

Global Program Review

The World Bank's Partnership with the GAVI Alliance

Approach Paper

October 11, 2012
Country, Corporate and Global Evaluations

<http://www.globalevaluations.org>

Acronyms and Abbreviations

AMC	Advanced Market Commitment
CEO	Chief Executive Officer
CODE	Committee on Development Effectiveness (World Bank)
EFA-FTI	Education for All–Fast Track Initiative (now called the Global Partnership for Education)
FIF	Financial Intermediary Fund (World Bank)
GAVI	Global Alliance for Vaccines and Immunisation
GFA	GAVI Fund Affiliate
GRPP	Global and/or Regional Partnership Program
GPR	Global Program Review
HLSP	Health and Life Sciences Partnership (conducted the evaluation of IFFIm)
HSS	Health systems strengthening
IBRD	International Bank for Reconstruction and Development
ICC	Interagency Coordination Committee (country-level)
IEG	Independent Evaluation Group
IFFIm	International Finance Facility for Immunisation
INS	Injection safety support
IRC	Independent Review Committee (GAVI)
M&E	Monitoring and Evaluation
MOF	Ministry of Finance
MOH	Ministry of Health
NVS	New and underused vaccine support
OECD/DAC	Organisation for Economic Co-operation and development / Development Assistance Committee
ODA	Official Development Assistance
PPAR	Project Performance Assessment Report
UNICEF	United Nations Children’s Fund

Fiscal Year of Program

January 1 to December 31

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1. Background

1. As indicated in its approved work program for fiscal year 2013, the Independent Evaluation Group (IEG) is proposing to initiate a Global Program Review (GPR) of the partnership of the World Bank with the GAVI Alliance (formerly the Global Alliance for Vaccines and Immunisation).¹ IEG does not generally issue an Approach Paper for GPRs since most of these are standard products that follow a standard review framework. However, IEG is issuing this Approach Paper following the precedents of the GPRs on other large programs (the Global Fund and the Global Environment Facility). As explained below, this review is focusing on the Bank's roles in the GAVI Alliance and the Bank's performance in these roles.²

The GAVI Alliance

2. What is now called the GAVI Alliance (GAVI) is a partnership of public and private organizations that was launched in 2000 with a mission “to save children’s lives and protect people’s health by increasing access to immunization in poor countries.”³ GAVI’s ultimate goal is “to reduce the level of vaccine-preventable illness and death by at least two thirds compared to 2000 levels, thus achieving the Millennium Development Goal for child health,” by funding vaccine introduction programs, supporting the development of new and underused vaccines, and improving vaccine delivery by strengthening health systems.

3. At its inception, GAVI was described as the “quintessential informal public-private partnership” and was designed as an informal alliance of partners with a shared mission and a small Secretariat based at UNICEF’s office in Geneva. The governance structure was divided between GAVI on the programmatic side and the Vaccine Fund (later the GAVI Fund) on the financial side. The GAVI Fund was a U.S. 501(c)(3) (non-profit) organization based in Washington, D.C. Over time, GAVI has become more formal with a more independent Secretariat in response to the increased number of responsibilities, programs, and the large inflow of resources. In 2008, GAVI was restructured to reflect its growing roles and independence, and became a legal entity in the form of a Swiss Foundation, located in Geneva.

4. The Gates Foundation and other donors have pledged more than US\$6.5 billion to GAVI during its first ten years,⁴ and pledged an additional US\$4.3 billion in June 2011. In turn, GAVI has committed \$7.2 billion and disbursed \$3.3 billion from 2000–11 (Figures 1 and 2) — providing assistance to 76 of the lowest income countries and immunizing more

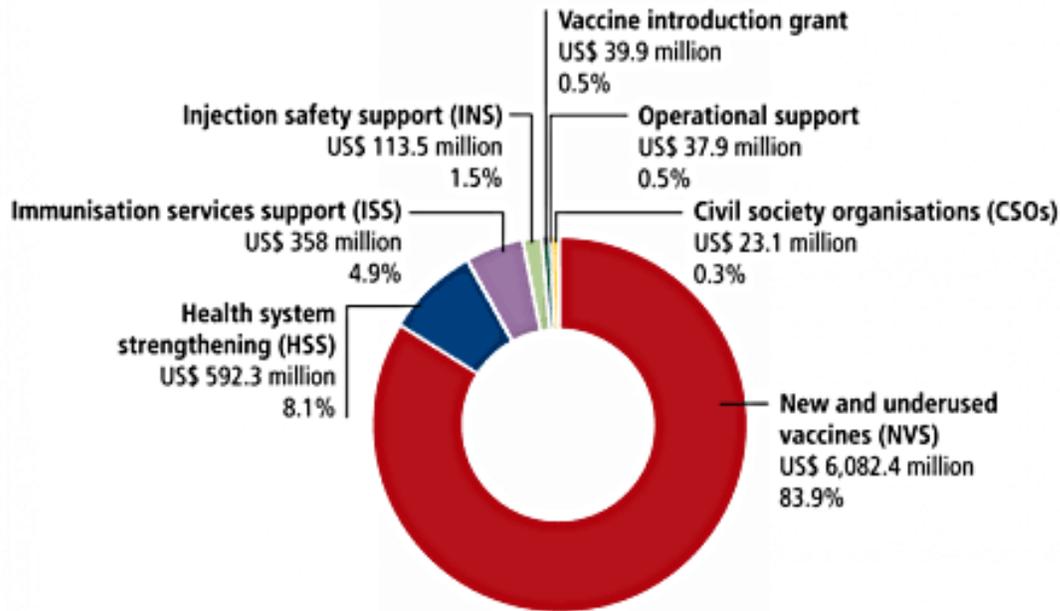
1. “IEG Work Program and Budget (FY13) and Indicative Plan (FY14-15),” May 25, 2012, Board document R2012-0103/1.

2. The first draft of this Approach Paper was peer-reviewed by Enis Baris, World Bank Sector Manager for Health, Nutrition and Population in the Middle East and North Africa Region, and Ciro de Quadros, Executive Vice President of the Sabin Vaccine Institute in Washington, DC. Subsequent drafts were shared sequentially with World Bank Management and the GAVI Secretariat. The comments received from all parties have been incorporated into the paper.

3. Cited from the introduction to GAVI Second Evaluation Report.

4. GAVI Alliance, “Investing in immunization through the GAVI Alliance: The evidence base,” March 2010.

Figure 1. Commitments of Funds to GAVI, 2000–11, US\$7.2 billion total



Source: Retrieved on February 28, 2011 from www.gavialliance.org/about/mission/impact/

than 326 million children.⁵ The list of countries eligible for GAVI support is updated periodically, and 57 countries are eligible for support as of February 2012.

5. GAVI's operations are based on five-year strategic plans that respond to the changing vaccine landscape but at the same time keep a focus on achieving GAVI's mission. After ten years in existence and two strategic plans, the GAVI Alliance Board approved the current Phase III (2011–15) strategy in June 2010.

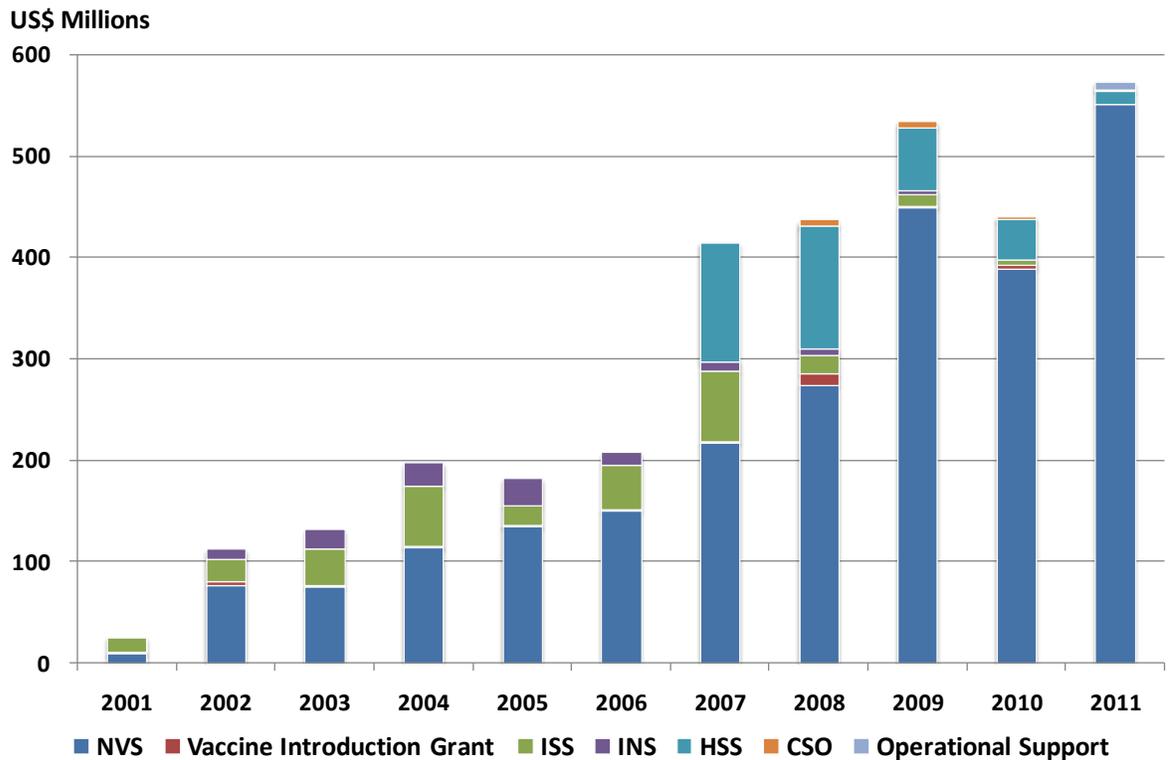
Application and Approval Process

6. The GAVI Secretariat announces “funding windows” each year within which GAVI-eligible countries may apply for different types of program support.⁶ To be GAVI-eligible, countries must have per capita GNI equal to or less than US\$ 1,520 in order to apply for any of the support programs.⁷ Only national governments can apply, and the 5-year plan proposals are submitted by the Ministry of Health with signed approvals from the Ministry of Finance and the country's Interagency Coordination Committee (ICC). The specific

5. From www.gavialliance.org. In 2012, countries with Gross National Income (GNI) per capita below or equal to US\$1,520 are eligible for GAVI support.

6. [GAVIAlliance.org](http://www.gavialliance.org). The deadline application submission for 2012 is August 31, 2012. Retrieved on May 8, 2012 from <http://www.gavialliance.org/about/gavis-business-model/putting-countries-in-charge/>

7. [GAVIAlliance.org](http://www.gavialliance.org). GNI according to World Bank data for the latest available year. Retrieved on May 8, 2012 from <http://www.gavialliance.org/support/apply/countries-eligible-for-support/>

Figure 2. The GAVI Alliance: Disbursements, 2001–11 (US\$ millions)

Source: Retrieved on February 28, 2012, from www.gavialliance.org/results/disbursements. See also Annex Table B-1.

guidelines and proposal deadlines for each support program support, including eligibility and minimum requirements, are published on the GAVI Alliance Web site.

7. Once an application is submitted to the GAVI Secretariat, it is sent to the Independent Review Committee (IRC) for review. The IRC then recommends the country application to the GAVI Alliance Board using the following four categories: recommended for approval; recommended for approval with clarifications; recommended for approval with conditions; and recommended for resubmission. The GAVI Alliance Board or Executive Committee approves the IRC recommendation and a Decision Letter is sent to inform the country of the decision.

8. GAVI offers the following services to support immunization in eligible countries (Figure 1):

- New and underused vaccine support (NVS) provides assistance to developing countries to introduce new and underused vaccines and associated technology; countries co-finance the cost of GAVI-supported vaccines to ensure that they can eventually sustain their immunization programs without external support; countries also receive a one-time cash grant in the form of Vaccine Introduction Grants to support additional costs related to new vaccine introduction and to fund pre-introduction activities.

- Injection safety support (INS) is associated with the NVS; GAVI typically funds auto-disable syringes and safety boxes together with the vaccines.
- Immunization services support (ISS) provides flexible funding for countries to improve routine immunization services; this is performance-based on the number of additional children being immunized.
- Health systems strengthening (HSS) provides funding to address barriers within the health systems to immunization access and maternal and child health services.
- Civil society organization (CSO) support strengthens civil society engagement with regards to immunization and health services at all levels within the country.
- Health Systems Funding Platform (the Platform) is intended to coordinate and streamline the various international resources for health systems strengthening among partners, donors and countries in order to better align with the country priorities.

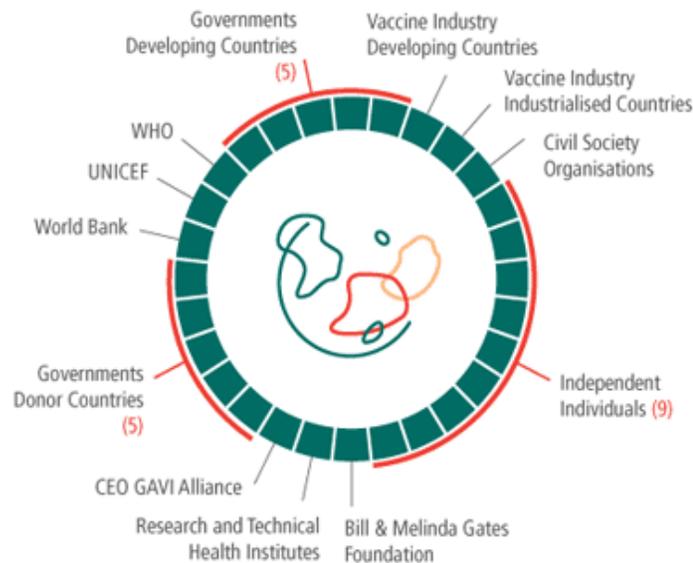
Governance and Management

9. The GAVI Alliance started with a bifurcated governance structure with GAVI on the programmatic side and the Vaccine Fund (later called the GAVI Fund) on the financial side.⁸ After the first 2005 evaluation of GAVI, conducted by Abt Associates, the old GAVI Board and the GAVI Fund Board merged into what is now called the GAVI Alliance Board in October 2008. Other governance bodies include the International Finance Facility for Immunisation (IFFIm) Board, the GAVI Fund Affiliate Board, and the GAVI Campaign Board. In addition, GAVI transformed itself from an informal partnership hosted by UNICEF into an independent legal Swiss foundation in late 2008.

10. The **GAVI Alliance Board** is comprised of 28 seats and operates on the basis of a “hybrid stakeholder-corporate” model which includes representatives of donor and recipient governments, the private sector (including philanthropists), vaccine industry (from developed and developing countries), research and technical institutes, civil society organizations, and key multilateral organizations (Figure 3). Permanent seats are held by the Gates Foundation, WHO, UNICEF and the World Bank. Aside from the four permanent members, Board representatives serve on a time-limited basis.

11. The Board is supported by six committees that oversee specific activities and development of key policies. The six committees are: Executive Committee, Programme and Policy Committee, Governance Committee, Investment Committee, Audit and Finance Committee, and Evaluation Advisory Committee. In addition to being a permanent, voting member of the Board, the World Bank sits on three committees (Executive, Audit and Finance, and Programme and Policy). The Bank also provides the financial platform for the AMC and serves as the Treasury Manager for IFFIm.

8. Sophia Drewnowski, “Managing Change in Maturing Partnerships: Lessons Learned from CGIAR, EFA-FTI and GAVI,” The World Bank. December 2009.

Figure 3. GAVI Alliance Board Composition

Source: www.gavialliance.org.

12. The GAVI Secretariat, with offices in Geneva and Washington, D.C., is led by the Chief Executive Officer — currently Seth Berkley — and is supported by seven teams. The Secretariat is responsible for day-to-day operations, including mobilizing resources, coordinating program approvals and disbursements, developing policy, implementing strategic initiatives, monitoring and evaluation, legal and financial management, and administration for the GAVI Alliance Board and Committees.

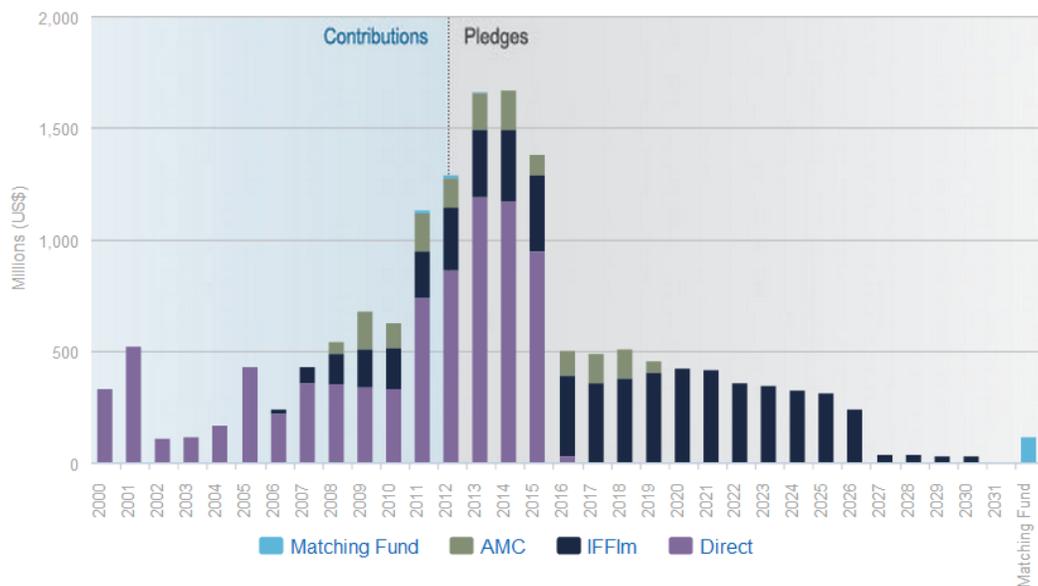
13. The **IFFIm Board** is composed of five directors and currently chaired by René Karsenti. The IFFIm Board is responsible for reviewing GAVI immunization program funding requests and ensuring proper disbursement of funds; arranging borrowing transactions to fund immunization programs; monitoring IFFIm's investment portfolio and liquidity; reviewing and approving IFFIm's annual report of the trustees and financial statements; overseeing IFFIm's governance and policies; and assessing IFFIm's efficacy as an innovative financing mechanism supporting international development.

14. There have been three **external evaluations**. The first evaluation, **Evaluation of the GAVI Phase 1 Performance**, was conducted by Abt Associates for the period from 2000 to 2005. The evaluation commenced in November 2007 and the report was released in October 2008. The second evaluation of GAVI was completed in September 2010. Commissioned by the GAVI Alliance Board and conducted by Cambridge Economic Policy Associates (CEPA), the **Second Evaluation Report** assessed GAVI's performance from inception to 2009, but focused primarily on the period from 2006 to 2009. In addition, the GAVI Secretariat commissioned HLSP to evaluate the IFFIm on behalf of the IFFIm Board. The **Evaluation of the International Finance Facility for Immunisation** Report was published in June 2011. GAVI has commissioned an international consulting firm (Dalberg) to conduct an initial evaluation of AMC, focusing on the design and implementation, due in late 2012.

Financing

15. GAVI is funded by direct contributions from donor governments, the Bill and Melinda Gates Foundation, and private donations (Figure 4). In addition, GAVI has developed three pilot innovative financing mechanisms — the International Finance Facility for Immunisation (IFFIm), pilot Advance Market Commitment for pneumococcal vaccines (AMC) and the GAVI Matching Fund — which advance the mission of GAVI. During the period 2000–11, GAVI committed US\$7.2 billion to 76 countries and disbursed US\$3.3 billion. At the June 2011 London pledging conference, GAVI received further pledges of \$4.3 billion from donor countries, the Gates Foundation and other private donors to finance operations during Phase III. At the same time, the GAVI Matching Fund was launched as an innovative financing initiative to raise approximately US\$260 million by 2015, in which the UK Department for International Development and the Gates Foundation have pledged £50 million and US\$50 million, respectively, to match private sector contributions of US\$ 130 million.

Figure 4. GAVI: Contributions and Pledges over Time



Source: GAVIAlliance.org

16. The *International Finance Facility for Immunisation (IFFIm)* is a United Kingdom charity that was launched in 2006 to pilot this innovative financing mechanism with GAVI as the implementing partner and the World Bank as the Treasury Manager.⁹ IFFIm raises funds on international capital markets by issuing bonds, which are colloquially referred to “vaccine bonds” in many contexts. IFFIm’s assets are long-term, legally binding grant agreements from sovereign donors. The governments of the United Kingdom, France, Italy, Norway, Australia,

9. HLSP, “Evaluation of the International Finance Facility for Immunisation (IFFIm),” June 2011.

Spain, the Netherlands, Sweden and South Africa, have provided grants totaling over US\$6.2 billion to IFFIm over a period of 23 years. IFFIm bonds have raised approximately US\$3.6 billion since the program's inception and IFFIm has used the process to fund GAVI programs and refinance.¹⁰ In 2011, Brazil pledged US\$20 million to IFFIm, and is on track to become IFFIm's tenth donor.

17. The *GAVI Fund Affiliate (GFA)* accepts funds from pledge agreements with sovereign donors and assigns these pledges to the IFFIm Company so that they can be securitized. GFA also approves funding of programs with IFFIm proceeds. GFA was established to keep IFFIm independent from the donors and to safeguard GAVI's tax-exempt status. GFA is registered in England and Wales as a company limited by guarantee. At the GAVI Alliance Board meeting held in November 2011, there was an ongoing review process to analyze the legal, governance, accounting, and tax implications of amending the IFFIm transaction documents and subsume GFA within IFFIm or GAVI.¹¹

18. The *pilot Advance Market Commitment for pneumococcal vaccines (AMC)* was launched in June 2009 with a US\$1.5 billion commitment from Italy, the United Kingdom, Canada, the Russian Federation, Norway and the Gates Foundation. The aim of the AMC program is "to stimulate the development and manufacture of vaccines needed in low income countries" by providing financial incentives to vaccine manufacturers.¹² Donors commit funds to the AMC to subsidize the purchase of pneumococcal vaccines at an affordable price for developing countries thereby providing vaccine manufacturers with a long-term, guaranteed market price for the vaccines. The World Bank manages the AMC funds, which are on IBRD's balance sheet, GAVI funds the vaccine purchase, and UNICEF procures the vaccines from manufacturers.

The Involvement of the World Bank in GAVI Alliance

19. The World Bank was one of the founding partners in the establishment of GAVI when the organization was started in 1999 as an informal alliance. Since then, the Bank has become deeply engaged with GAVI and plays three major roles in GAVI: (a) in the corporate governance of GAVI (b) as financial administrator of IFFIm and related trust funds and the AMC; and (c) as a development partner at the global and country levels.

20. As mentioned, the Bank is a permanent, voting member of the GAVI Alliance Board, a member of the Executive, Audit and Finance, and Programme and Policy committees, provides the financial platform for the AMC, and the Treasury Manager for the IFFIm. In particular, the Bank provides IFFIm with the following services: "development and execution of market-based financing strategies and funding operations, multi-donor grant and payment tracking, liquidity and investment management, risk monitoring and asset-liability

10. GAVIAlliance.org. Retrieved on February 28, 2012, from <http://www.gavialliance.org/funding/how-gavi-is-funded/innovative-finance/>

11. GAVI Alliance Board Meeting, Final Minutes, November 2011.

12. Tania Cernuschi, Eliane Furrer, Susan McAdams, Andrew Jones, Johanna Fihman, Nina Schwalbe, "The pilot Advance Market Commitment for pneumococcal vaccines (AMC)," GAVI Alliance White Paper, September 2011.

management and accounting and reporting.”¹³ The Bank “helped design the AMC and took on AMC donor risk on its own balance sheet.”¹⁴ In addition, since GAVI’s inception, the Bank has been a Director on the previous GAVI Board, a member of several Working Groups and task forces, a small financial contributor through DGF grants, and executor of a small Bank-executed trust fund established by GAVI at World Bank headquarters.

2. Purpose, Objectives, Scope, and Audience

21. **This GPR focuses on the partnership between the World Bank and GAVI, and on the World Bank’s roles in this partnership. Its purposes are (a) to help improve the relevance and effectiveness of the Bank’s partnership with GAVI; (b) to learn lessons about innovative financing mechanisms for large GRPPs; and (c) to learn lessons for the Bank’s engagement as a development partner with large GRPPs (Table 1).** Although there have been two program-level evaluations undertaken of GAVI in 2008 and 2010, as well as an evaluation of IFFIm in 2011, these evaluations did not specifically address the Bank’s role and performance in GAVI.

22. **The first component will assess the performance of the World Bank in the corporate governance of GAVI.** The component will review the World Bank’s roles in the governance of GAVI, IFFIm and AMC, and assess how the Bank has fulfilled these roles as a full voting board member of GAVI since inception. This includes promoting good governance, performing governance functions, contributing to the major governance reforms in 2008, and managing the potential conflicts of interest among the Bank’s roles in the program. This GPR will **not** assess the overall effectiveness of the GAVI corporate structures such as the Alliance Board and Secretariat.

23. **The second component will assess the World Bank’s performance in the financial management of GAVI and support for IFFIm and AMC.** The component will review the role of the Bank in establishing IFFIm and AMC as pilot programs and in managing their financial risks. This will provide lessons for the use of similar innovative financing mechanisms for other GRPPs. The review will include the perspectives of the World Bank and GAVI on ensuring sustainability of immunization with respect to fiscal space, on the financial sustainability of new and underused vaccine programs at the country level, and on the effectiveness of GAVI’s approach to leveraging vaccine prices.

24. **The third component will assess the performance of the World Bank as a development partner in GAVI at both the global and country levels.** This includes the relevance of the World Bank to GAVI and vice versa; the Bank’s engagement with GAVI at the global level to strengthen aid effectiveness through the Health Systems Funding Platform, based on the principles of the International Health Partnership (IHP+); the experience of the Bank and GAVI in relation to the changing international aid architecture for health; and the Bank’s engagement with GAVI activities at the country level. The desirability of effective operational linkages between GRPPs and the Bank’s country operations has been one of the most consistent

13. Drewnowski, p. 19.

14. World Bank Group, 2010, Trust Fund Annual Report, p. 31.

Box 1. Major Purposes and Components of this Global Program Review

Major Purposes

- (1) To help improve the relevance and effectiveness of the World Bank's partnership with GAVI in its three dimensions.
- (2) To learn lessons about innovative financing mechanisms for large GRPPs.
- (3) To learn lessons for the World Bank's engagement as a development partner with large GRPPs.

Major Components

- (a) Assesses the Bank's performance in the corporate governance of GAVI:
 - Bank's roles and performance in the governance of GAVI
 - Bank's contribution to the good governance of GAVI
 - Bank's contribution to the performance of basic governance functions
 - Bank's management of the potential conflicts of interest that arise from its multiple roles in GAVI.
- (b) Assesses the Bank's role in the financial management for GAVI, with a focus on innovative financing mechanisms:
 - Bank's roles in supporting IFFIm and AMC
 - Bank's performance in the financial management of IFFIm and AMC
 - Bank's roles in sustaining immunization funding at the country level
 - Bank's contributions to the advancement of affordable and sustainable vaccine prices.
- (c) Assesses the Bank's performance as a development partner at the global and country levels:
 - Relevance of the World Bank to GAVI and vice versa
 - Bank's experience at the global level in relation to the Health Systems Funding Platform
 - Bank's experience at the country level
 - Bank's performance as executing agency of the Immunization and GAVI Program (ImGAVI) trust fund.

themes in the Bank's strategic documents concerning GRPPs since 2000. Therefore, it will be informative to see how this is working in practice in the case of the GAVI. This component will include an ex post assessment of the activities undertaken as part of the Bank-executed Immunization and GAVI Program (ImGAVI) trust fund which closed in 2010.

25. The principal target audiences for this GPR are the World Bank's Board and Management, and any formal recommendations in the GPR will be directly exclusively at the Bank's Board and Management. The review aims to provide strategic inputs into the Bank's partnership with GAVI, and with the Bank's involvement with other global health partnerships and financial intermediary trust funds (FIFs) more generally. In addition to the principal target audience, the review will be of interest to GAVI, to the staff of both organizations, and to other organizations and individuals involved with managing and evaluating GRPPs and FIFs.

26. All three components will seek to add value to the World Bank and GAVI beyond what is contained in the two evaluations of GAVI and the evaluation of IFFIm, while drawing upon IEG's experience in reviewing the Bank's engagement with a growing number of GRPPs. The three components of the review will summarize the findings and lessons of the evaluations to the extent that these are relevant, and report on key developments since the evaluations were completed, including the progress in implementing the recommendations of the evaluations.¹⁵

15. Unlike a standard GPR, this GPR will not assess the independence and quality of the recent evaluations of GAVI and IFFIm, nor provide a second opinion on the effectiveness of GAVI, based on recent evaluations. Rather, the three components focus on the performance of the Bank in the three major roles that the Bank plays in GAVI.

3. Evaluation Questions

27. The evaluation covers the entire period since 2000 during which the World Bank has been a partner of GAVI, but focusing more on the recent phases from Phase II (2007) to the present Phase III.

Component 1: The World Bank's Roles in the Governance of GAVI

28. This component assesses the performance of the World Bank in the corporate governance of GAVI. The content of this component is summarized by the following four general evaluation questions:

- 1a. What have been the World Bank's roles and performance in the governance of GAVI (i.e. serving on GAVI Boards/Committees)? This includes a review of governance roles and responsibilities, and an assessment of the degree to which these have been fulfilled by the Bank.
- 1b. What has been the World Bank's contribution to the good governance of GAVI? Good governance includes the application of generally accepted good governance principles such as legitimacy, efficiency, programmatic and fiduciary accountability, transparency, and fairness. This component also includes an assessment of the Bank's contribution to GAVI's governance reforms in 2008.
- 1c. How has the World Bank contributed to the performance of basic governance functions such as establishing the strategic direction of GAVI and IFFIm, overseeing the management of the programs, maintaining adequate risk management practices, and instituting robust monitoring and evaluation systems?
- 1d. How effectively has the World Bank managed the potential conflicts of interest that arise from the multiple roles that the Bank plays in GAVI? The Bank has been a director on the GAVI Alliance Board/Committees, a small financial contributor, the trustee of several FIFs contributing financing to GAVI, a development partner at the global and country levels, and a recipient of GAVI funding to help implement certain GAVI activities.

Component 2: The World Bank's Roles in the Financial Management of GAVI

29. This component assesses the performance of the World Bank in the financial management of, with a focus on the innovative financial mechanisms, IFFIm and AMC. This topic is of special interest because innovative financing mechanisms enable the international community to respond to global health priorities by leveraging a variety of financial resources. The experience with these models will provide lessons applicable for other innovative financing mechanisms beyond the sector. The Bank was actively involved in the design and implementation of IFFIm and AMC. This component will take into account the recent external evaluation of IFFIm. It will also obtain the perspectives of both agencies (World Bank and GAVI) and donors contributing to IFFIm and AMC:

- 2a. What have been the World Bank's roles and performance in the financial management of innovative financing mechanisms that support GAVI (AMC and IFFIm)? How has the Bank promoted and facilitated the financing of GAVI? What was the Bank's role in setting up IFFIm and AMC? What value did the Bank add? What value does the Bank add in the day-to-day management of these two financing mechanisms? This includes a review of the Bank's roles and responsibilities as the AMC financial platform and as IFFIm's Treasury Manager, and an assessment of the degree to which these have been fulfilled by the World Bank.
- 2b. How essential or unique are the World Bank's roles in sustaining IFFIm and AMC? To what extent is the existence of these innovative financing mechanisms dependent on the Bank in their current structure and form? What are risks to the Bank from the roles that the Bank plays in IFFIm and AMC, and to what extent are these risks being appropriately identified and managed? What risks were identified at entry and what has the Bank learned from this?
- 2c. To what extent has the World Bank supported countries in the assessment of the sustainability of immunization funding and promoted the introduction of new vaccines? To what extent do the Bank's objectives in promoting country-level sustainability and observing fiscal space match those of GAVI?
- 2d. How has the World Bank promoted and assessed the affordability of vaccines at the global and country levels? To what extent do the World Bank's policies and sector work contribute to the advancement of affordable and sustainable vaccine prices?

Component 3: The World Bank's Roles as a Development Partner at the Global and Country Levels

30. This component assesses the performance of the World Bank as a development partner in GAVI. The content of this component is summarized by the following five evaluation questions:
 - 3a. How relevant is the World Bank to GAVI's activities at the global and country levels? That is, to what extent do the Bank's health sector objectives align with those of GAVI? What is the value added of the partnership in achieving these objectives over and above what the Bank could do alone with its own resources? This question is restricted to the Bank and GAVI. The relevance of the Bank to GAVI will **not** be compared with that of other GAVI partners.
 - 3b. How relevant is GAVI to the World Bank's activities at the global and country levels? That is, how relevant and useful is GAVI to the Bank in reaching the Bank's corporate, sectoral, and country health objectives?
 - 3c. What has been the experience of the World Bank and GAVI in working together at the global level in relation to initiatives such as the Health Systems Funding Platform and Joint Assessment of National Strategies? What has been the mutual experience of the Bank and GAVI in relation to the changing international aid architecture for health?
 - 3d. What has been the experience of the World Bank and GAVI in working together at the country level? Have there been synergies and substitution effects? To what extent

have Bank-supported immunization activities and maternal and child health activities complemented GAVI's immunization and other activities, and vice versa? What has been the extent and nature of this engagement at the country level? To what extent have there been operational linkages between GAVI and World Bank activities at the country level, such as ICC participation?

- 3e. What has been the World Bank's experience and performance as the executing agency of the Immunization and GAVI Program (ImGAVI) trust fund from 2007 to 2010? This includes an assessment of the degree to which the Bank has fulfilled the conditions and expectations outlined in the trust fund administration agreement and from GAVI.

4. Evaluation Design

31. Most review activities can be described as either data gathering or analysis. Primary data and information will be gathered as follows:

- Document review of the GAVI and World Bank strategies and operations in the health sector, including the role of the health sector in the Bank's country assistance strategies.
- Portfolio review of Bank's immunization-related health sector operations.
- Document review of GAVI and IFFIm Evaluation reports.
- Surveys and structured interviews of GAVI and Bank staff as well as recipient countries (Ministries of Health and Finance).
- Potential follow-up interviews, group discussions or focus groups for obtaining in-depth feedback on issues arising from interviews and surveys.
- Missions to UNICEF, the Gates Foundation, WHO, and other key partners to consult with their staff involved in GAVI operations.
- Missions to six countries in Africa and Asia.

32. This primary information will be analyzed using the following methodologies:

- Synthesis of a coherent, time-ordered sequence of legitimate policy information for GAVI and the World Bank from existing documentation (such as goals and objectives, and project cycle processes).
- Assessment of gaps/overlaps and matches/mismatches in GAVI's and the Bank's goals and objectives and project cycle processes.
- Spreadsheet analysis of the Bank's immunization-related project portfolio and of survey results.
- Qualitative analysis (category building, trend identification) of non-standardized interview and open-ended survey information.
- Synthesis, appraisal and triangulation of review findings, hypothesis building and testing.
- Feedback analysis: factual or logical errors, inclusion of new data.

33. The countries visited will be a purposive sample based on the following (not mutually exclusive) criteria: (a) countries that are pilot countries for the Health Systems Funding Platform, (b) countries where both GAVI and the World Bank have been active in the health sector since GAVI was founded in 2000, (c) countries in which there has been substantial

engagement (collaboration, complementarity, or consultation) between GAVI and the World Bank (based on prior desk reviews and interviews), and (d) countries to which the ImGAVI trust fund has provided technical assistance.

34. The visits will be focused on the Bank’s roles in GAVI and its engagement at the country level. To supplement the breadth of information obtained from desk reviews and interviews with task team leaders at the Bank, the country visits will provide in-depth information in answering evaluation questions 2c and 2d on sustainability, as well as questions 3a to 3e on the Bank’s performance as a development partner in the context of the Bank’s 2007 Health Sector Strategy. This stated that the Bank “looks forward to close collaboration in the implementation of country-led system strengthening efforts and knowledge generation with global financing partners including . . .GAVI,” and that “particularly on health systems, [the Bank] will substantially increase its strategic engagement with WHO, the Global Fund and GAVI, particularly in low-income countries.”¹⁶ These country visits will also be coordinated with and contribute to IEG’s upcoming evaluation of World Bank support to health systems strengthening as a core objective in the Bank’s 2007 Strategy.

Work Packages for Reviewing Evaluation Questions

35. The review activities are organized into 11 work packages (WPs). Two work packages are not directly related to answering evaluation questions, namely WP1 (Produce Approach Paper) and WP10 (Produce Final Report). All other work packages consist of data gathering and analysis activities that are directly linked to answering evaluation questions as indicated in the table below.

Work Packages	Evaluation Questions												
	1a	1b	1c	1d	2a	2b	2c	2d	3a	3b	3c	3d	3e
WP1. Produce Approach Paper	N/A												
WP2. Corporate governance roles and performance	X	X	X	X									
WP3. Financial roles and performance (IFFIm and AMC)					X	X							
WP4. World Bank relevance and risk to IFFIM and AMC						X							
WP5. World Bank support for assessing sustainability and affordability							X	X					
WP6. Mutual relevance of World Bank and GAVI									X	X			
WP7. Global-level engagement											X		
WP8. Experience of World Bank and GAVI in the changing international aid architecture for health											X		

16. World Bank, 2007, *Healthy Development: The World Bank Strategy for Health Nutrition, and Population Results*, pp. 46 and 62.

WP9. Country-level engagement													X	
WP10. Ex post review of ImGAVI trust fund												X	X	X
WP11. Produce Final Report	N/A													

Description of Individual Work Packages

COMPONENT 1: THE WORLD BANK'S ROLES IN THE GOVERNANCE OF GAVI

36. Evaluation questions 1a to 1d on the Bank's corporate governance roles and performance are addressed by WP2:

WP2. World Bank's corporate governance roles and performance

Data gathering	Identify and collect GAVI policy information describing the corporate governance roles and responsibilities of the World Bank and other board members
Analysis	Assess institutional performance in the World Bank's governance roles as: <ul style="list-style-type: none"> - Board director - Member of the Executive, Audit and Finance, and Programme and Policy committees, - DGF donor - Identifying and managing potential conflicts of interest among the Bank's multiple roles
Data gathering	Gather feedback from senior GAVI and World Bank staff and GAVI Board members on corporate governance performance and on how potential conflicts of interest have been managed and how good governance has been assured through: <ul style="list-style-type: none"> - Interviews with World Bank and GAVI staff and GAVI Board members - Online surveys
Analysis	Synthesize feedback on corporate governance performance, as well as on potential conflicts of interest

COMPONENT 2: THE WORLD BANK'S ROLES IN THE FINANCIAL MANAGEMENT OF GAVI

37. Evaluation question 2a on the Bank's roles and performance in IFFIm and AMC is addressed by WP3:

WP3. World Bank's roles in innovative financing mechanisms

Data gathering	Identify and collect GAVI information describing the roles and responsibilities of the World Bank with respect to innovative financing mechanisms
Analysis	Assess institutional incentives (for example in terms of administrative fees and overheads) in the Bank's roles as: <ul style="list-style-type: none"> - Treasury Manager of IFFIm - Financial platform for AMC
Data gathering	Gather feedback from GAVI and Bank staff and IFFIm Board members on performance and potential improvements of the Bank and on how potential conflicts of interest have been managed through: <ul style="list-style-type: none"> - Interviews with Bank and GAVI staff and IFFIm Board members - Online surveys

Analysis	Synthesize feedback on corporate performance and improvement options, as well as on potential conflicts of interest
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38. Evaluation question 2b on the relevance of the World Bank roles in IFFIm and AMC and on the associated risks to the World Bank is addressed by WP4:

WP4. Relevance of and risks to the World Bank in relation to IFFIm and AMC

Data gathering	Gather feedback from GAVI donors and recipients on the perceived relevance of the World Bank to IFFIm and AMC and on the risks to the Bank from the roles that it plays in IFFIm and AMC: - Interviews with donor and recipient representatives - Country visits - Online surveys
Data gathering	In addition to the information obtained in WP3, conduct selected interviews with senior Bank and GAVI staff on IFFIm and AMC
Analysis	Synthesize results from data gathering

39. Evaluation questions 2c and 2d on the World Bank's support for assessing the sustainability of immunization funding in countries and the affordability of vaccine prices at the global and country levels are addressed by WP5:

WP5. World Bank support for assessing the sustainability of funding and the affordability of vaccine prices

Data gathering	Identify and collect information from GAVI, the World Bank, and recipient countries assessing the sustainability of immunization funding and the affordability of vaccine prices
Data gathering	Gather feedback from Ministries of Health and Finance in selected participating countries through: - Country visits - Interviews with MOH and MOF officials in selected countries - Online surveys
Analysis	Synthesize results

COMPONENT 3: THE WORLD BANK'S ROLES AS A DEVELOPMENT PARTNER AT THE GLOBAL AND COUNTRY LEVELS

40. Evaluation questions 3a and 3b on mutual relevance of GAVI and the World Bank for each other are addressed by WP6:

WP6. Mutual relevance of World Bank and GAVI

Data gathering	Identify and collect relevant documentation on objectives, strategies of GAVI and the World Bank from: - Interviews with senior Bank and GAVI staff - Document search
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Analysis	<p>From these documents, identify and synthesize legitimate objectives and strategies of GAVI and the World Bank and their evolution over time</p> <p>Analyze their internal coherence</p> <p>Analyze gaps and overlaps, matches and mismatches in the objectives and strategies of GAVI and World Bank</p> <p>Analyze actual and potential synergies</p>
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41. Evaluation question 3c on World Bank-GAVI engagement at the global level and on the experience of the World Bank and GAVI in relation to the changing international aid architecture for health is addressed by WP7 and WP8.

WP7. World Bank-GAVI engagement at the global level

Data gathering	<p>Identify and collect relevant documentation on World Bank-GAVI engagement in the Health Systems Funding Platform and Joint Assessment of National Strategies from:</p> <ul style="list-style-type: none"> - Interviews with senior World Bank and GAVI staff - Document search
Analysis	<p>From these documents and interviews, identify the extent and nature of this engagement. Describe the objectives of these global initiatives, their achievements, and identify to the extent possible the contributions of the World Bank and GAVI to their achievements.</p>

WP8. Mutual experience of the World Bank and GAVI in the changing international aid architecture for health

Data gathering	Gather data on World Bank and GAVI contributions to official development assistance and other official flows in the health, nutrition and population sector.
Data gathering	In addition to information obtained in WP6 and WP7 above, conduct selected interviews with senior World Bank and GAVI staff on the World Bank's and GAVI's experience.
Analysis	Synthesize results from data gathering.

42. Evaluation question 3d on World Bank-GAVI engagement at the country level is addressed by WP9:

WP9. World Bank-GAVI engagement at the country level

Analysis	<p>Develop a conceptual framework for World Bank-GAVI engagement at the country level in relation to the opportunities for such engagement provided by:</p> <ul style="list-style-type: none"> - The Bank's corporate roles in GAVI (governance, financial management) - IHP+ and related initiatives - World Bank's and GAVI's own country-level activities - Analyze actual and potential synergies
Data gathering	<p>Identify and collect relevant documentation on the extent and nature of World Bank-GAVI engagement at the country level in terms of:</p> <ul style="list-style-type: none"> - Formulating health sector and immunization strategies - Designing immunization projects and other activities - Implementing immunization projects and other activities - Providing technical assistance to strengthen country-level capacity in relation to the above

Data gathering	Conduct selected interviews with - World Bank and GAVI task team leaders of country-level activities - Country-level stakeholders
Data gathering	Gather feedback from World Bank and GAVI staff on the existence and effectiveness of Bank-GAVI engagement at the country level through: - Country visits - Interviews with World Bank and GAVI task team leaders of country-level activities - Interviews with country-level stakeholders - Online surveys
Analysis	Assess relevance and effectiveness of Bank-GAVI engagement at the country level: - Assess the existence and the effectiveness of these engagements - Develop recommendations on how to increase the effectiveness of these engagements.

43. Finally, evaluation question 3e on ImGAVI trust fund is addressed by WP10:

WP10. Ex post review of the ImGAVI trust fund

Data gathering	Review trust fund disbursements Conduct selected interviews with senior Bank and GAVI staff on GAVI's and the Bank's experience with that specific topic.
Data gathering	Country visits. Pragmatically identify and collect corroborating data and information from GAVI, countries and the Bank
Analysis	Synthesize lessons learnt for this specific topic

5. Quality Assurance Process

44. Ali Khadr (IEG manager for Country, Corporate and Global evaluations) and Chris Gerrard (IEG Global Programs Coordinator) will supervise the work of the review team led by Bernhard Liese (Chair of the Department of International Health at Georgetown University School of Nursing & Health Studies).

45. Two other IEG staff members — Pia Schneider (HDN Coordinator) and Martha Ainsworth (Adviser) — will provide guidance and advice to the task team. They will provide advice based on their extensive knowledge of the World Bank's health operations, help to design surveys, and review drafts of the report, among other things.

46. The review of the draft report will follow normal IEG guidelines for sector evaluations, including two or three peer reviewers prior to the internal IEG review meeting for the draft report. Once cleared internally, copies of the draft GPR will be sent for review and comments to the two Bank units responsible for World Bank engagement with GAVI — the HNP Department, and the Multilateral Trustee, and Innovative Financing Department — and to other World Bank units that have responsibility for the Bank's involvement with global partnership programs.

47. Then the draft will be sent to the GAVI Secretariat for their review and comments. All comments received will be taken into account in finalizing the document, and the formal management responses from the World Bank and the GAVI will be attached to the final report.

48. The final GPR will be distributed to the Bank's Committee on Development Effectiveness (CODE) and discussed at a CODE meeting.

6. Expected Outputs and Dissemination

49. The principal output of this review will be a comprehensive review report with six chapters: an introduction, an overview of GAVI and the World Bank's roles, three substantive sections corresponding to the three major components of the Review, and a conclusion.

50. Following the CODE discussion, the review report will be published and posted on the IEG Web site for broader distribution.

7. Resources

Team and Skill Mix

51. A team of four persons (a team leader and three specialists) will prepare the present review under the supervision of Chris Gerrard, IEG Global Programs Coordinator. The capacity required for this GPR exceeds that required for most GPRs undertaken in recent years due to the high profile of GAVI, the need to collect information on the engagement of the Bank's health staff with GAVI-financed projects, and the importance of the strategic issues going forward.

52. The evaluation team will be led by Bernhard Liese, who has conducted several global program evaluations over the past few years, including the Stop TB Partnership and the German HIV/AIDS Strategy (Ministry of Economic Cooperation BMZ), as well as evaluations of international disease control efforts and a review of modalities of German development assistance in health.

53. Other team members include Calvin Siow, research assistant in the Department of International Health at Georgetown University, Moritz Piatti, Junior Professional Officer in IEG, and Anna Aghumian, consultant in IEG.

54. The work will be based at World Bank headquarters and Georgetown University in Washington, D.C.

Budget

55. The budget for this review is \$300,000 over two fiscal years. The Norwegian Agency for Development Cooperation is contributing financial support to part of this review.

Proposed Timetable

Item	Date
IEG one-stop review for the Approach Paper	May 2012
Comments on the Approach Paper from World Bank Management and GAVI Secretariat	July-August 2012
Submission of Approach Paper to CODE	September 2012
Data gathering and analysis as detailed above	September to December 2012
Country visits	October-November 2012
First draft	End of February 2013
IEG one-stop review	March 2013
Internal Bank review	April 2013
External review by GAVI	May 2013
Report finalized and distributed to CODE	June 2013

Annex A. The GAVI Alliance and the World Bank's Roles

Objectives and Activities

1. What is now called the GAVI Alliance (GAVI) is a partnership of public and private organizations that was launched in 2000 with a mission “to save children’s lives and protect people’s health by increasing access to immunization in poor countries.”¹⁷ GAVI’s ultimate goal is “to reduce the level of vaccine-preventable illness and death by at least two thirds compared to 2000 levels, thus achieving the Millennium Development Goal for child health”, by funding vaccine introduction programs, supporting the development of new and underused vaccines, and improving vaccine delivery by strengthening health systems.
2. At its inception, GAVI was described as the “quintessential informal public-private partnership” and was designed as an informal alliance of partners with a shared mission and a small Secretariat based at UNICEF’s office in Geneva. The governance structure was divided between GAVI on the programmatic side and the Vaccine Fund (later the GAVI Fund) on the financial side. The GAVI Fund was a US 501(c)(3) (non-profit) organization based in Washington, D.C. Over time, GAVI has become more formal with a more independent Secretariat in response to the increased number of responsibilities, programs, and the large inflow of resources. In 2008, GAVI was restructured to reflect its growing roles and independence, and became a legal entity in the form of a Swiss Foundation, located in Geneva.
3. The Gates Foundation and other donors have pledged more than US\$6.5 billion to GAVI during its first ten years,¹⁸ and pledged an additional US\$4.3 billion in June 2011. In turn, GAVI has committed \$7.2 billion and disbursed \$3.3 billion from 2000–11 (Table B-1) — providing assistance to 76 of the lowest income countries¹⁹ and immunizing more than 257 million children. The list of countries eligible for GAVI support is updated periodically, and 57 countries are eligible for support as of February 2012.
4. GAVI’s operations are based on five-year strategic plans that respond to the changing vaccine landscape but at the same time keep a focus on achieving GAVI’s mission. After ten years in existence and two strategic plans, the GAVI Alliance Board approved the current Phase III (2011–15) strategy in June 2010.

17. Cited from introduction to GAVI Second Evaluation Report.

18. GAVI Alliance, “Investing in immunization through the GAVI Alliance: The evidence base,” March 2010.

19. From www.gavialliance.org. Between 2000 and 2005, 75 countries were eligible for GAVI support. In 2006, the list was updated according to the eligibility criteria: Albania, China, Bosnia and Herzegovina, and Turkmenistan were no longer eligible; Kiribati became eligible, making a total of 72 countries eligible for support from 2006 onwards.

Table A-1. The GAVI Alliance: Disbursements, 2001–11 (US\$ millions)

	NVS	Vaccine Introduction Grant	ISS	INS	HSS	CSO	Operational Support	Total
2001	10.7	0.6	14.7	-	-	-	-	26.1
2002	76.9	4.1	22.2	9.4	-	-	-	112.6
2003	75.7	0.9	37.0	18.4	-	-	-	131.9
2004	115.0	0.7	59.1	22.9	-	-	-	197.6
2005	136.0	0.4	18.8	26.8	-	-	-	182.0
2006	151.3	0.6	43.7	12.3	-	-	-	207.8
2007	217.6	1.3	68.7	8.8	117.7	-	-	414.2
2008	274.0	11.3	18.9	5.3	121.4	5.8	-	436.7
2009	448.2	2.5	10.6	3.8	62.8	6.3	-	534.3
2010	388.4	3.6	4.9	-	40.7	2.6	-	440.2
2011	550.0	-	-	-	14.5	0.5	7.6	572.5
Total	2,443.8	25.7	298.5	107.8	357.2	15.3	7.6	3,255.8

Source: Retrieved on February 28, 2012, from www.gavialliance.org/results/disbursements.

Application and Approval Process

5. The GAVI Secretariat announces “funding windows” each year within which GAVI-eligible countries may apply for different types of program support.²⁰ To be GAVI-eligible, countries must have per capita GNI equal to or less than US\$ 1,520 in order to apply to any of the support programs.²¹ Only national governments can apply, and 5-year plan proposals are submitted by the Ministry of Health with signed approvals from the Ministry of Finance and the country’s Interagency Coordination Committee (ICC). The specific guidelines and proposal deadlines for each support program support, including eligibility and minimum requirements, are published on the GAVI Alliance Web site.

6. Once an application is submitted to the GAVI Secretariat, it is sent to the Independent Review Committee (IRC) for review. The IRC then recommends the country application to the GAVI Alliance Board using the following four categories: recommended for approval; recommended for approval with clarifications; recommended for approval with conditions; and recommended for resubmission. The GAVI Alliance Board or Executive Committee approves the IRC recommendation and a Decision Letter is sent to inform the country of the decision.

7. GAVI requires each country to set-up an Interagency Coordination Committee (ICC) to review and approve all applications, and monitor GAVI’s immunization related country activities for annual reports submitted to the GAVI Secretariat. The ICC is chaired by the local health ministry, and ICC members are from the government, CSOs, WHO, UNICEF,

20. GAVIAlliance.org. The deadline application submission for 2012 is August 31, 2012. Retrieved on May 8, 2012 from <http://www.gavialliance.org/about/gavis-business-model/putting-countries-in-charge/>

21. GAVIAlliance.org. GNI according to World Bank data for the latest available year. Retrieved on May 8, 2012 from <http://www.gavialliance.org/support/apply/countries-eligible-for-support/>

and partner agencies. In addition, countries must demonstrate that their funding proposals are integrated into the broader framework of their long-term health plans by submitting a comprehensive multi-year plan (CMYP) for immunization.²² Once approved by the GAVI Alliance Board, funds are then transferred to the country for implementation.

8. GAVI offers the following services to support immunization in eligible countries:
- New and underused vaccine support (NVS) provides assistance to developing countries to introduce new and underused vaccines and associated technology; countries co-finance the cost of GAVI-supported vaccines to ensure that they can eventually sustain their immunization programs without external support; countries also receive a one-time cash grant in the form of Vaccine Introduction Grant to support additional costs related to new vaccine introduction and to fund pre-introduction activities.
 - Injection safety support (INS) is associated with the NVS; GAVI typically funds auto-disable syringes and safety boxes together with the vaccines.
 - Immunization services support (ISS) provides flexible funding for countries to improve routine immunization services; this is performance-based on the number of additional children being immunized.
 - Health systems strengthening (HSS) provides funding to address barriers within the health systems to immunization access and maternal and child health services.
 - Civil society organization (CSO) support strengthens civil society engagement with regards to immunization and health services at all levels within the country.
 - Health Systems Funding Platform (the Platform) is intended to coordinate and streamline the various international resources for health systems strengthening among partners, donors and countries in order to better align with the country priorities.

Governance and Management

9. The GAVI Alliance started with a bifurcated governance structure with GAVI on the programmatic side and the Vaccine Fund (later the GAVI Fund) on the financial side.²³ After the first 2005 evaluation of GAVI, conducted by Abt Associates, the old GAVI Board and the GAVI Fund Board merged into what is now called the GAVI Alliance Board in October 2008. Other governance bodies include the IFFIm Board, the GAVI Fund Affiliate Board and the GAVI Campaign Board. In addition, GAVI transformed itself from an informal partnership hosted by UNICEF into an independent legal Swiss foundation in late 2008.

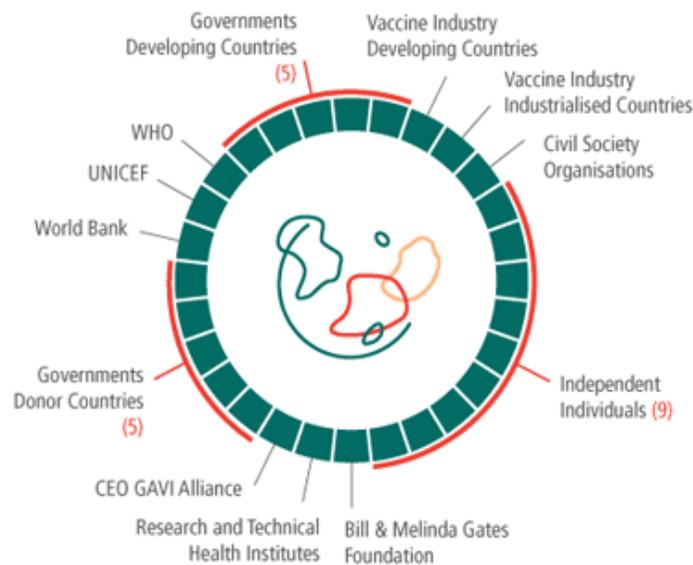
22. GAVI Alliance Guidelines for Applications New and Underused Vaccines Support 2012. Retrieved on May 8, 2012 from <http://www.gavialliance.org/library/documents/gavi-documents/guidelines-and-forms/gavi-nvs-application-guidelines-2012-en-final/>

23. Sophia Drewnowski, "Managing Change in Maturing Partnerships: Lessons Learned from CGIAR, EFA-FTI and GAVI," The World Bank. December 2009.

10. The current GAVI Alliance Board was the product of a merger between the old public GAVI Board and the private GAVI Fund Board in October 2008. After reviewing a management study that examined GAVI's administrative platform in 2007, the Boards designed a change-management plan in 2008 that took effect in January 2009. The new governance structure is intended to reflect the strengths of public-private partnership by bringing together financial and programmatic decision-making, streamline accountabilities, and provide operation efficiencies.²⁴ Amongst the changes to the governance structure, GAVI transformed from an informal partnership hosted by UNICEF into an independent legal Swiss foundation and administrative services were moved from UNICEF.

11. The **GAVI Alliance Board** is comprised of 28 seats and operates on the basis of a "hybrid stakeholder-corporate" model which includes representatives of donor and recipient governments, the private sector (including philanthropists and the financial community), vaccine manufacturers (from developed and developing countries), research and technical institutes, civil society organizations, and key multilateral organizations (Figure B-1). Permanent seats are held by the Gates Foundation, WHO, UNICEF and the World Bank. Aside from the four permanent members, Board representatives serve on a time-limited basis.

Figure A-1. GAVI Board Composition



Source: GAVIAlliance.org.

12. The pharmaceutical industry has two representatives on the Board, one representing the industrialized countries and the other reserved for the developing countries. The Board seat for developing country pharmaceutical industry is represented by the Developing Countries Vaccine Manufacturing Network (DCVMN), a voluntary alliance of 27 state-owned and

24. GAVI Alliance, Progress Report 2007, p. 64.

private companies from 14 countries.²⁵ The GAVI Alliance's pharmaceutical partners from industrialized countries are members of the International Federation of Pharmaceutical Manufacturers Association (IFPMA). The inclusion of the pharmaceutical industry as partners and on the Board reflects the "stakeholder" model approach; in addition, the pharmaceutical industry sits on two committees (Governance, and Programme and Policy). The pharmaceutical companies are also recipients of GAVI's funds through vaccine research and sales.

13. The Board is supported by six committees that oversee specific activities and development of key policies. The six committees are: Executive Committee, Programme and Policy Committee, Governance Committee, Investment Committee, Audit and Finance Committee, and Evaluation Advisory Committee. In addition to being a permanent, voting member of the Board, the World Bank sits on three committees (Executive, Audit and Finance, and Programme and Policy). The Bank also provides the financial platform for the AMC and serves as the Treasury Manager for IFFIm.

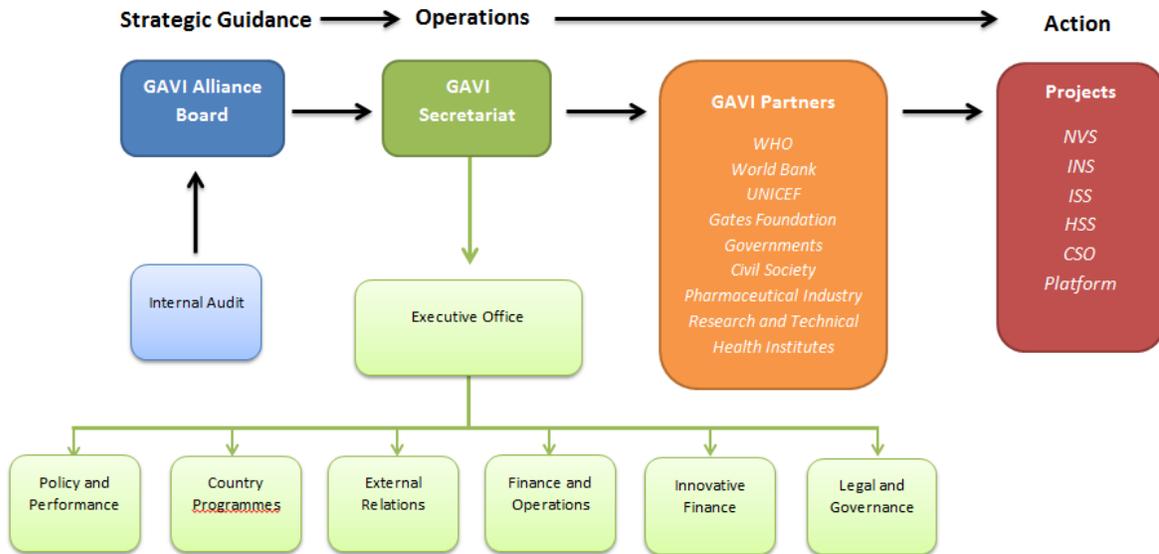
14. The *GAVI Secretariat*, with offices in Geneva and Washington, D.C., is led by the Chief Executive Officer — currently Seth Berkley — and is supported by seven teams (Figure B-2). The Secretariat is responsible for day-to-day operations, including mobilizing resources, coordinating program approvals and disbursements, developing policy, implementing strategic initiatives, monitoring and evaluation, legal and financial management, and administration for the GAVI Alliance Board and Committees.

15. The *GAVI Internal Audit* office was established in November 2009 to evaluate and strengthen risk management, control and governance processes in GAVI. The director of the Internal Audit office reports to the CEO and the Board. The work of the independent internal audit function extends to the Secretariat and to the programs and activities of GAVI's grant recipients and partners. The office also manages the Transparency and Accountability process.

16. The *Audit and Finance Committee* assists the Board in fulfilling its oversight responsibilities in respect to the accounting, financing, budgeting, and financial practices by reviewing financial information to be reported to GAVI donors and others, evaluating GAVI's systems of internal controls, and overseeing the audit process. The committee also assesses the organizational structure, mandate and operating budget of the internal audit function to ensure that these are appropriate and sufficient to meet agreed activities. The World Bank currently has a representative on the committee.

17. The IFFIm Board is composed of five directors and currently chaired by René Karsenti. The IFFIm Board is responsible for reviewing GAVI immunization program funding requests and ensuring proper disbursement of funds; arranging borrowing transactions to fund immunization programs; monitoring IFFIm's investment portfolio and liquidity; reviewing and approving IFFIm's annual report of the trustees and financial statements; overseeing IFFIm's governance and policies; and assessing IFFIm's efficacy as an innovative financing mechanism supporting international development.

25. From <http://www.gavialliance.org/about/partners/developing-country-vaccine-industry/> Retrieved October 27, 2011.

Figure A-2. GAVI Structure

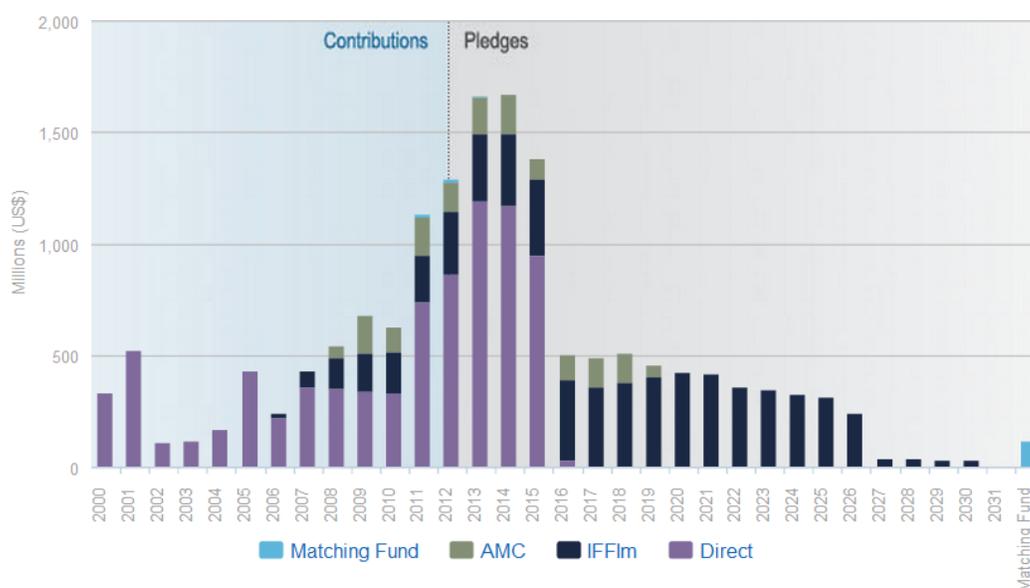
Source: GAVIAlliance.org

GAVI Financing

18. GAVI is funded by direct contributions from donor governments, the Bill and Melinda Gates Foundation, and private donations (Figure B-3). In addition, GAVI has developed three innovative aid financing mechanisms, the International Finance Facility for Immunisation (IFFIm), the pilot Advance Market Commitment for pneumococcal vaccines (AMC) and the GAVI Matching Fund, which advances the mission of GAVI. During the period 2000–11, GAVI committed US\$7.2 billion to 76 countries and disbursed US\$3.3 billion. At the June 2011 London pledging conference, GAVI received a further pledge of \$4.3 billion from donor countries, the Gates Foundation and other private donors to finance operations during Phase III. At the same time, the GAVI Matching Fund was launched as an innovative finance initiative to raise approximately US\$260 million by 2015 by having the private sector contribute US\$130 million and the UK Department of International Development and Gates Foundation match the private contributions by pledging £50 million and US\$50 million, respectively.

19. The International Finance Facility for Immunisation (IFFIm) is a United Kingdom charity that was launched in 2006 to pilot this innovative financing mechanism with GAVI as the implementing partner and the World Bank as the Treasury Manager (Figure B-4).²⁶ IFFIm raises funds from the international capital markets by issuing bonds, which are colloquially

26. HLSP, "Evaluation of the International Finance Facility for Immunisation (IFFIm)," June 2011.

Figure A-3. GAVI: Contributions and Pledges over Time

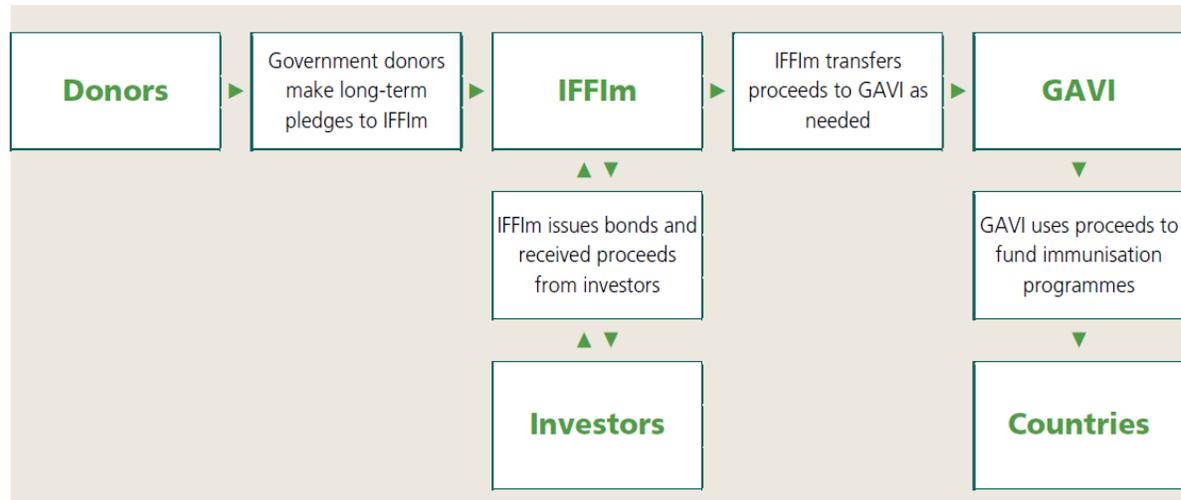
Source: GAVIAlliance.org

referred to “vaccine bonds” in many contexts. IFFIm’s assets are long-term, legally binding grant agreements from sovereign donors. The financial strength of IFFIm to repay the bonds is based on legally binding donor payments over a period of up to 20 years. The governments of the United Kingdom, France, Italy, Norway, Australia, Spain, the Netherlands, Sweden and South Africa, have provided grants totaling over US\$6.2 billion to IFFIm over a period of 23 years. IFFIm bonds have raised approximately US\$3.6 billion since the program’s inception and IFFIm has used the process to fund GAVI programmes and refinance.²⁷ In 2011, Brazil pledged US\$20 million to IFFIm, and is on track to become IFFIm’s tenth donor.

20. The *GAVI Fund Affiliate (GFA)* accepts funds from pledge agreements with sovereign donors and assigns these pledges to the IFFIm Company so that they can be securitized. GFA also approves funding of programs with IFFIm proceeds. GFA was established to keep IFFIm independent from the donors and to safeguard GAVI’s tax-exempt status. GFA is a registered in England and Wales as a company limited by guarantee. At the GAVI Alliance Board meeting held in November 2011, there was an on-going review process to analyze the legal, governance, accounting, and tax implications of amending the IFFIm transaction documents and subsume it within IFFIm or GAVI.²⁸

27. GAVIAlliance.org. Retrieved on February 28, 2011 from <http://www.gavialliance.org/funding/how-gavi-is-funded/innovative-finance/>

28. GAVI Alliance Board Meeting, Final Minutes, November 2011.

Figure A-4. IFFIm Process

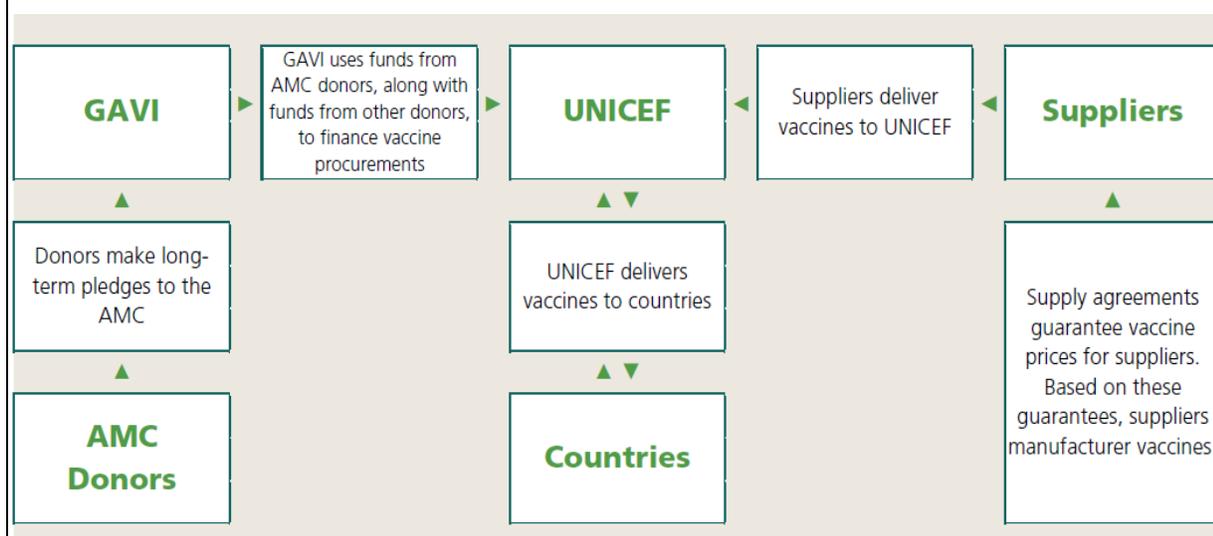
Source: GAVI Alliance Annual Financial Report 2010

21. The *pilot Advance Market Commitment for pneumococcal vaccines (AMC)* was launched in June 2009 with a US\$1.5 billion commitment from Italy, the United Kingdom, Canada, the Russia Federation, Norway and the Gates Foundation (Figure B-5). The aim of the AMC program is “to stimulate the development and manufacture of vaccines needed in low income countries” by providing financial incentives to vaccine manufacturers.²⁹ Donors commit funds to the AMC to subsidize the purchase of pneumococcal vaccines at an affordable price for developing countries thereby providing vaccine manufacturers with a long-term, guaranteed market price for the vaccines. The World Bank manages the AMC funds, which are on IBRD’s balance sheet, GAVI funds the vaccine purchase, and UNICEF procures the vaccines from manufacturers.

The Involvement of the World Bank Group in GAVI Alliance

22. The World Bank was one of the founding partners in the establishment of GAVI when the organization was started in 1999 as an informal alliance. Since then, the Bank has become deeply engaged with GAVI and plays three major roles in GAVI: (a) in the corporate governance of GAVI (b) as financial administrator of IFFIm and related trust funds, and the AMC; and (c) as development partner at the global and country levels.

29. Tania Cernuschi, Eliane Furrer, Susan McAdams, Andrew Jones, Johanna Fihman, Nina Schwalbe, “The pilot Advance Market Commitment for pneumococcal vaccines (AMC): Lessons Learnt on Disease and Design Choices and Processes,” GAVI Alliance White Paper, September 2011.

Figure A-5. AMC Process

Source: GAVI Alliance Annual Financial Report 2010

23. The GAVI Alliance is one of the five largest GRPPs in which the Bank is involved, along with the Global Fund to Fight AIDS, Tuberculosis and Malaria, the Consultative Group on International Agricultural Research (CGIAR), the Global Environment Facility (GEF), and the Global Partnership for Education.

24. As mentioned, the Bank is a permanent, voting member of the GAVI Alliance Board, a member of the Executive, Audit and Finance, and Programme and Policy committees, provides the financial platform for the AMC, and the Treasury Manager for the IFFIm. In particular, the Bank provides the IFFIm with the following services: “development and execution of market-based financing strategies and funding operations, multi-donor grant and payment tracking, liquidity and investment management, risk monitoring and asset-liability management and accounting and reporting.”³⁰ The Bank “helped design the AMC and took on AMC donor risk on its own balance sheet.”³¹ In addition, since GAVI’s inception, the Bank has been the Director on the previous GAVI Board, a member of several Working Groups and task forces, a small financial contributor through DGF grants, and executor of a small a Bank-executed trust fund established by GAVI at World Bank headquarters.

25. The Bank has been a development partner with GAVI at the global and country levels, in particular, through the International Health Partnership and related initiatives (IHP+), which was launched in September 2007 to accelerate progress in achieving all the health-related MDGs in accordance with the principles of the Paris Declaration and the Accra Agenda for

30. Drewnowski, p. 19.

31. World Bank Group, 2010, Trust Fund Annual Report, p. 31.

Action, with the Joint Assessment of National Strategies (launched in July 2009), and with the Health Systems Funding Platform (launched in early 2010). On the face of it, the Bank has been less involved with GAVI-supported activities at the country level than with Global Fund-supported activities (Tables B-2 and B-3).

Table A-2. References to GAVI in Country Assistance Strategies and Project Appraisal Documents, Fiscal Years 2001–11.

	Sub-Saharan Africa	East and the Pacific	Europe and Central Asia	Latin America and the Caribbean	Middle East and North Africa	South Asia	Total
Country Assistance Strategies	6	0	1	0	1	1	9
Project Appraisal Documents	18	1	2	1	3	5	30
Number of Different Countries ^a	13	1	3	1	2	3	23

a. Does not include countries in one regional project in Africa. (With the inclusion of regional projects, Africa would be 15 and the total would be 25.)

Table A-3. References to the Global Fund in Country Assistance Strategies and Project Appraisal Documents, Fiscal Years 2003–10.

	Sub-Saharan Africa	East and the Pacific	Europe and Central Asia	Latin America and the Caribbean	Middle East and North Africa	South Asia	Total
Country Assistance Strategies	23	2	13	6	0	1	45
Project Appraisal Documents	62	8	11	14	0	6	101
Number of Different Countries ^a	31	6	13	8	0	5	63

a. Does not include countries involved in 6 regional projects in Africa, 1 regional project in central Asia, and 2 regional projects in Latin America.

26. The Bank was the executing agency of the Immunization and GAVI Program (ImGAVI) trust fund from 2007 to 2010. Under the trustee agreement (signed in June 2007), the Bank received US\$10 million to assist with strengthening the capacity of the health system to deliver immunization and other health services in a sustainable manner, accelerate the uptake and use of underused and new vaccines and associated technologies and improve vaccine supply security, and increase the predictability and sustainability of long-term financing for national immunization programs.

27. The Bank contributed the following amounts to GAVI from 2002–07 through Window 1 of the Development Grant Facility (DGF).

Table A-4. DGF Contributions to GAVI, 2002–07 (US\$ millions)

Year	2002	2003	2004	2005	2006	2007
Amount	0.5	1.5	1.5	1.5	1.0	0.5

GAVI Evaluations

28. The first evaluation report, **Evaluation of the GAVI Phase 1 Performance**, was conducted by Abt Associates and assessed the period from 2000 to 2005. The evaluation commenced in November 2007 and the report was released in October 2008. The objectives of the evaluation were:

- To identify and learn from the successes and weaknesses of GAVI in Phase 1, including how well it has evolved and learned from experience over the period 2000–2005;
- To contribute to the refinement or adjustment of GAVI policies in the next strategic phase of work; and
- To document the impact and to evaluate the efficiency and effectiveness of the GAVI Alliance’s use of resources during Phase 1.

29. The most recent evaluation of the GAVI Alliance was completed in September 2010. Commissioned by the GAVI Alliance and conducted by Cambridge Economic Policy Associates (CEPA), the **Second Evaluation Report** assessed the period from GAVI’s inception to 2009, but primarily focused on the GAVI’s performance from 2006 to 2009. The Report commenced in December 2009 and was completed and presented to the Board in September 2010. The evaluation design sought to answer two high-level questions and was organized around GAVI’s four Strategic Goals:

- Question 1: To what extent has the GAVI Alliance met its four Strategic Goals (SGs)?
- Question 2: To what extent has the GAVI Alliance added value at the global and country levels, over and above what would have been accomplished without the Alliance?

- Strategic Goal 1: To contribute to strengthening the capacity of the health system to deliver immunization and other health services in a sustainable manner.
- Strategic Goal 2: To accelerate the uptake and use of underused and new vaccines and associated technologies and improve vaccine supply security.
- Strategic Goal 3: To increase the predictability and sustainability of long-term financing for national immunization programs.
- Strategic Goal 4: To increase and assess the added-value of GAVI as a public private global health partnership through improved efficiency, increased advocacy, and continued innovation

30. The GAVI Secretariat, on behalf of the IFFIm Board, commissioned an evaluation of IFFIm by HLSP. The **Evaluation of the International Finance Facility for Immunisation** Report was published in June 2011. The evaluation assesses the extent to which IFFIm has been an effective and efficient financing instrument to raise money for immunization and health systems in GAVI eligible countries, and the extent to which IFFIm has contributed to enhancing GAVI’s impact on immunization and health.