#GaviSeth

Shaping the market: Gavi's model for bringing the power of vaccines to the world's poorest children

Seth Berkley MD
National Vaccine Advisory Committee
2 February 2015,
Washington DC

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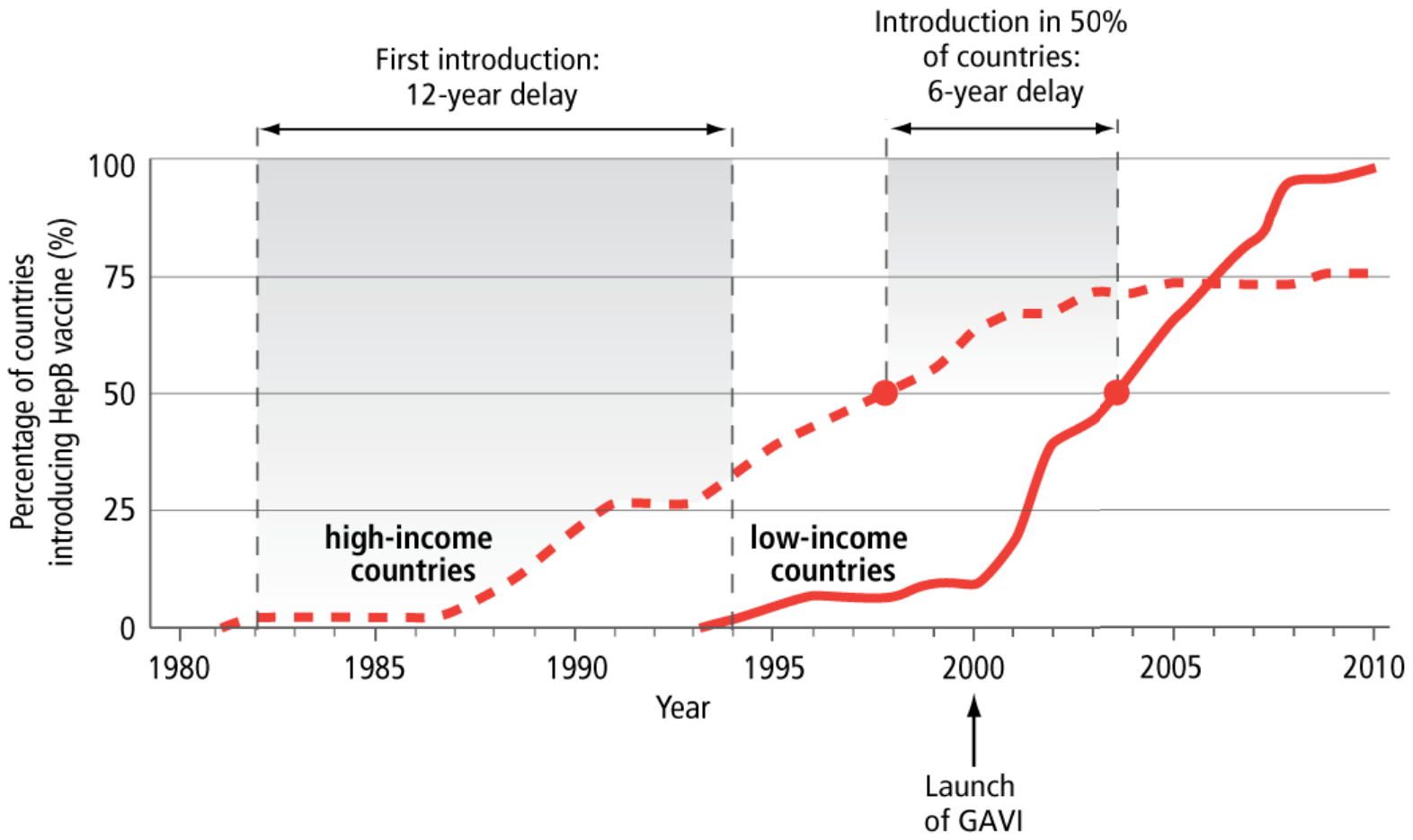
The challenge: Reducing delays in launching new vaccines in poor countries



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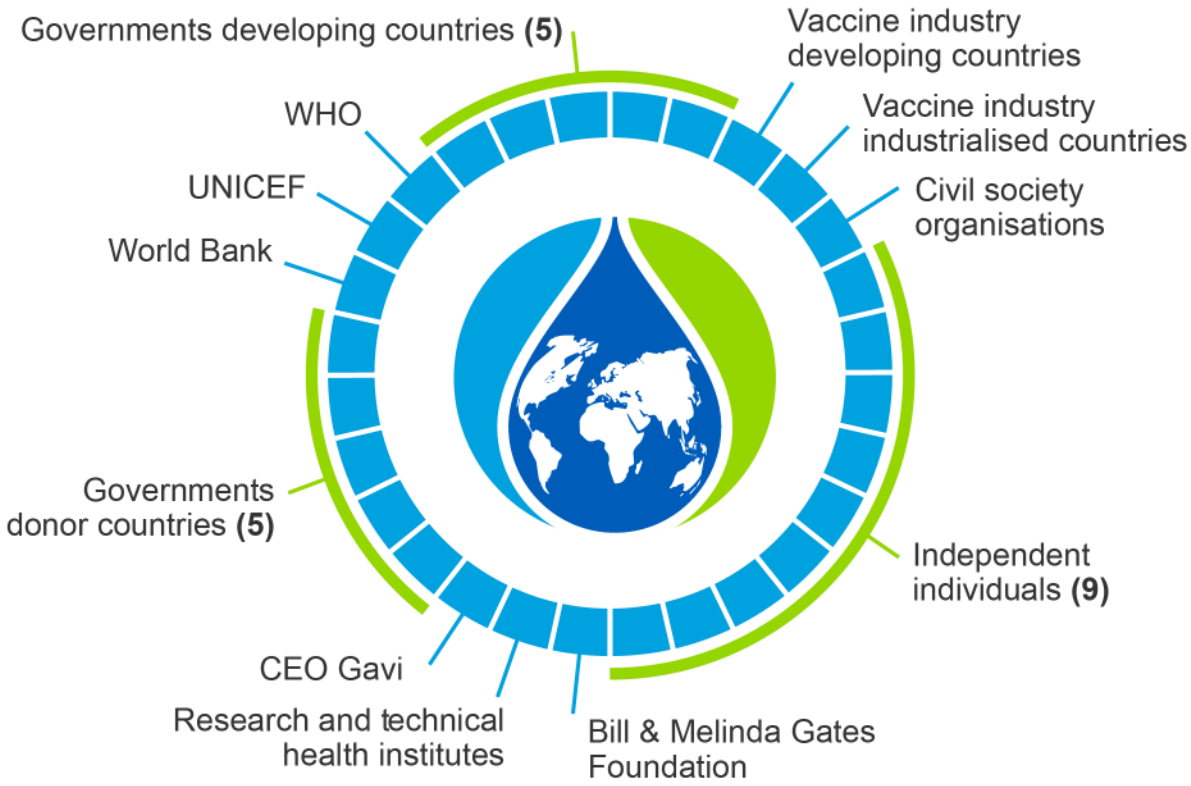
Gavi: an innovative public-private partnership

Building on the comparative advantages of both public and private partners



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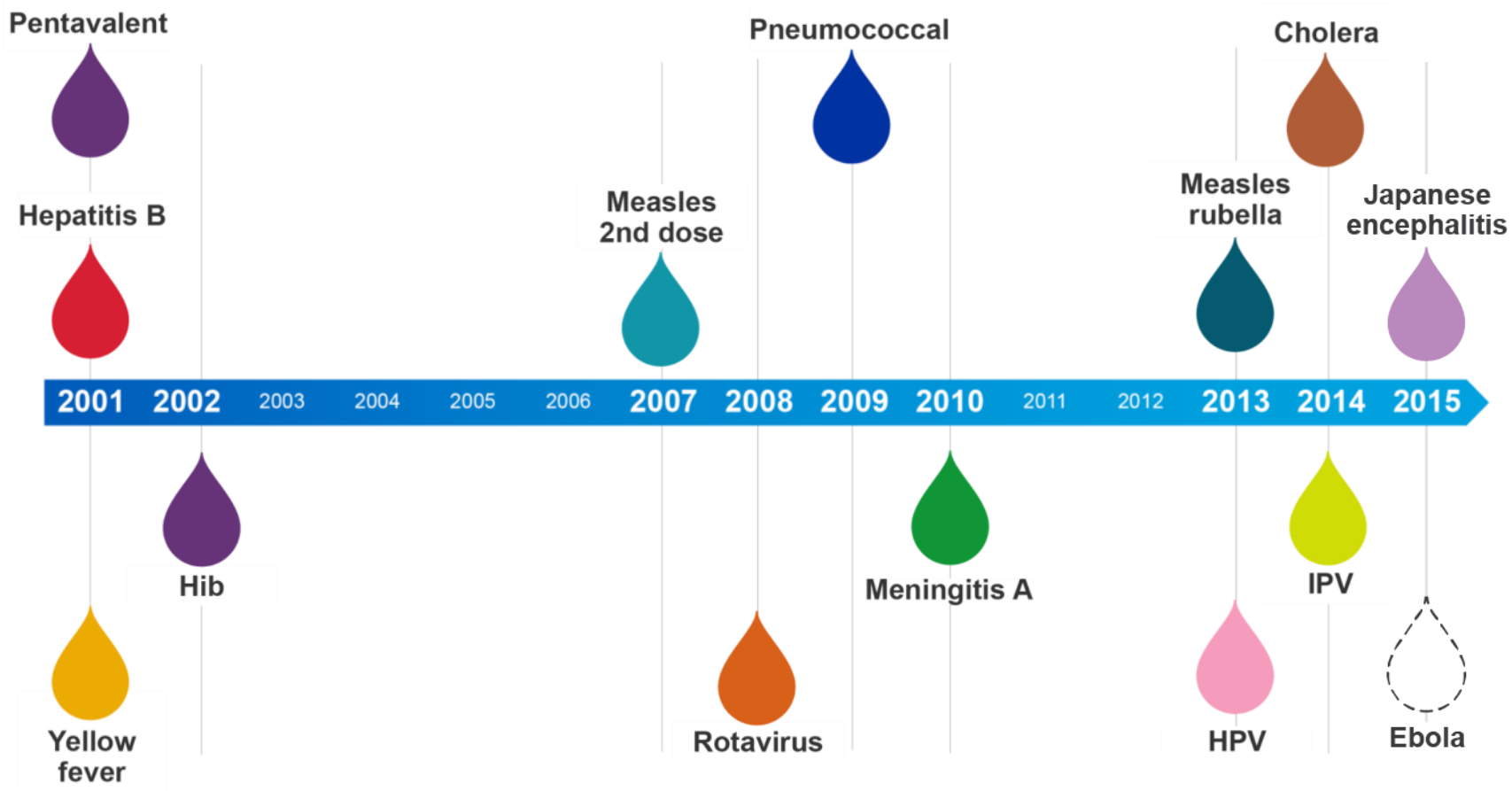
Gavi-supported vaccination programmes: an overview



Refers to the first Gavi-supported introduction of each vaccine.

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Vaccine Investment Strategy: Gavi's approach to prioritsing new vaccines

- Cholera
- Dengue
- Hepatitis A
- Hepatitis B (birth dose)
- Hepatitis E
- Influenza*
- Meningococcal CYW
- Malaria
- Rabies
- Yellow Fever**
- DTP booster
- Enterovirus 71
- Mumps

* Maternal vaccination
** Additional mass campaigns

Category	VIS Criteria
Health impact	Impact on child mortality
	Impact on overall mortality
	Impact on overall morbidity
Additional impact considerations	Epidemic potential
	Global or regional public health priority
	Herd immunity
	Availability of alternative interventions
	Socio-economic inequity
	Gender inequity
	Disease of regional importance
Implementation feasibility	Capacity and supplier base
	GAVI market shaping potential
	Ease of supply chain integration
	Ease of programmatic integration
	Vaccine efficacy and safety
Cost and value for money	Vaccine procurement cost
	In-country operational cost
	Procurement cost per event averted

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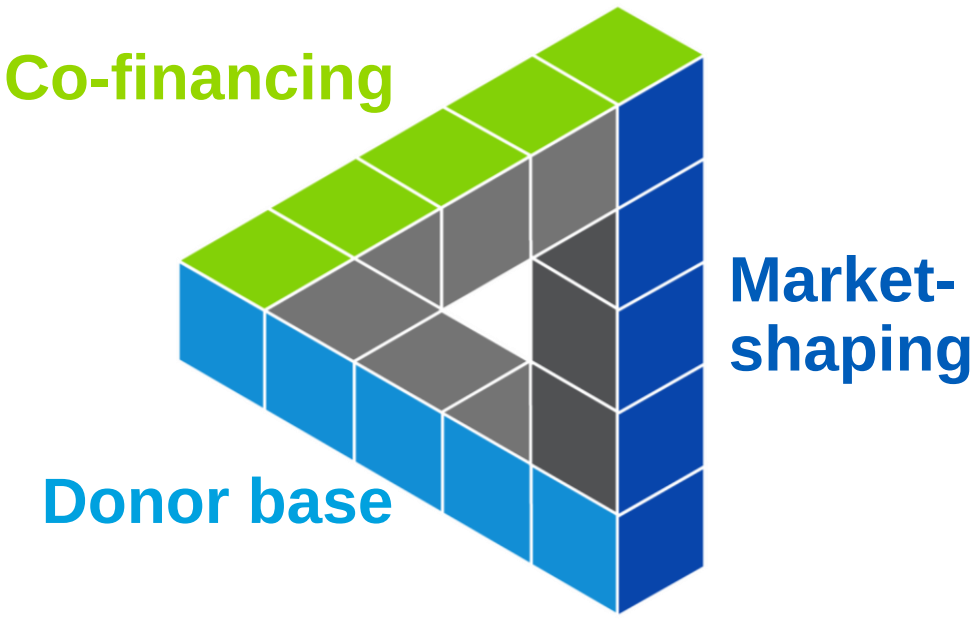
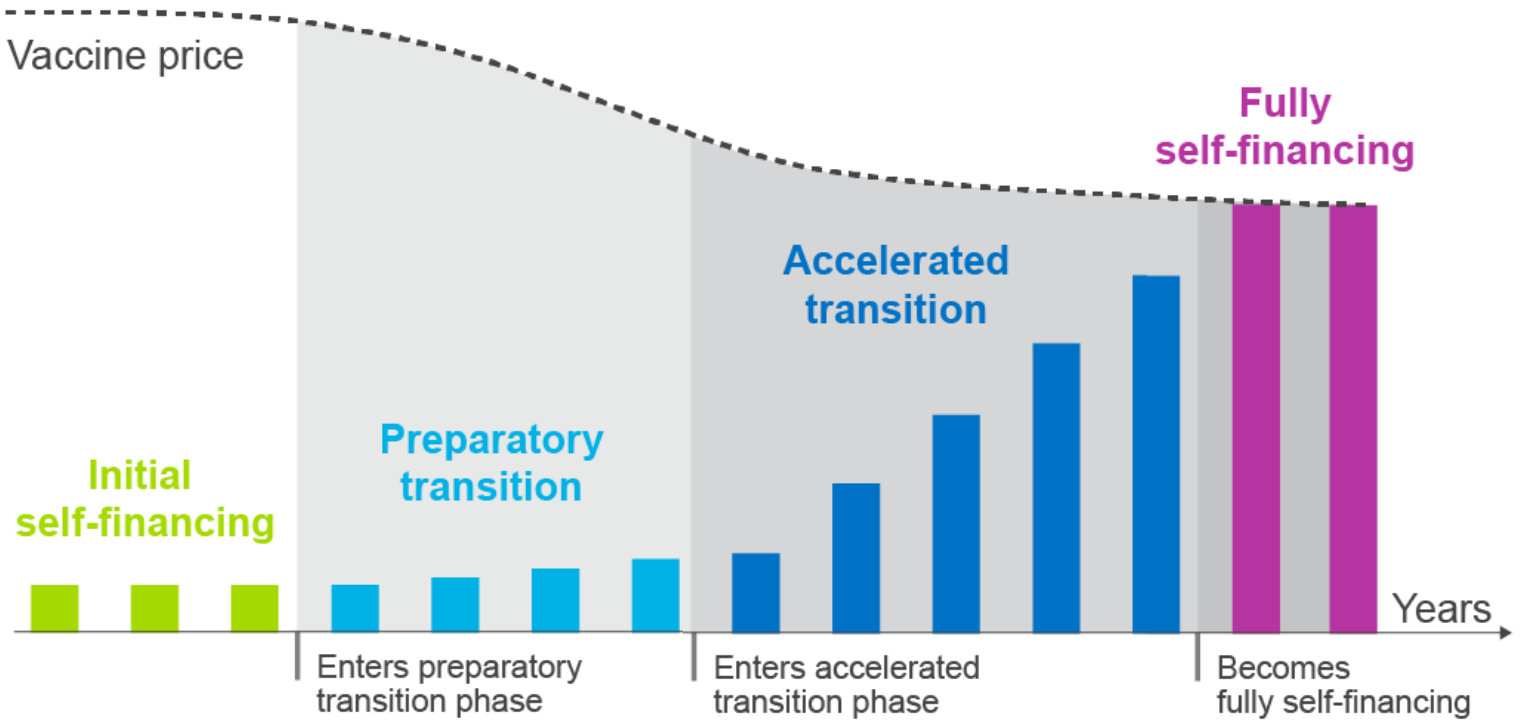
Gavi’s unusual development model



HOW THE CO-FINANCING POLICY WORKS

Co-financing level

(per dose)



Source: Gavi 2015.

Changing mindsets

In the vaccine manufacturing industry

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Changing mindsets

In the vaccine manufacturing industry

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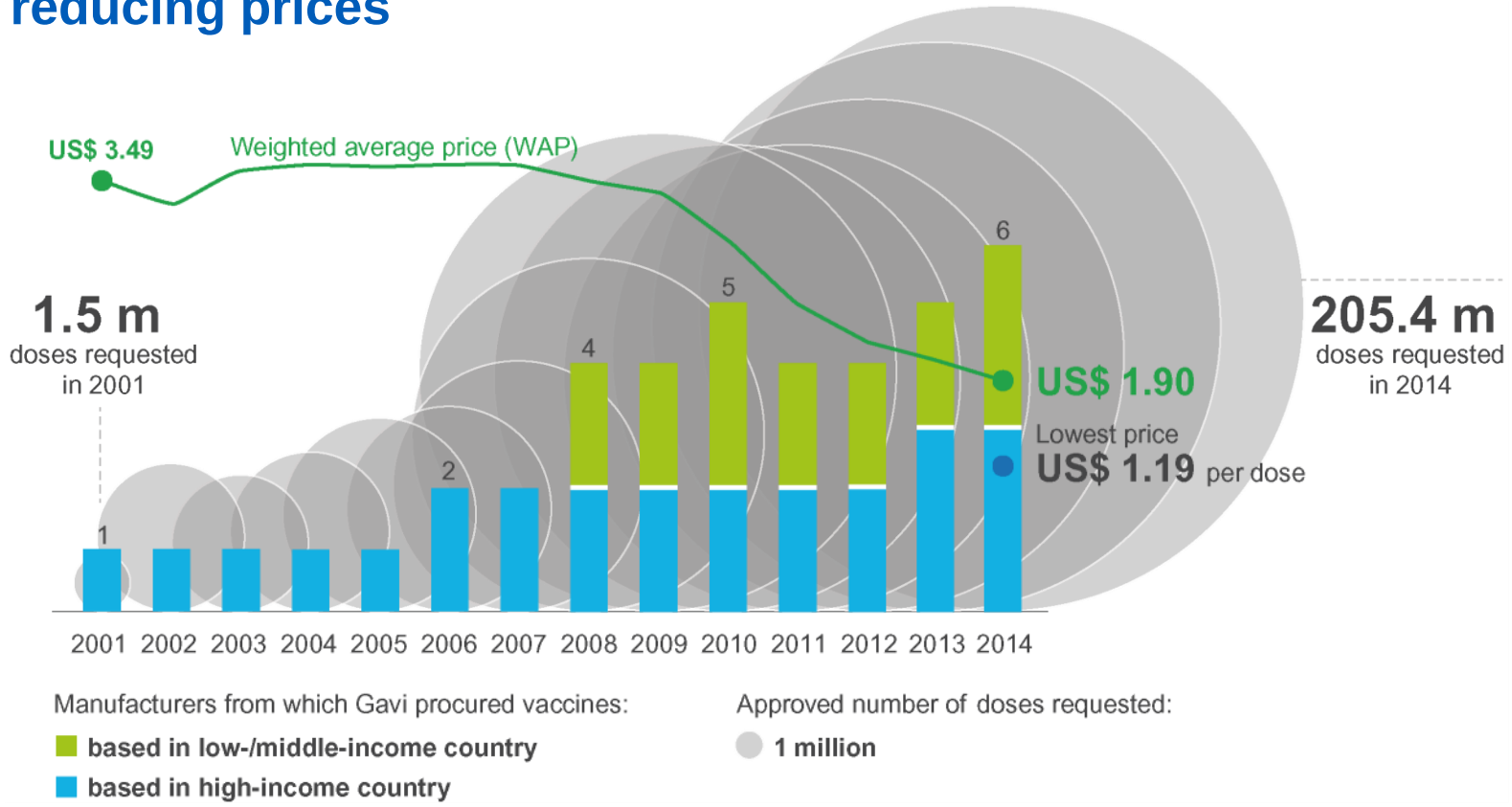
Evolution of pentavalent vaccine market

Increasing volumes, growing number of suppliers, reducing prices



Sources: UNICEF Supply Division 2015; country annual progress reports (requested doses).

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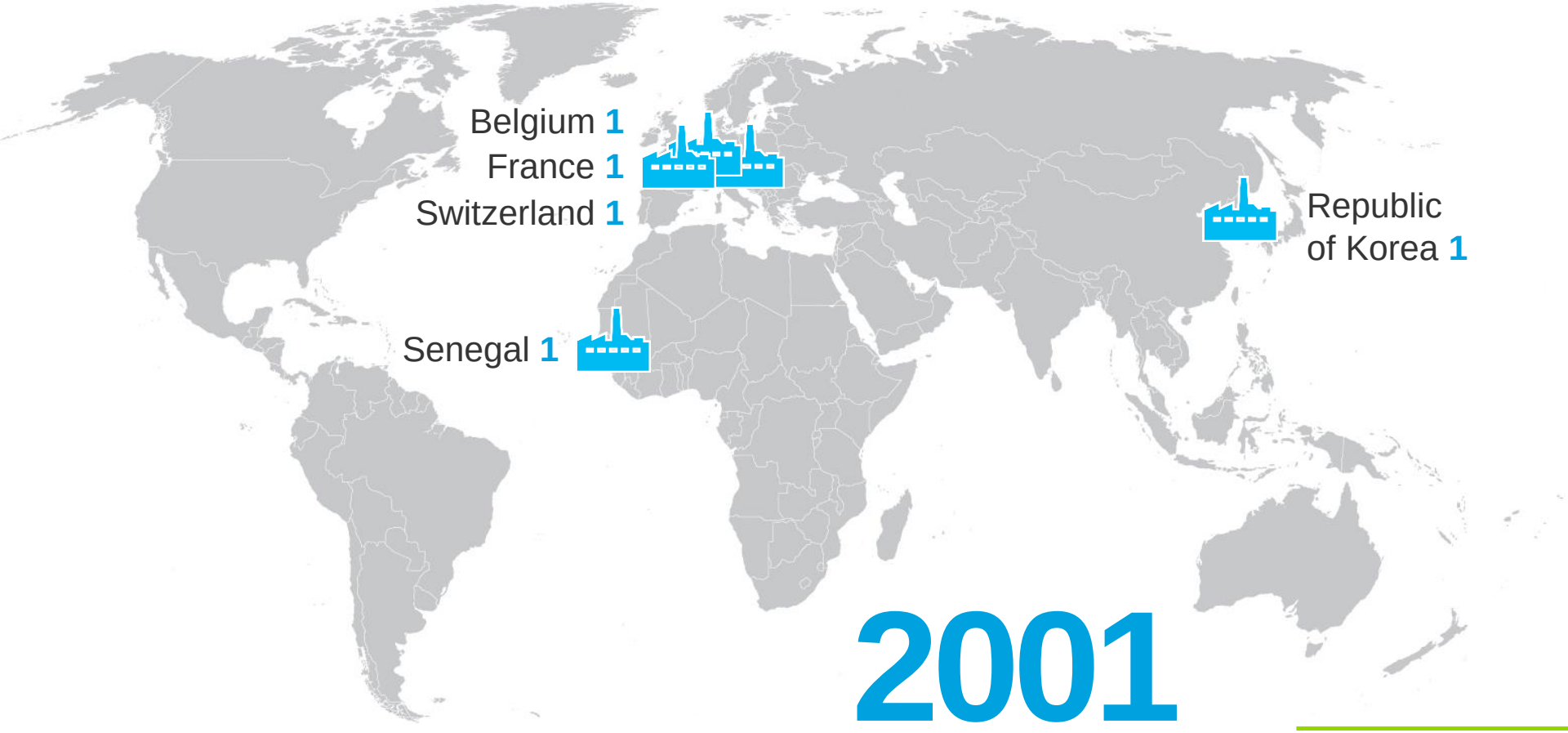
More secure vaccine supply

2001: 5 suppliers from 5 countries of production



Source: UNICEF Supply Division

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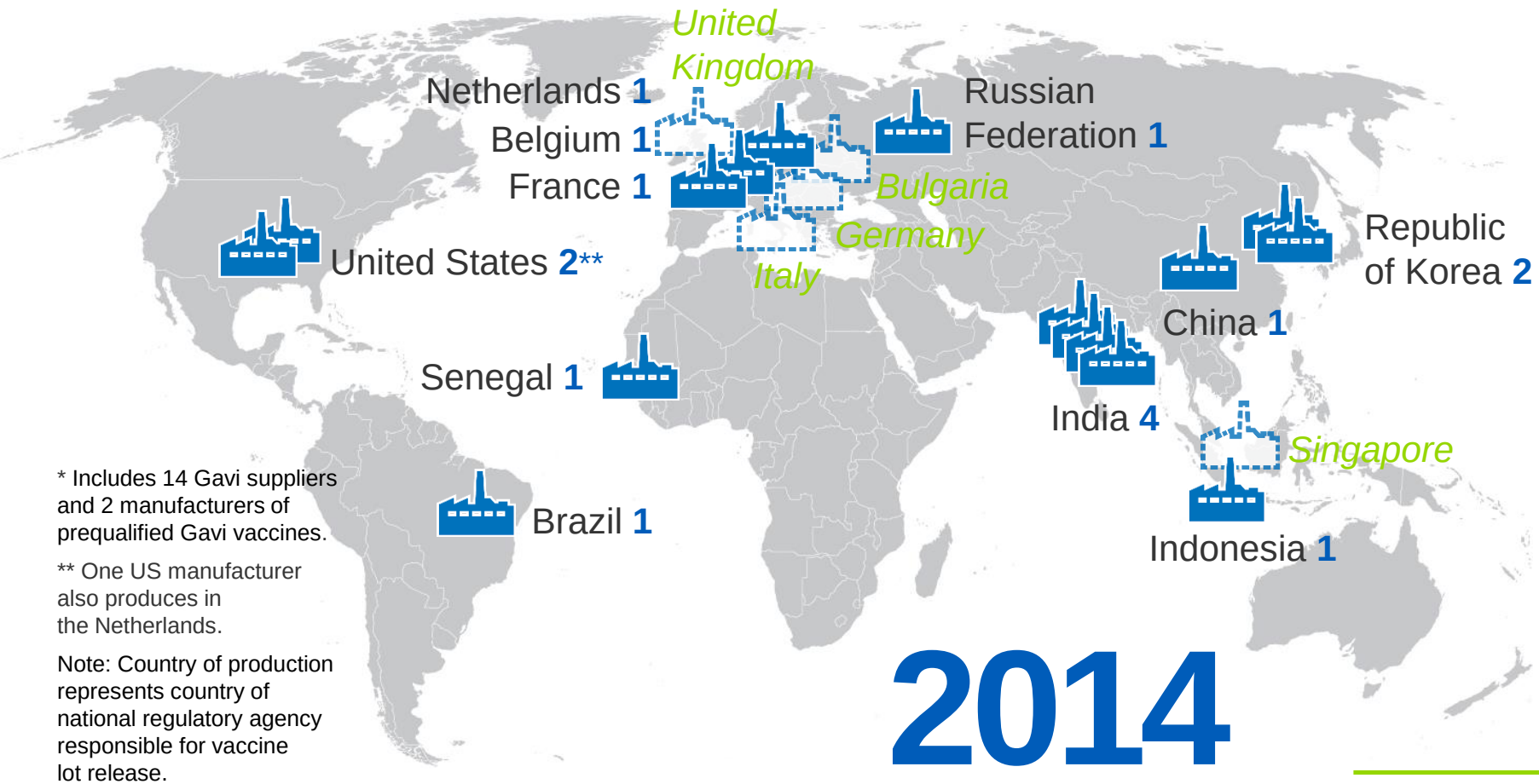
More secure vaccine supply

2014: 16 manufacturers* from 11 countries of production



* Includes 14 Gavi suppliers and 2 manufacturers of prequalified Gavi vaccines.

** One US manufacturer also produces in the Netherlands.

Note: Country of production represents country of national regulatory agency responsible for vaccine lot release.

Source: UNICEF Supply Division and WHO list of pre-qualified vaccines, 2014

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China: from implementing country to Gavi donor

2002
2003
2004
2005
2006
2007
2008
2009
2010
2011
2012
2013
2014
2015

Catalytic Gavi support

Self-financing vaccines

Supplier of Gavi-funded vaccines

Gavi donor

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Advance market commitment (AMC)

Accelerating the manufacture and delivery of vaccines

Donors commit funds for new vaccines that meet stringent criteria and are requested by developing countries, at pre-agreed price

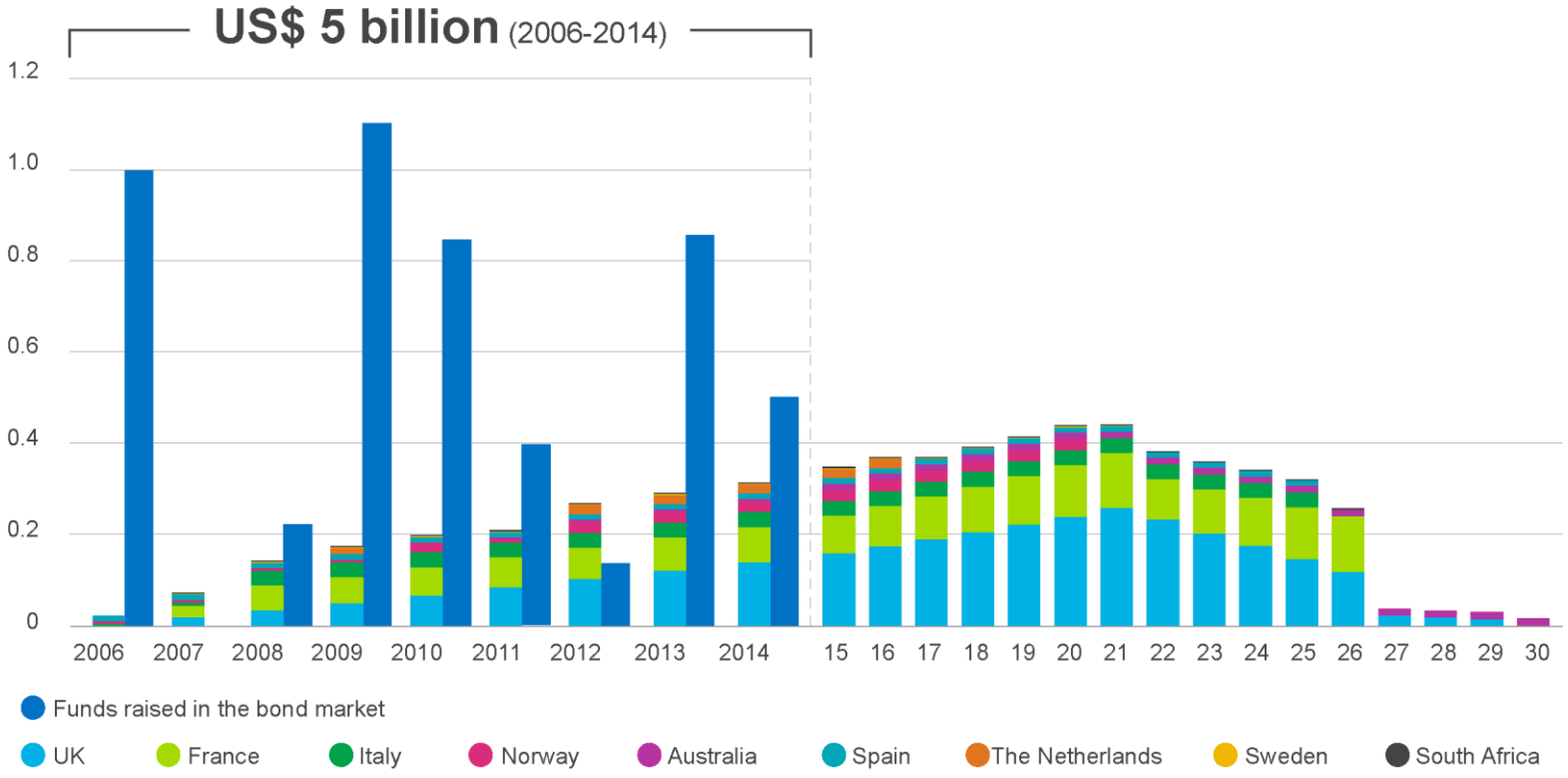
Manufacturers get incentive to invest in R&D – legally committing to supply vaccines at lower prices in the long term

Developing countries and Gavi pay long-term, lower price for the vaccines

(from left to right): Gavi/2014/D.Rowe, Gavi/2007/Atul Loke, Gavi/2012/Sala Lewis

IFFIm frontloading

Long-term donor pledges are converted into immediately available funding for immunisation



Source: World Bank, 2015

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Advanced purchase commitment for Ebola

- **Gavi commits towards future procurement with prepayment**

- **Merck commits to:**
  - EUAL dossier acceptance by December 31 2015
  - Make available 300,000 investigational doses by May 2016
  - Submit for licensure by December 2017

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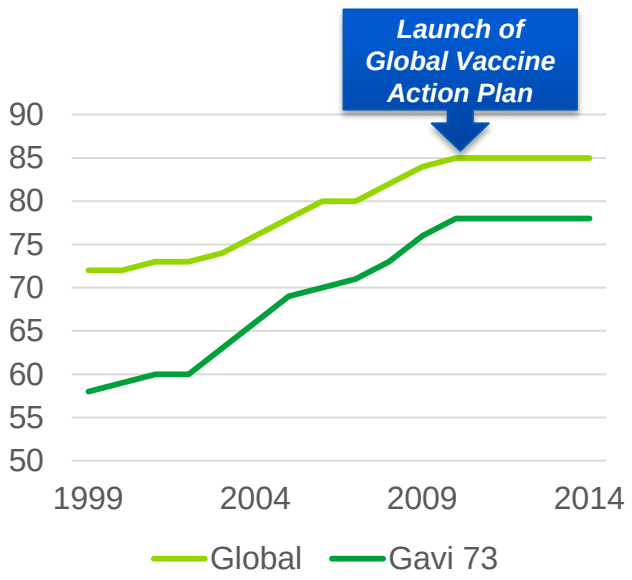
After years of progress, measles control efforts stagnating and elimination off-track

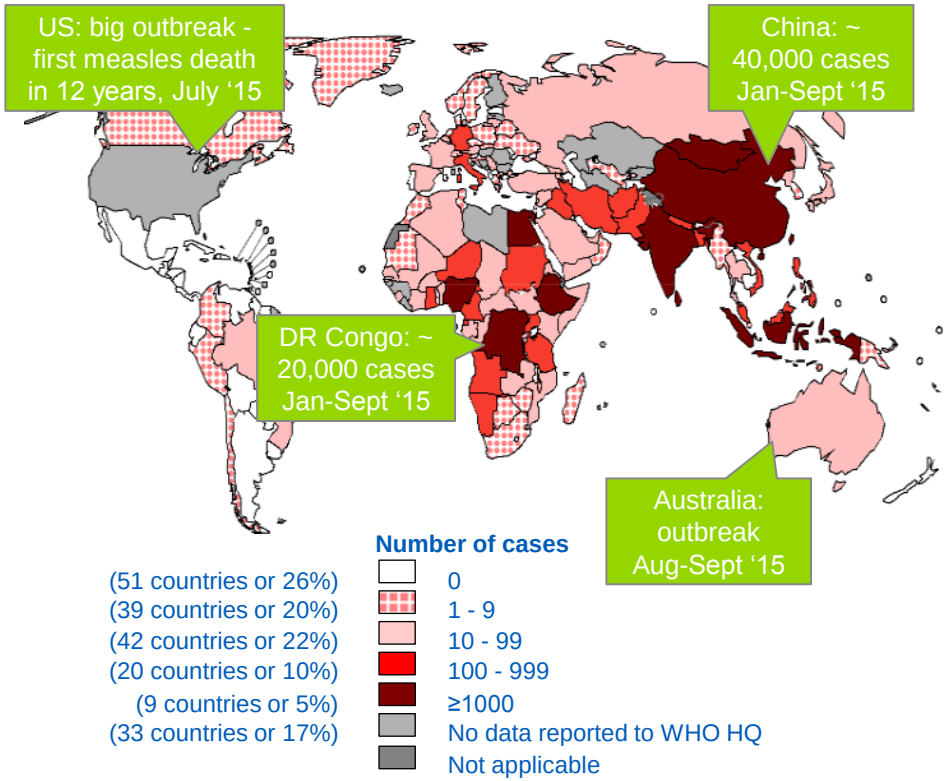
MCV1 coverage stagnant for past 5 years…

Coverage with first dose of measles vaccine, %



…and measles outbreaks resurgent in both developed and developing world

Reported measles cases July-November 2015



Source: WHO/UNICEF Estimates of National Immunization Coverage 2014 revision, July 2015; WHO measles surveillance data as of 13 January 2016

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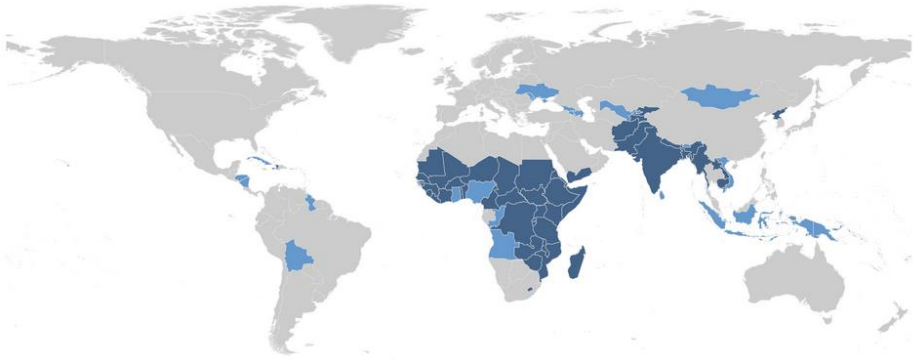
Gavi supporing the countries most at risk from infectious diseases

>300 infectious diseases exist…

…<30 currently vaccine preventable

Gavi supports the poorest countries, home to 60% of the world's children



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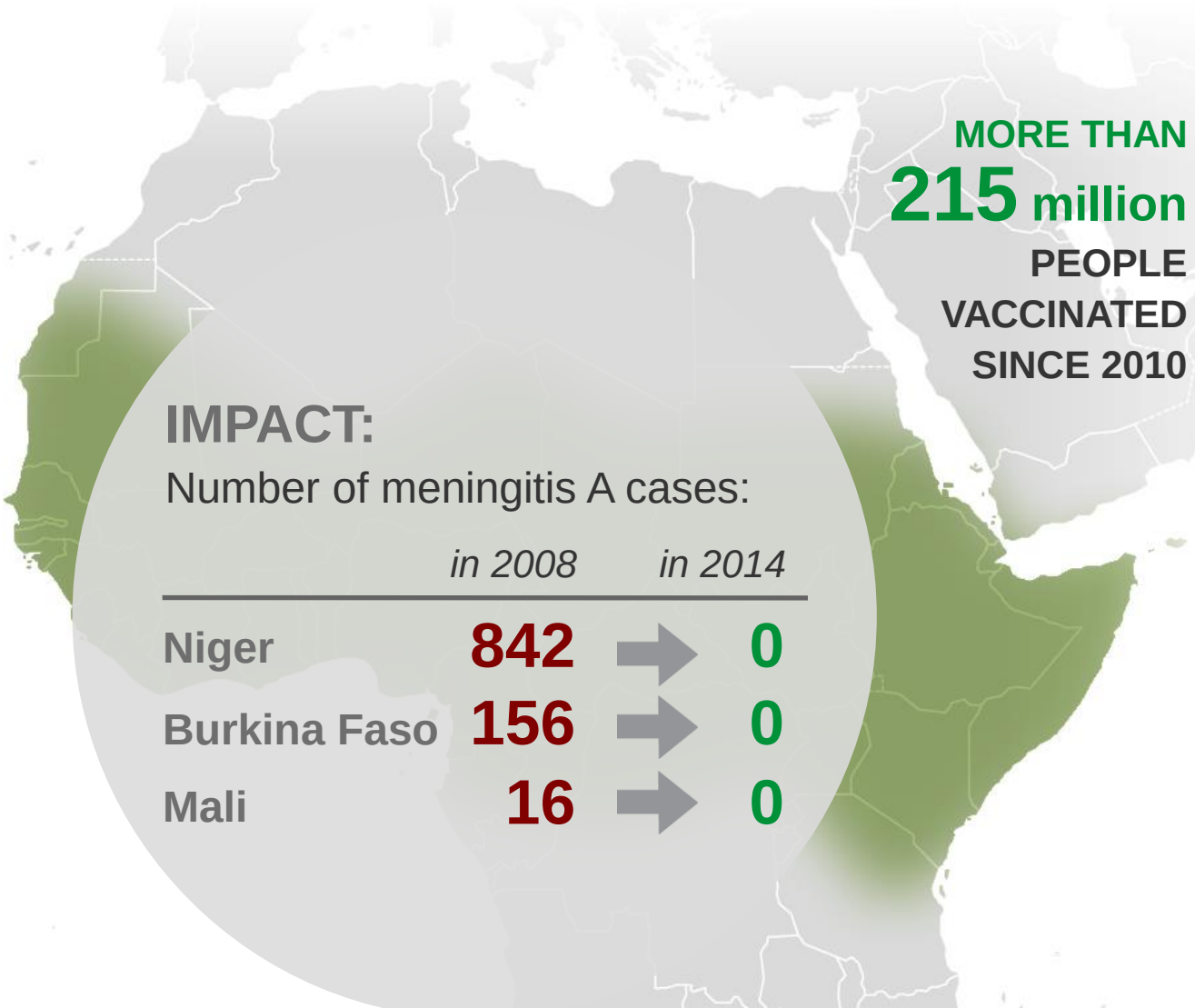
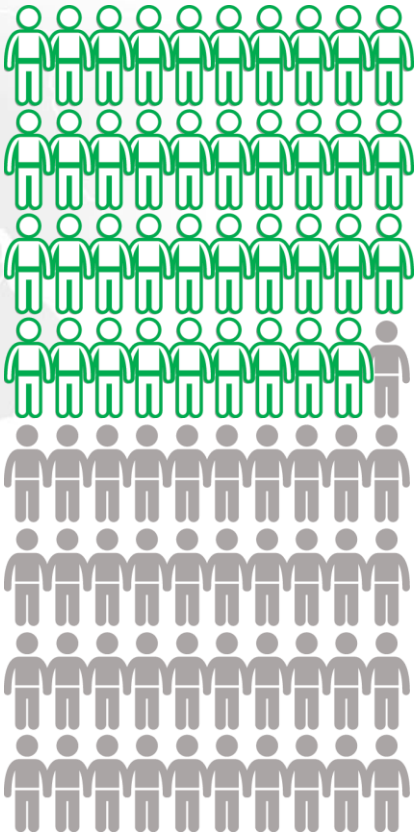
Powerful impact: meningitis A vaccine



450 million

PEOPLE THREATENED



MORE THAN

215 million

PEOPLE VACCINATED SINCE 2010

IMPACT:

Number of meningitis A cases:

	in 2008	*in 2014*
Niger	842 →	0
Burkina Faso	156 →	0
Mali	16 →	0

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Global health security: Gavi's growing role in outbreak preparedness and response

Yellow fever vaccine stockpile

Measles outbreak response

Meningitis vaccine stockpiles

Oral **cholera** vaccine stockpile

Ebola vaccine stockpile

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Four key enablers of vaccine development

Recognise the lack of market potential

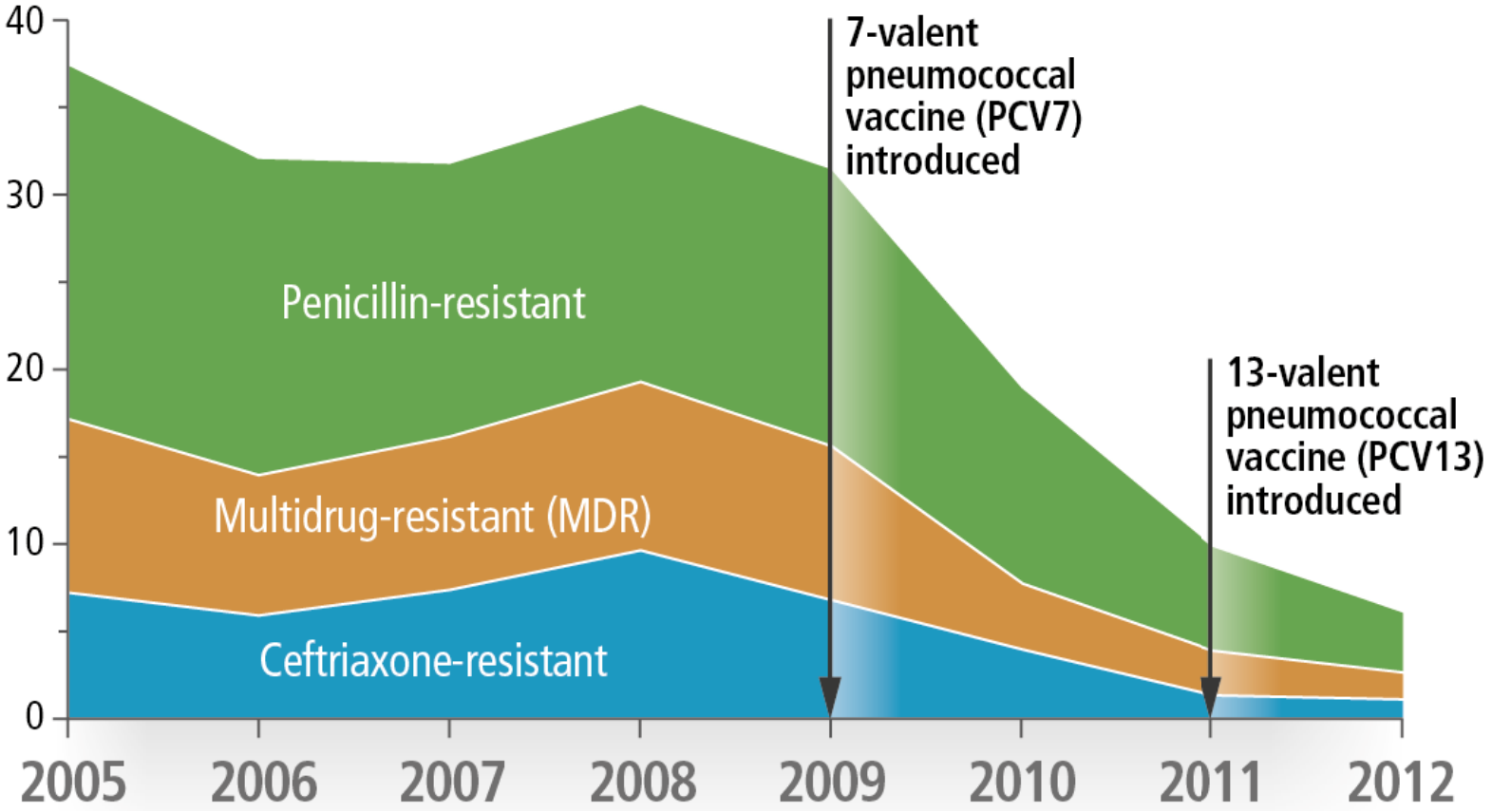
Build laboratory & outbreak investigation capabilities in countries

Create repositories of potential agents & better catalogue their immunologic properties

Develop vaccine vector platforms

Vaccines reduce antibiotic resistance

Incidence of antibiotic-resistant invasive pneumococcal disease in children < 2 years, South Africa (cases per 100,000 person-years)



Source: A von Gottberg et al, for GERMS-SA. Publication submitted April 2014.

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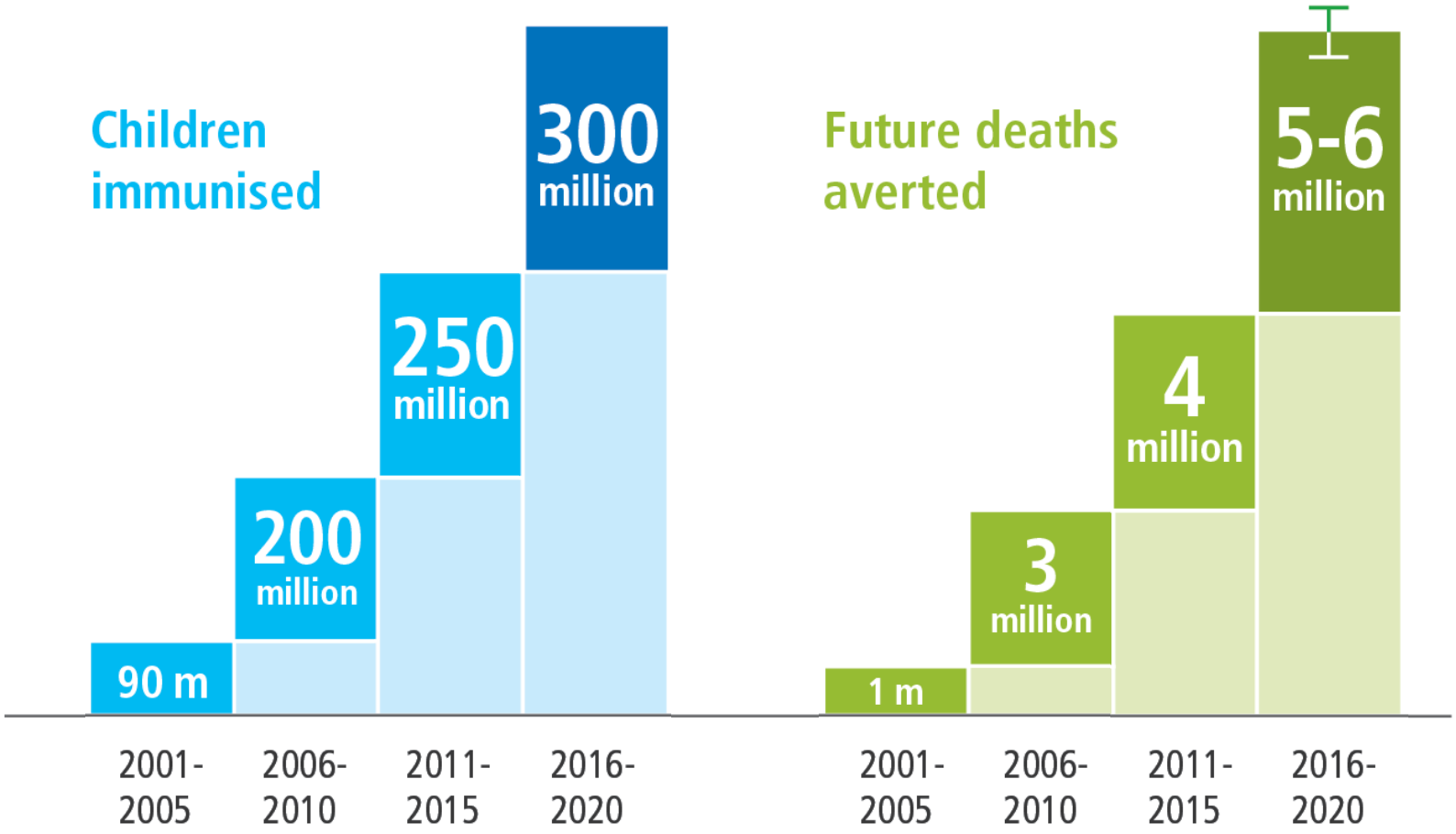
Accelerating impact 2016–2020



Sources: Gavi strategic demand forecasts 9 and 10,
Investing together for a healthy future: the 2016–2020 investment opportunity.

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THANK YOU

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www.gavi.org