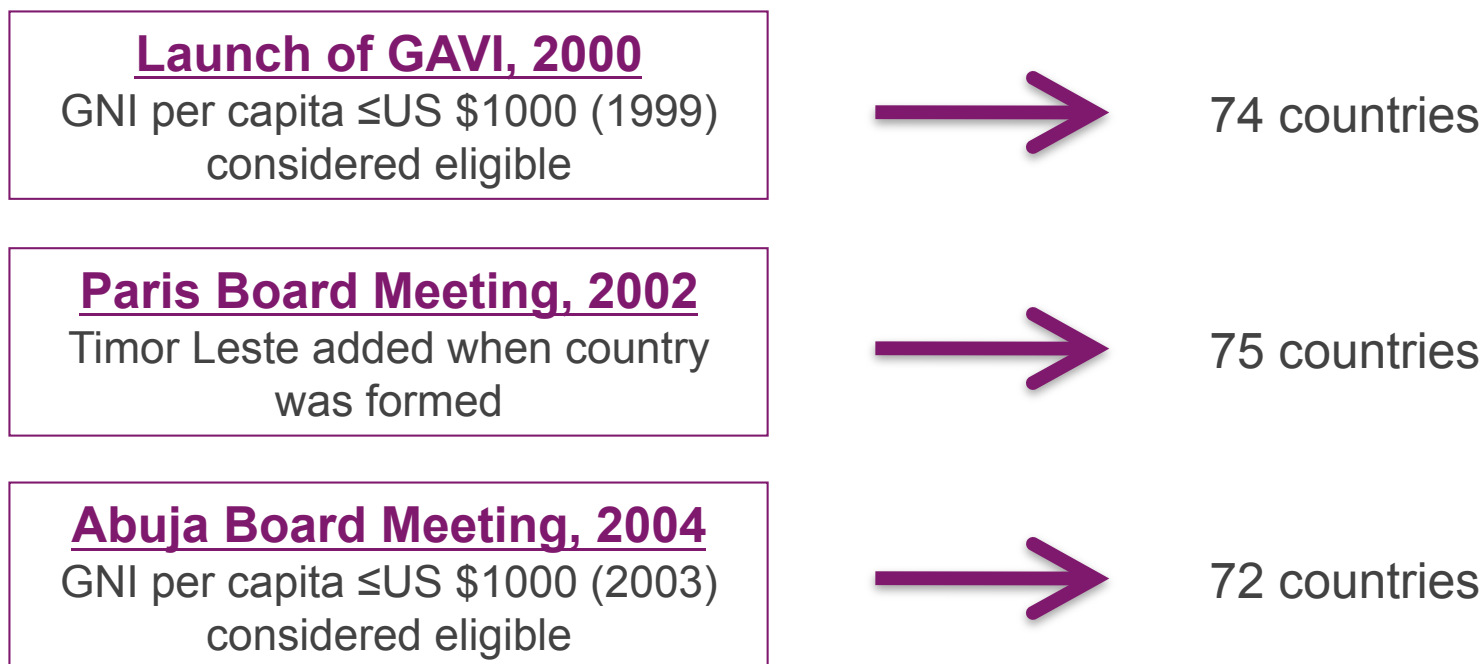


Outline of Briefing

- Evolution of GAVI's eligibility policy
- Why the need for a change?
- Process to develop policy revisions
- Main features of revised policy
- Timing of introduction of revised policy
- What countries might be affected?
- Next Steps
- Summary

Evolution of GAVI's Eligibility Policy: Overall Eligibility



- Throughout periods 2000-2003 and 2004-present, list of eligible countries has not been adjusted to reflect annual changes in income

Evolution of GAVI's Eligibility Policy: Window "filters"

- Countries filter for New Vaccine Support was defined as DTP3 coverage > 50% (with exception for Yellow Fever—no filter requirement).
 - In 2000, 16 countries did not qualify for New Vaccine Support
- With improvements in DTP3 coverage in GAVI-eligible countries, only two countries currently ineligible for NVS per this filter.

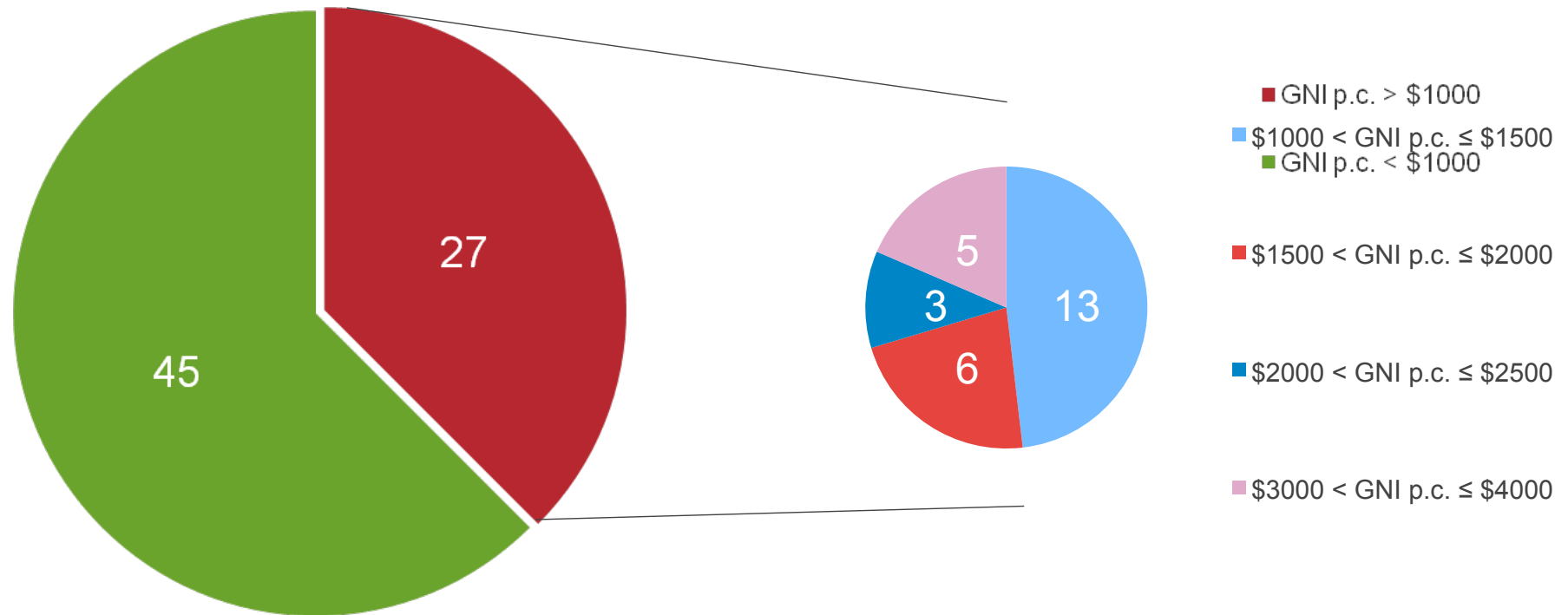
Why the need for a change? (1)

- Board requested the eligibility policy be reviewed and revised in 2009
- Issues with current policy:
 - **Equity:** Increasing income disparities between countries
 - **Threshold:** Value of threshold has eroded (would be ~ \$1500 today)
 - **Predictability:** Need for explicit process for updates

Why the need for a change? (2)

- **Equity:** increasing income disparities between countries
 - Some GAVI-eligible countries have had rapid economic growth since 2004, others have stagnated
 - As a result, current income per capita spread across GAVI-eligible countries greatly widened
 - Income per capita of highest income GAVI-eligible country now higher than 23 countries that are **not** eligible for GAVI assistance

Current income distribution among 72 GAVI-eligible countries (2008 GNI p.c.)



Source:
World Bank, 2008 Gross National Income per capita (GNI p.c.) published July 2009



Why the need for a change? (3)

- **Threshold:** Does the threshold of \$1,000 still make sense?
 - Other organizations update thresholds to adjust it to inflation
 - The \$1000 threshold established at GAVI's inception has eroded greatly in real terms over the past 10 years

Why the need for change? (4)

■ Predictability

- Related, need for clear process, going forward, to eligibility updates, so countries know what to expect

Process to develop policy revisions (1)

- - Overseen by GAVI Policy & Programme Committee (PPC)
 - Steered by task team, chaired by the World Bank and made up by
 - WHO
 - USAID (PPC member)
 - Gates (PPC member)
 - Independent experts and individuals
 - PPC:
 - Selected among task team options and recommendations for Board endorsement



Process to develop policy revisions (2)

- Analytical work and Consultations to underpin Task Team considerations, PPC and Board Review
 - Review of strategic objectives & necessary characteristics for eligibility indicators
 - Bottom up review of possible indicators to use for eligibility
 - Assessment of eligibility policies of other funding organizations
 - Consultations with technical experts, donors, civil society organizations, countries, vaccine manufacturers
 - Six country case studies (mix of country situations (never eligible, recent graduates, countries at risk of graduation))



Main features of revised policy (1)

After review of many possible indicators:

GNI per capita (Atlas method) reconfirmed as eligibility indicator, BUT to be updated annually when World Bank releases new data (available on their website)

- Aligned with GAVI's strategic objectives
- Robust in its measurement and comparable across countries
- Regularly updated, widely available
- Transparent, understandable
- Annual updates keep spotlight on the poorest countries

Main Features of Revised Policy (2)

- Options were considered ranging from \$975 to \$3,855. The Board was asked to decide between \$1,500 or \$2,000
- The Board decided that in 2011 the eligibility threshold should increase from \$1,000 to \$1,500.
- It will be increased annually thereafter to keep pace with inflation
- Annual updates of the country's latest GNI per capita against inflation-adjusted threshold to determine eligibility

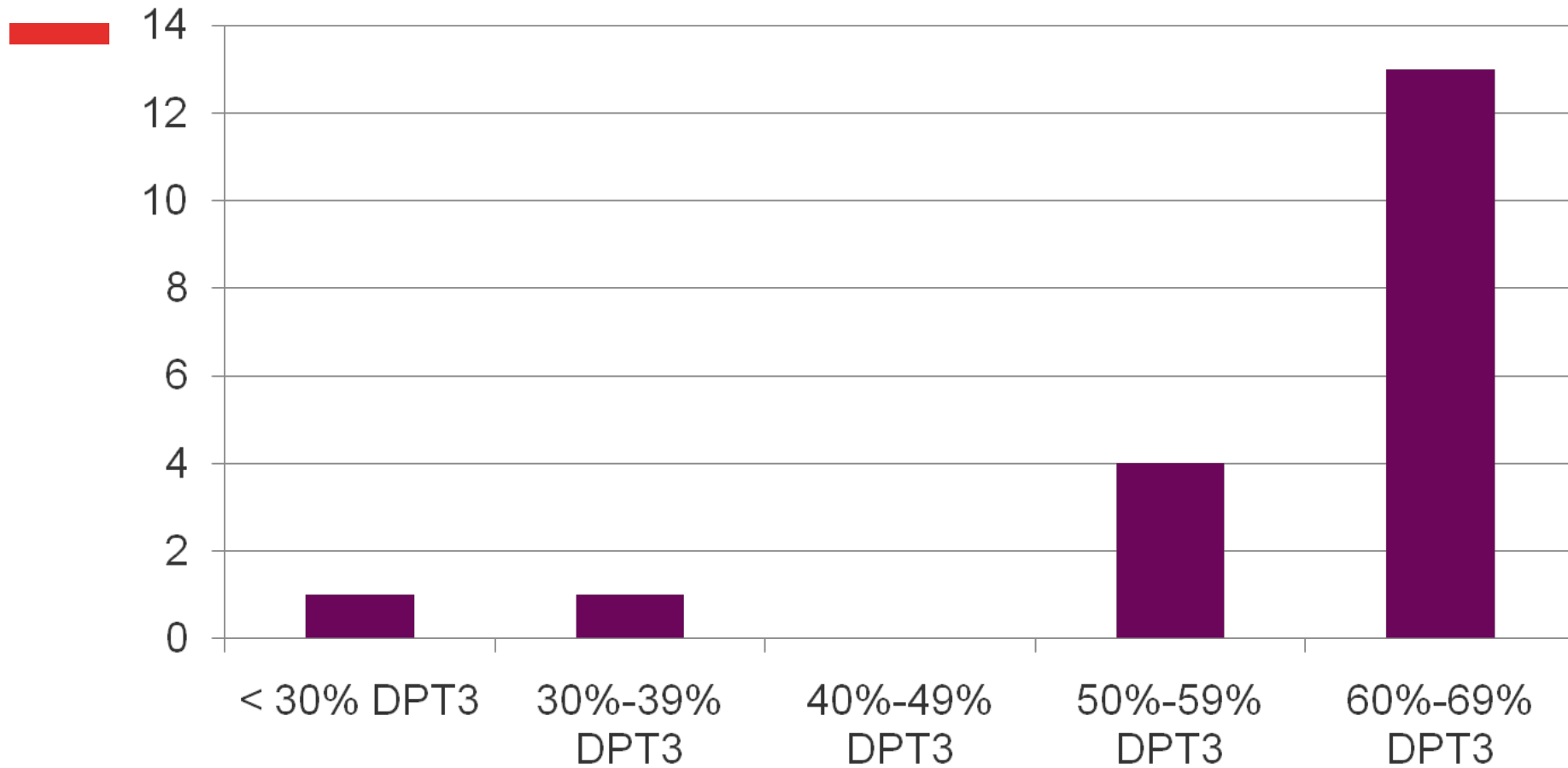


Main Features of New Policy (3)

Window Filter for New Vaccine Support (NVS)

- The NVS filter was raised from DTP3 $\geq 50\%$ coverage to $\geq 70\%$ (using WHO/UNICEF estimates)
- More vaccines were exempt: Japanese Encephalitis, Meningitis A, and Yellow Fever vaccines because these address epidemics
- GAVI will explore strategies to provide enhanced technical and/or financial support to countries with low DTP3 coverage

2008 DPT3 Coverage



Main Features of New Policy (4)

- “No longer eligible” means no longer able to submit new applications for support.
- Existing commitments unaffected—existing commitments continue until their end.
- NVS commitments will be extended to 2015 to ensure predictability*.

*Except for Phase 1 approvals and budgetary caps



Timing of Introduction of New Policy

- Board approved new policy in Nov 2009 for introduction in 2011.
- All currently eligible countries will continue receiving NVS support for existing commitments until 2015 per previous GAVI decisions.
- In July 2010, World Bank will release its estimates of 2009 GNI per capita
- Based on that information, GAVI will inform countries with GNI per capita above the \$1,500 threshold that they will no longer be eligible to apply for new vaccine support in 2011. Nonetheless, existing NVS commitments maintained through 2015.
- Window Filters: In 2010, GAVI will inform countries with most recent estimates of DTP3 < 70% that they cannot apply for NVS support for new vaccines (except JE, Meningitis A, and YF) until DTP3 levels raised above filter.
- For window filters, if a country is currently receiving support for vaccine X, but its DTP3 levels < 70%, it will continue to receive support.



What countries might be affected in 2011?

- Countries with current GNI per capita close to, or greater than \$1,500 could be ineligible in 2011, depending on 2009 GNI per capita estimates, when released.
- No abrupt changes. While ineligible countries would not be able to apply for **new** support in 2011, existing commitments honored to their end or 2015 for NVS.
- Countries with DTP3 coverage < 70% in 2011 (based on 2009 estimates, when released later this year) will be restricted in the types of new NVS applications allowed.
- Note: Applications for support in 2010 unaffected by new policy.



Next steps

January 2010 – July 2010

- Implementation planning for new policies
- Create operational manual for GAVI countries
- Mid 2010, communications to countries regarding eligibility for 2011, based on 2009 GNI per capita and DTP3 estimates

Next steps

- The Board requested further work on:
 - Cash-based options for poor performing countries (< 70% coverage)
 - The need for countries to transition smoothly from GAVI to support to their own support, and maintain or continue immunization achievements

Summary

- **Indicator: Metric, data source**
 - Use GNI per capita data (Atlas method, World Bank) and update annually when World Bank publishes new data
- **Threshold: To define eligibility**
 - \$1,500; annually adjusted for inflation (Source for deflators: World Bank)
- **Future updates: Frequency and timing**
 - \$1500 threshold introduced in 2011 and increased to adjust for inflation annually thereafter
- **Existing Commitments honored.** Even if a country graduates (its GNI p.c. crosses the threshold), existing commitments honored to their end.
- **Filters: NVS filter level, data source**
 - DTP3 $\geq 70\%$ coverage (WHO/UNICEF estimates); Excluding JE, Men A and YF
- **No Sub-national eligibility**

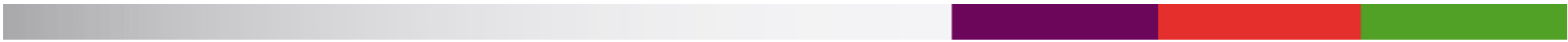


Thank you



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