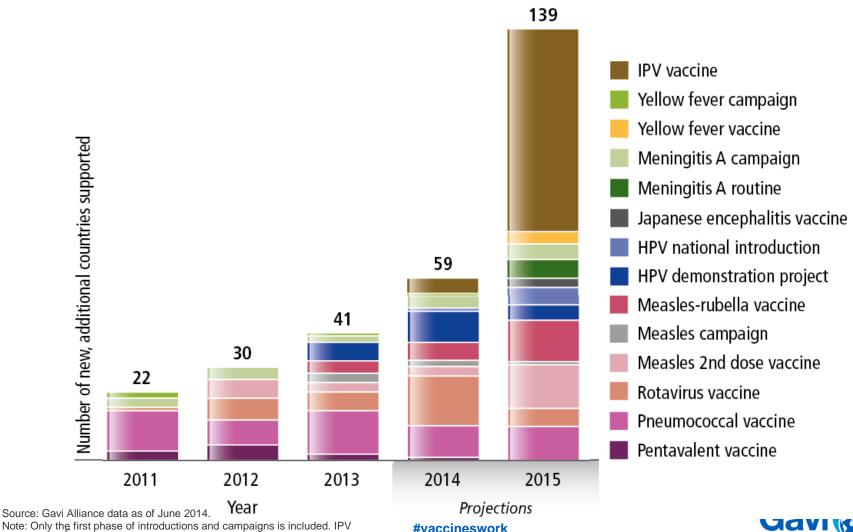




Programmes continue to accelerate: new vaccine introductions 2011-2015

Routine programme introductions and campaigns

projections are only partially based on country input.



Support for new vaccine investments are considered through a systematic VIS process

Gavi's 2013 Vaccine Investment Strategy considered 15 vaccine candidates for review

Potential expansion of GAVI vaccine support	Existing vaccines not supported by GAVI	'Pipeline' vaccines
DTP (booster)	Cholera	Malaria
Hepatitis B (birth dose)	Hepatitis A	Dengue
Measles (additional campaigns)	Hepatitis E	Enterovirus 71
Meningococcal (additional serotypes)	Influenza	
Yellow Fever (additional campaigns)	Mumps	
	Poliomyelitis	
	Rabies	

Inclusion criterion: anticipated licensure by 2019

Out of scope: vaccines for emergency response or biosecurity purposes



VIS Board recommendations November 2013

Yellow fever

"Decides to support **new yellow fever vaccine campaigns** and requests the Secretariat to develop a process for the funding of individual campaigns on the basis of robust risk assessments."

Cholera stockpile

"Approves US\$8.5 million for an initial contribution of 5 million doses in 2014 to the **global cholera stockpile** for use in epidemic and endemic settings. Subsequent annual contributions for a total of up to 70 million doses during 2014-2018 (see Annex B) will be subject to approval on an annual basis."

Malaria

"Based on the current assessment there is a strong case for GAVI support for a malaria vaccine, and the Board will open a window if and when the vaccine is licensed, recommended for use by the WHO Strategic Advisory Group of Experts (expected in 2015) and WHO pre-qualified, taking into account **updated projections of impact, cost and country demand**."



VIS Board recommendations November 2013

Rabies 'post-exposure prophylaxis

"Approves an assessment of the feasibility of GAVI support for rabies vaccines (to be evaluated in the next VIS process) and a funding request for the outsourced assessment (estimated at US\$3 million) to be included as part of the 2015 Business Plan."

Maternal influenza vaccination

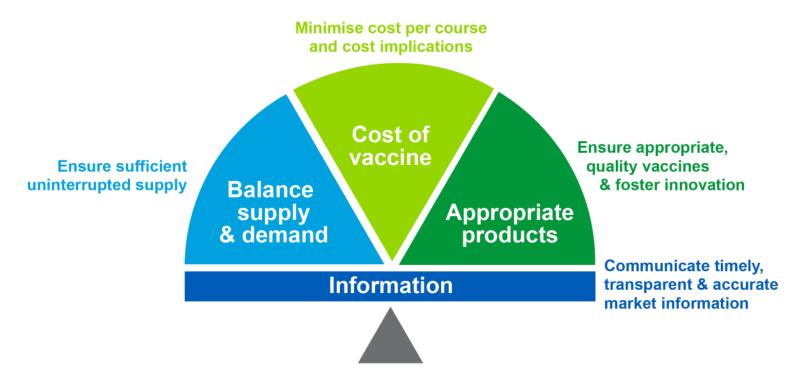
"Notes the potential public health impact of vaccinating pregnant women against seasonal influenza and the need to assess the emerging evidence of impact of vaccination on neonates, but decides not to open a funding window for influenza vaccines at this time."



Supply and procurement objectives, 2011-2015



Gavi aims to ensure sufficient supply of appropriate, quality vaccines at low and sustainable prices





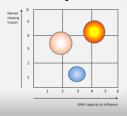
Supply and procurement roadmaps set out the Alliance's ambition for each Gavi vaccine

Vaccine-specific documents (current and future Gavi portfolio vaccines) with five main components:

Three levels of confidentiality

1. GAVI engagement

3. Objectives prioritized



4. Target outcomes

Objective 1

- Target outcome TO 1
- Target outcome TO 2

Objective 2

> Target outcome TO 8

5. Action plan

Interventions

Accountable, Responsible, Supporting

Measured Output

Due Date / Status

- For TO 1
- ➤ For TO 2
- > Etc.

2. Market intelligence & analysis



Status of Supply and Procurement Roadmaps

Roadmaps status	First version	Second version
HPV	2012	To be completed
Pentavalent	2013	2014*
Yellow Fever	2013	
Rotavirus	2013	
IPV	2013	
Measles-Rubella	2013	
Pneumococcal	2014*	
Japanese encephalitis	2014	
Meningococcal	In development	
Cholera	In development	
Typhoid	To be completed	



^{*} Pending public summary publication (www.gavi.org)

Roadmap summary: Pneumococcal

Ambition

- 'Tail-prices' compatible with long-term country needs
- The market develops a more diverse supply base

informs

Market Landscape

Market Shaping Targets

- 'Tail price' WAP significantly reduced to a target level
- ≥1 additional supplier between 2018 and 2021
- Global capacity over 400M doses per year by 2017

drives

- Global demand growing to 380M doses by 2015
- 2 AMC registered suppliers with prequalified vaccine
- Anticipate 1-2 new entrants between 2018 and 2024
- Risk = current dependency on 2 suppliers
- 73% of AMC funds committed and lowest AMC 'tail price' of USD 3.30

Stakeholder Action Plan

Action Plan

- Use AMC funds and procurement options to drive price decreases
- Support suppliers to enter market,
 scale-up, introduce new presentations







Why is demand forecasting important?

Demand forecasting Provides early recognition and estimates future needs Gain better understanding Allows GAVI Alliance and of GAVI's vaccine markets manufacturers to effectively plan for the long term 0 **GAVI Alliance**

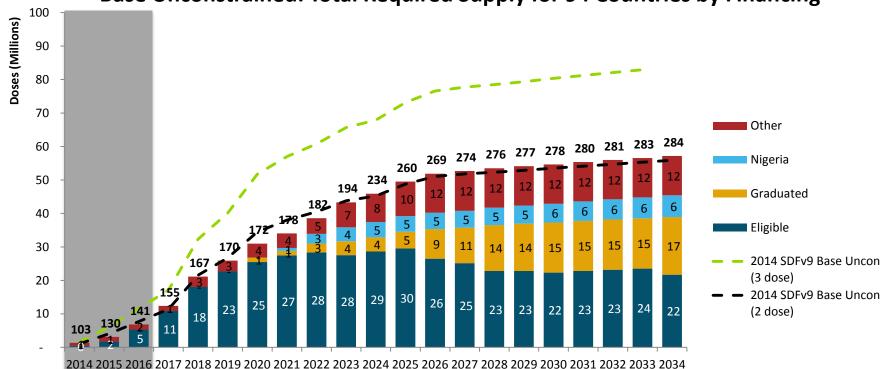


Strategic Goal 4

Example: HPV demand projection, 2014-20341

Gavi Alliance SDFv10i - HPV

Base Unconstrained: Total Required Supply for 94 Countries by Financing



1. Scenario: National base unconstrained. Gavi eligible demand is forecasted to peak at 30 million doses in 2026 Categories:

Eligible: Includes doses that Gavi directly finances and doses that are co-financed by the country.

Graduated: Doses related to countries that have introduced HPV with Gavi support and have graduated during the forecasting time period.

Other: Doses from Gavi73 countries that introduce HPV without Gavi and non-Gavi eligible LMICs.



Scenarios for HPV National Programmes: Standard parameters set for 2014 SDFv10

Scenario	Population source	Introduction dates	Demand projection assumption ¹	Impact projection assumption ¹	Uptake curve ²	Doses / course
Low	90% of UN WPP Medium	Pessimistic view	DTP2	DTP2	Two year uptake	2 doses
Base - Unconstrained	UN WPP Medium	Standard view	DTP1	DTP2	Two year uptake	2 doses
High	110% of UN WPP Medium	Optimistic view	DTP1	DTP2	Two year uptake	2 doses

Note: red font indicates a change from 2014 SDFv9

2. In Year 1: 80% and in Year 2: 100%, except for countries with a history of phased introductions.



^{1:} Girls enrolled in school to reach coverage projection, Girls not enrolled in school to reach 70% of coverage projection. Projection assumption: (Girls in school)*(coverage) + (Girls out of school)*(coverage)*70%

External dissemination of SDF: What, Who, & How?

Detailed SDF PPT

What: 94 country demand, detailed adoption timing, MS assumptions, various cuts of data

Who: Specific Gavi Alliance partners

How: Vaccine sub-teams

and myGavi

Industry SDF PPTs

What: 94 country demand, removes sensitive country and market shaping information

Who: DCVMN and IFPMA networks

How: myGavi and yearly in person meetings

Public SDF

What: 73 country demand, disease overview, Gavi's support

Who: Visitors to Gavi

Alliance website

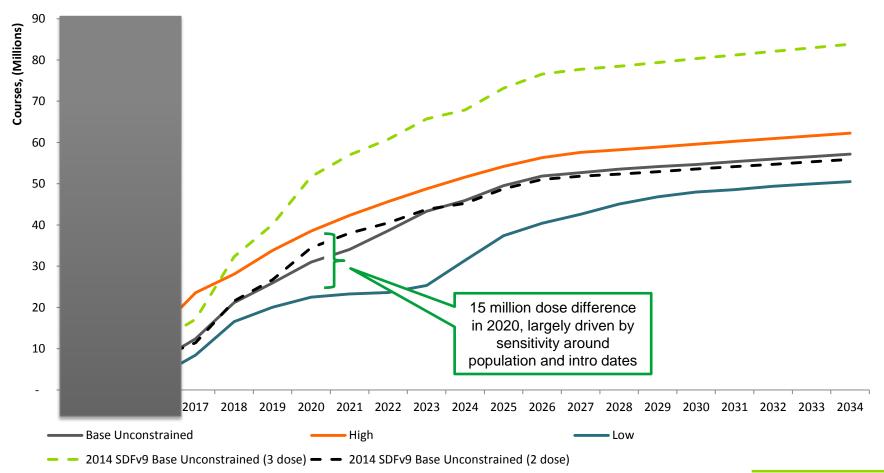
How: Posted annually to Gavi Alliance website

Get access to industry PPTs by contacting mko@gavi.org



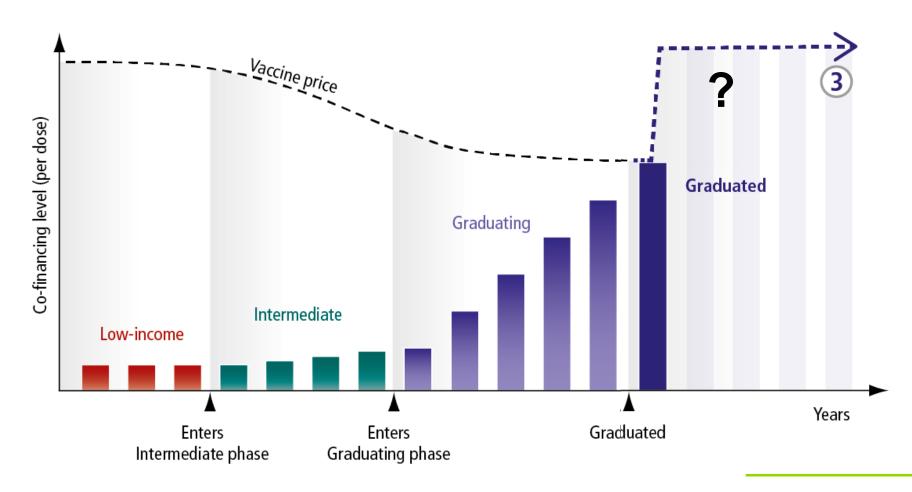
HPV Demand: Range created by variations in assumptions for introduction dates and population

Comparison of Total Required Supply for 94 Countries





What happens to vaccine pricing after GAVI graduation?





#vaccineswork

Country gap analysis performed along three dimensions: Pricing, Procurement, Payment

Pricing

Procurement

Findings

Payment

 Without access to appropriate prices, most countries likely to face challenges sustaining immunisation programmes and introducing new vaccines

 Large majority of countries require support

 Insufficient information on vaccines market

Limited procurement capabilities

Low bargaining power

 Major needs observed regarding ability to make pre-payments and access hard currency



Access to Appropriate Prices (ATAP)

Following the Gavi Programme and Policy Committee (PPC):

- Develop proposal(s) for a pooled procurement facility that may include:
 - · tiered pricing,
 - a revolving fund,
 - demand guarantees or other risk-mitigating structures in contracting
- Review application to non-Gavi lower middle income countries (LMICs)
- Include roles, responsibilities, financial and legal requirements, sources of funding, risks and costs
- Take into account a phased approach to solutions for shortterm and long-term timeframes



GSK has announced a price freeze for graduating countries



Sir Andrew Witty, CEO GlaxoSmithKline

Announcement freezes prices for at least five years for all GSK vaccines: rotavirus, PCV and HPV vaccines

Calls on competitors to do the same

Embraces tiered pricing

Endorses Gavi model to maximise access



Gavi working towards Replenishment in January 2015 to fund this 2016-20 strategy



- Angela Merkel will host a pledging conference in Berlin on January 27th
- Gavi is formally included in Germany's G7 agenda
- Donor to donor peer outreach at the highest levels
- Industry contributions will be spotlighted at the pledging conference



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Context for Gavi 4.0











Second phase 2007-2010

- Merger of the Vaccine Fund and GAVI Alliance Boards, 2008
- PCV, rota
- HSS

Third phase 2011-2015

- First resource mobilisation meeting, 2011
- Completing penta, accelerating PCV and rota
- Launch of HPV, MR
- Experience on critical challenges to coverage and equity

- Involved in all aspects of immunisation
- Fully immunised child
- Modernisation of systems
- Data revolution



- Launch of GAVI at WEF, 2000
- Penta and YF



Three themes guided the development of the strategy

Consolidation and sustainability

«Next strategic period should focus on consolidating strengthening and deepening impact.»

GAVI Board member—December 2013

«Look into sustainability for graduating countries.»

GAVI Board member—February 2014

Coverage and equity

«Focus should be on understanding and addressing barriers to coverage and equity.»

GAVI Board member—February 2014

«Focus of the next period should be around coverage, equity, sustainability and the most fragile settings.»

GAVI Board member—November 2013

Innovation and ambition

«GAVI should be bold, innovation is part of its DNA.»

GAVI Board member—July 2013

«GAVI needs to articulate an ambitious statement of what the Alliance aims to achieve longer term.»

GAVI Board calls—December 2013

Gavi, the Vaccine Alliance - strategy 2016-2020 PRELIMINARY To save children's lives and protect people's health by increasing equitable use of vaccines in lower income countries Integrated Country-led **Innovative** Community-owned Collaborative Globally engaged **Accountable** Catalytic & sustainable Increase effectiveness and efficiency of immunisation delivery as an integrated part of strengthened health systems Accelerate equitable uptake and coverage of vaccines Coverage and equity Integrated comprehensive immunisation systems Supply chains, health information systems, demand generation and gender sensitive approaches Introduction and scale-up of new vaccines Flexible response to special needs of fragile countries Engagement of civil society, private sector and other partners Improve sustainability of national immunisation programmes **Shape markets for vaccines and other immunisation products** National and sub-national political commitment Adequate and secure supply Allocation and management of national human and Appropriate and sustainable prices financial resources Incentivise development of suitable and quality Sustained performance after graduation products A) Country leadership management & coordination B) Resource mobilisation C) Advocacy D) Monitoring & Evaluation

Mission

Principles

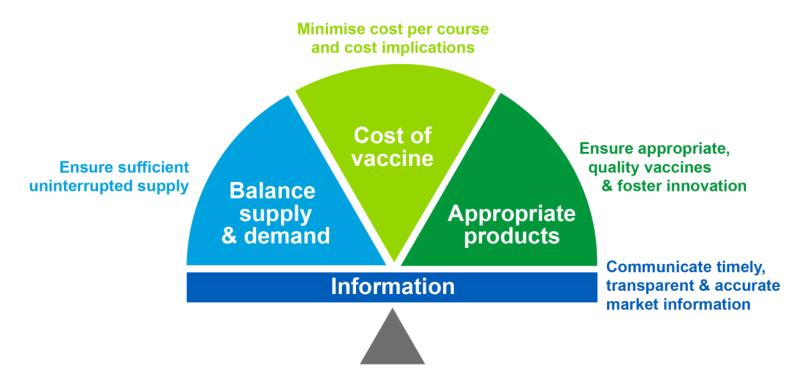
Goals

Strategic

Gavi's supply and procurement strategy will be reviewed in 2015



Gavi aims to ensure sufficient supply of appropriate, quality vaccines at low and sustainable prices





Market shaping indicators will be reviewed as part of Gavi's 2016-2020 strategy update process

Goal level indicators for strategic goal 4 measure progress towards shaping vaccine markets

Change in vaccine price

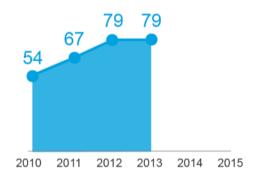
Change in the weighted average price (WAP) to fully immunise a child with pentavalent, rotavirus and pneumococcal vaccines

(Target = reduction*)

35 33 US\$ 23 22 2010 2011 2012 2013 2014 2015

Security of supply

Number of products offered as percentage of 5-year target (%)





Source: UNICEF Supply Division, 2014



#vaccineswork

Appropriate Products ???

^{*}Future targets are not publicised to avoid setting a minimum price

Shape markets for vaccines and other immunisation products

- a Ensure adequate and secure supply of quality vaccines
- Reduce prices of vaccines and other immunisation products to an appropriate and sustainable level Incentivise development of suitable and quality
- ovaccines and other immunisation products
- Indicator on healthy market dynamics (e.g., # of suppliers, # countries obtaining first choice, vaccines and other products)
- Reduction in price (vaccines and other products) for GAVI countries, access to appropriate prices for graduated countries and LMICs
- Reduction in the delivery cost of immunisation
- Indicator on innovation (e.g., thermo-stable vaccines; delivery technologies)



THANK YOU



