

Gavi Mid-Term Review (MTR) 2018 CSO Briefing and Social Media Toolkit¹

What Is the Gavi MTR?

Gavi organizes a mid-term review (MTR) meeting halfway through its five-year strategic period. The MTR provides a high-level overview of the Alliance's progress and challenges in this case for its <u>2016-2020 period</u>. Together, participants take stock of the Alliance's performance and set out a vision for the Gavi model and its future.

Over 200 participants are expected to travel to Abu Dhabi, including senior representatives from donor and Gavi-supported countries, partner organisations, civil society organizations, and innovators from the pharmaceutical industry and other sectors. The event will allow Gavi to forge new alliances with the private sector and adopt transformative solutions to advance the global immunisation agenda.

This year, the MTR will take place in the Abu Dhabi, United Arab Emirates (UAE) from Monday, December 10th to Tuesday, December 11th

Delivering on the 2016-2020 investment opportunities: High-level Event and Progress Report (Gavi MTR info page)

Key Messages

"Fulfilling the promise of immunization"

"Immunization, Coverage, and Equity"

Increased access to new and underused vaccines in the world's poorest countries is a significant achievement since the formation of Gavi in January 2000. This has been possible through the Alliance's partnerships with a focus on innovation, increased donor and domestic financing, and determination to reach every child.

Tragically, however, we continue to be off-track to achieve the goals set out by the Global Vaccine Action Plan (GVAP) 2020, which in practice means millions of families around the world still witness loved ones suffer illnesses, disabilities and even death from diseases that we have the knowledge and tools to prevent. Most of the unvaccinated children live in urban slums, underserved communities and fragile states which is deplorable.

¹ This toolkit was developed by Sabina Rogers, Yanira Garcia and Laura Kerr (ACTION Partnership) based on the Gavi CSO constituency statement

We recognise the transformative role Gavi has played in increasing access to immunisation. At the midpoint of the current strategy 2016-2020, and with targets in the Sustainable Development Goals (SDGs) for vaccines for all and universal health coverage, **now is the time to reflect on how to increase coverage and equity** for all recommended vaccines and enhance accountability for the commitments to immunisation we have all made.

The following are key areas of concern which Alliance partners, including civil society, have a responsibility to address

- Coverage and equity: too many children are still not being reached. Most efforts in the past decade have been focused on supply side support with limited investment in community engagement and demand creation. The Alliance must expand its understanding of who is being missed and why by partnering with non-governmental actors and national programs to engage with underserved communities and address vaccine hesitancy. The CSO Constituency is uniquely capable to support these efforts.
- Transition & Co-Financing: Gross National Income (GNI) is not an adequate indicator of a country's readiness to transition nor the functionality of its essential immunisation systems. The Alliance must expand indicators and develop systems to monitor transition processes and provide early warning when indicators are not being met. It is unacceptable for countries to transition if there are low or falling immunisation rates.
- Market Shaping: Not enough attention has been given to cultivating producers of biologicals, hence the very few existent suppliers for many priority vaccines (especially for rotavirus, HPV, Inactivated Polio Vaccine (IPV) and YF vaccines).
- Value for Money for countries and people: The CSO Constituency reminds Alliance Partners that the ultimate beneficiaries of Gavi support are infants, children, caregivers, families and communities more broadly. If vaccination programs are to be successful, it will be through voluntary participation (i.e. spontaneous demand) from families and their willingness to seek out vaccination services for their family members. This demand has a cost: TIME. Lost work-hours, transportation, security risks, etc.
- Delivering the goals of the GVAP are **an essential and urgent** priority for global health which can be achieved through a strong Gavi replenishment.
- Immunization systems help build strong and resilient health systems, which are essential for disease control, quick emergency responses, improved public health, and the achievement of universal health coverage. Immunization is currently **not reaching its full potential** and we risk missing out on this vital opportunity to improve global public health and reduce preventable deaths if progress continues to stall.

Call to Action

- Coverage and Equity: The Alliance needs to expand efforts to understand who is being missed and why by supporting national efforts and non-governmental actors to engage with underserved communities. Invest in support for community-based organization to support of immunization in underserved communities
- Transition and Co-financing: Comprehensive systems should be developed to monitor the transition processes (including simultaneous transition from other health funders) and provide early warning to all relevant stakeholders when indicators are not being met. Improve Gavi

transition policy to consider indicators beyond GNI including, immunisation coverage rates across all 11 WHO recommended vaccines, vaccine introductions, health systems strength, long-term programmatic and financial sustainability, current size of the country's health budget and fiscal space for increased health financing and the impact of simultaneous transition

- Civil Society as a Joint Partner: Improve and increase independent support for CSOs to support service delivery and programme implementation in fragile states and humanitarian emergencies, to foster demand creation at the community level, and to hold stakeholders accountable
- Value for Money: Gavi policies include and prioritize the needs, concerns and values of countries and vulnerable communities. The concept of value for money should be broadened beyond the four "E"s (effectiveness, efficiency, economy and equity), to include ethics, attributes of vaccine delivery platforms, contribution to UHC, and role of partners and industry
- **Reflect on the Gavi Model:** Consider the strengths and weaknesses of the current model, especially balance between supply and demand and adjust it to place country stakeholders at the center
- Coordination and Alignment for Immunization and UHC: Seize the opportunity of global momentum, the development of the SDG3 Action Plan and the high-level meeting on UHC taking place in 2019, to align objectives and channel efforts towards achieving UHC and reaching SDG3. The Alliance should catalyze Gavi-supported countries to invest in strengthening and sustaining PHC systems in reach of all children by ensuring all immunization efforts are aligned with national plans, and are built on strengthening healthcare systems to increase coverage and equity. Only by developing links to other health programs will we make progress towards UHC

Key Facts about Immunization

- Despite progress on new vaccine introduction, progress in reaching all children has stalled.
 1 in 10 children still receive no vaccines.
- Less than 10 percent of children in the world's poorest countries receive all 11 WHO recommended vaccines, leading to 1.5 million deaths each year in children under age 5. An estimated 19.5 million children under the age of one-year didn't receive DTP3 vaccine. Around 60% of these children live in 10 countries: Angola, Brazil, DRC, Ethiopia, India, Indonesia, Iraq, Nigeria, Pakistan and South Africa
- Immunization currently prevents between 2-3 million deaths every year in all age groups.
- Immunization is one of the most successful and cost-effective public health interventions. More children are being immunized than ever before. During 2016, an estimated 116.5 million (86%) children under age 1 received three doses of DTP3 vaccine

Click here for more Immunization facts

What Can You Do?

This is a critical moment for civil society to share their statements. CSOs in-country work has huge impacts in service delivery, technical assistance, community outreach and accountability.

The MTR is an opportunity for CSOs to raise their united voice, essential to ensuring Gavi's efforts have the biggest impact in the remainder of the 2016-2020 strategic period and looking forward to the Gavi 5.0 strategy. To do this, help us by sharing our messages and thoughts on Twitter/Facebook and other social media outlets. Please see below for suggestions!

Key social media links

GAVI	GAVI CSO Steering Committee	Additional Resources
 GAVI MTR 2018 report https://bit.ly/2Q53uEw Gavi MTR Information page: https://bit.ly/2P9Dd2e Gavi 2017 Progress Report: https://bit.ly/2PZaSkA 	 Gavi and CSO collaboration overview: <u>https://bit.ly/2rigXtP</u> Immunization Advocates stories: <u>http://gotlife.gavi.org/</u> Gavi CSO Statement: <u>http://bit.ly/2QLtvlj</u> Gavi CSO Statement (French): http://bit.ly/2UvIHs5 	 GVAP: <u>http://bit.ly/GVAPinfo</u> Decade of Vaccines: <u>http://bit.ly/10yrsVax</u> SAGE Assessment Report 2018: <u>https://bit.ly/1wzZKHO</u> Transition: Progress in Peril? <u>https://bit.ly/2PbSvUs</u> A Balancing Act: <u>https://bit.ly/2iaCTTo</u>

Gavi MTR hashtags

	Primary	Secondary
Event-specific	#GaviMTR	
Issue	#VaccinesWork #ForEveryChild #Immunizations	#EveryLastChild #EndPolio #HealthofAll; #PrimaryHealthCare
Day-specific, e.g.:	#MondayMotivation #TuesdayThoughts	

Sample posts

Post	Characters left for # and @	Make sure to include	
Key messages for CSOs (use hashtags as appropriate)			
1 in 10 children around the world are still at risk from #vaccine preventable diseases. @GAVI must double efforts to increase equitable coverage and civil society can help. Together we can reach #EveryLastChild. Find out more HERE: http://bit.ly/2QLtvlj	231 + URL		
Find out how we can fulfil the promise of immunization for #EveryLastChild. Read the recommendations from @GAVICSO Constituency Statement. Read: http://bit.ly/2QLtvlj	148 + URL		
As more countries transition from @GAVI support we must move beyond #GNI indicators. A growing economy is not proof that children are receiving the vaccines they need #ForEveryChild	181		
Less than 10 percent of children in the world's poorest countries receive all 11 WHO recommended vaccines. @GAVI must strive for #vaccine equity, let's find out who is being missed and why.	190		
Now is the time for increased coordination and collaboration to align objectives and channel efforts towards achieving #UHC and reaching #SDG3. @GAVI must ensure all immunization efforts are strengthening national health systems. #HealthofAll; #PrimaryHealthCare	262		
The MTR is an opportunity (use hashtags as appropriate)			
The @GAVI #MTR is an opportunity to reflect on the #GAVI model ensuring that children's health and country stakeholders remain at the center of @GAVI.	151		
Let's not miss out on this #MTR opportunity to improve #vaccine markets and cultivate more producers of biologicals 2 reduce preventable deaths and expand coverage.	165		
19.9M infants were not vaccinated in 2017, most of these children live in the poorest, most marginalized communities. @GAVI, let's engage with all stakeholders, including non-GOV actors, to support immunization in underserved communities.	239		
The world's commitment to immunization is not reaching its full potential if progress continues to stall @GAVI must	116		

Post	Characters left for # and @	
The average global immunization rate has only increased by 1% since 2010, as we celebrate @GAVI successes during #MTR let's also reflect on challenges	150	
Immunization is the building block of #PHC and a roadway to #UHC, @GAVI let's use this #MTR to continue building cross sectoral linkages as a key to #UHC	153	
Key facts about immunization (use hashtags as appropriate)		
Less than 10 percent of children in the world's poorest countries receive all 11 WHO recommended vaccines.	107	
#Vaccination gaps lead to 1.5 million deaths each year in children under age 5	78	
An estimated 19.5 million children under the age of one-year didn't receive DTP3 vaccine. Around 60% of these children live in 10 countries: Angola, Brazil, DRC, Ethiopia, India, Indonesia, Iraq, Nigeria, Pakistan and South Africa	230	
Immunization is one of the most successful and cost-effective public health interventions.	90	
Immunization currently prevents between 2-3 million deaths every year in all age groups.	88	
More children are being immunized than ever before. During 2016, an estimated 116.5 million (86%) children under age 1 received three doses of DTP3 vaccine	155	

Social media images

<u>Download images from Dropbox</u>. (All images used with permission.) **Do not** "save as" these thumbnail images as they will not be full size and resolution.

Banners for Twitter and Facebook



Fulfilling the promise of immunization #ForEveryChild

#GaviMTR

Gavi CSO Constituency for Immunisation and Stronger Health Systems Helping to reach Every Child with Immunisation and Health Services

Twitter



Fulfilling the promise of immunization #ForEveryChild • #GaviMTR

Gavi CSO Constituency for Immunisation and Stronger Health Systems Helping to reach Every Child with Immunisation and Health Services

Pinned post on Facebook

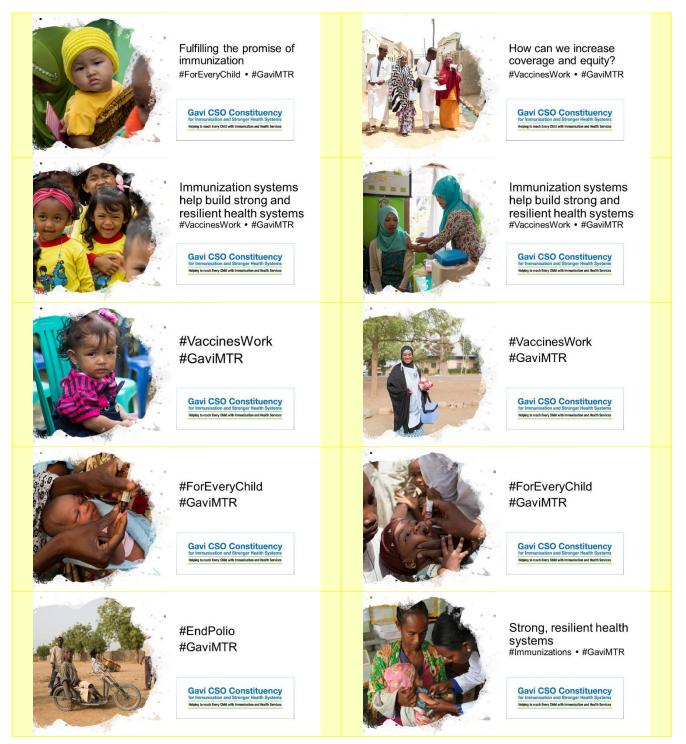


Pinned post on Twitter



Twitter

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#ForEveryChild • #GaviMTR

Social media images here on Dropbox: ACTION > Externally Shared Files > 2018 Gavi MTR SMT

Facebook/Instagram

Do not "save as" these thumbnail images as they will not be full size and resolution.





Key social media accounts

Vaccine/immunization-related

Person or Organization	Twitter Handle	Followers
Global Goals	GlobalGoals	
AAP	@AmerAcadPeds	
Brunswick Group	BrunswickGroup	1,136
CDC	CDCgov	790,000
CDC Global Health	CDCGlobal	118,000
Dr. Anne Schuchat (Dir.)	CDCDirector	108,000
Eureka Strategies	EurekaStrategy	220
Gates	gatesfoundation	1,800,000
Bill Gates	BillGates	34,300,000
Melinda Gates	melindagates	1,070,000
Gavi	gavi	56,600

Person or Organization	Twitter Handle	Followers
Gavi CSO	GaviCSO	141
Seth Berkley (CEO)	GaviSeth	27,700
Global Health Strategies	GHS	11,600
Global Partnership	GPforEducation	87,900
Global Citizen	GlblCtzn	254,000
Graca Machel Trust	G_MachelTrust	6,523
IFRC	Federation	154,000
Elhadj As Sy (SG)	As_SylFRC	3,876
IFRC Africa	IFRCAfrica	4,038
IFRC Asia Pacific	IFRCAsiaPacific	4,289
IFRC MENA	IFRC_MENA	3,037
IFRC Americas	IFRC_es	8,511
JHPIEGO	Jhpiego	20,500
JHPIEGO Innovation	InnovateJhpiego	1,259
Leslie Mancuso (P&CEO)	JhpiegoCEO	450
JHU	JohnsHopkins	64,300
JHU Public Health	JohnsHopkinsSPH	427,000
JHU Medicine	HopkinsMedicine	445,000
JSI	JSIhealth	17,500
Lions Club	lionsclubs	42,500
MSF International	MSF	91,300
MSF USA	MSF_USA	945,000
MSF Access Campaign	MSF_access	15,300
NIH	NIH	760,000
NIH Office of Disease Prevention	NIHprevents	16,500
Francis S. Collins (Dir)	NIHDirector	70,900
ONE	ONECampaign	1,620,000
Tom Hart (N.Amer ED)	Tom_at_ONE	1,164
PATH	PATHtweets	42,000
Steve Davis (P&CEO)	SteveDavisPATH	18,400

Person or Organization	Twitter Handle	Followers
PATH Advocacy	PATHadvocacy	2,894
R4D	results4dev	6,739
Rotary	Rotary	317,000
John Hewko (GS)	JohnHewko	17,600
Sabin	sabinvaccine	6,216
Save the Children	save_children	23,000
STC US	SavetheChildren	2,610,000
Carolyn Miles (P&CEO)	carolynsave	40,700
STC UK	savechildrenuk	168,000
Kevin Watkins (CEO)	KevinAtSave	4,338
STC Campaigns	SC_Campaigns	7,297
Speak Up Africa	SpeakUpAfrica1	1,823
UN	UN	87,800,000
UN Foundation	unfoundation	507,000
UNICEF	UNICEF	6,010,000
UNICEF USA	UNICEFUSA	372,000
UN Women	UN_Women	1,130,000
Phumzile Mlambo (ED)	phumzileunwomen	62,700
USAID	USAID	631,000
USAID Global Health	USAIDGH	135,000
Village Reach	VillageReach	2,080
WHO	who	3,520,000
Women Deliver	WomenDeliver	83,300
End Polio Now	EndPolioNow	44,700