CSO Constituency Participation at the July 2011 GAVI Alliance Board Meeting

7-8 July, 2011 Geneva, Switzerland SUMMARY REPORT

Orientation

This report provides an overview of the GAVI CSO Constituency's participation in the Alliance's July 2011 Board meetings in Geneva, Switzerland. It is organized according to the Board meeting agenda and reflects the interventions of Faruque Ahmed, GAVI CSO Constituency Board Representative from BRAC, as supported by GAVI CSO Constituency Board Alternate, Alan Hinman of the Task Force for Global Health, and wider Constituency Steering Committee (SC) input, collected during the GAVI CSO SC meeting immediately prior to the GAVI Board meeting. Only agenda items in which the CSO Constituency intervened are included in this report.

Constituency members observing the Board meeting included incoming Board Alternate Joan Awunyo-Akaba of Future Generations International, Marco Gomes of the Centre for Health Policy and Innovation, Adenike Grange of the International Pediatric Association, Sharmin Zahan of BRAC (special advisor to Faruque) and Amy Dietterich, GAVI CSO Constituency Communications Focal Point and special advisor to Alan as incoming CSO Board member.

Board decision text appearing **in bold** signifies initiatives and changes to language specifically requested and supported by the CSO Constituency. Where Board members made comments relating directly to civil society, these are also captured.

Agenda Item 02: CEO's report (for information only)

Presented by Helen Evans, Interim CEO

<u>Item summary:</u> Helen outlined the Board Meeting agenda and summarized the Alliance's recent successes, including at the London Pledging Conference. She highlighted key decision points for the two-day Board meeting on cash-based support, cash programme risk management and pentavalent support for India. In addition, she summarized key themes for discussion and guidance including accelerating vaccine roll-out and reach, and performance and risk management.

<u>Constituency intervention:</u> Faruque made the following points on behalf of civil society during the open discussion following Helen's remarks:

- The report emerging from the London Pledging Conference specifically mentions advocacy efforts by Save the Children, ONE.org and RESULTS. Each of these organisations is a member of the CSO Constituency, which collectively played a large role the world-over in mobilizing support for the Alliance in the lead up to the Pledging Conference, including via the Call To Action in Support of the GAVI Alliance, signed by more than 170 organisations. CSOs view the success of the London Pledging Conference as a shared one, supported by the Constituency.
- CSOs can play a key role in GAVI's in-country, on-the-ground presence. GAVI has already called on CSO Constituency members for country information (ex: in Malawi). Working with in-country CSOs will be particularly important in fragile states, where GAVI may need to look for funding-release mechanisms other than the government.

Board decision: N/A—the item was for information only.

Agenda Item 03: Report From the 2011 Pledging Conference (for information only)

Presented by Joelle Tanguy, MD, External Relations

<u>Item Summary:</u> Joelle reviewed the results of the GAVI Pledging Conference, during which donors committed US\$4.3 billion and the Alliance achieved an expanded donor base. Joelle discussed success factors involved in the pledging event and identified CSO engagement as one of the crucial elements, observing that GAVI CSO engagement was scaled up in record time and thanking the 175 signatories to the CSO Call to Action. Joelle then outlined next steps in the resource mobilisation agenda, including a 2012 partners' forum, the Decade of Vaccines, and a Summit to be hosted by the US examining whether countries have honored their pledges.

<u>Constituency intervention:</u> Faruque made the following points on behalf of civil society during the open discussion following Joelle's remarks:

- Faruque thanked both Joelle and Rajeev on behalf of CSO constituency and reminded the Board of the contribution of both Southern and Northern CSOs in GAVI's resource mobilization process. He pointed out that unfortunately, in presentations and reports describing the success of the Pledging Conference, only Northern CSOs' names were mentioned, while the Southern CSOs were missed.
- Faruque stated that with more support, CSOs can contribute even further to GAVI's mission. It will be increasingly important to set up a funding mechanism for CSOs working at the country level.

Also during the discussion period, Rajeev Venkayaa, GAVI Board member representing the Bill and Melinda Gates Foundation, advocated for the importance of involving and properly resourcing CSOs at the country level.

Board decision: N/A—the item was for information only.

Agenda Item 06: India Pentavalent Programme (for decision)

Presented by Mercy Ahun, MD, Programme Delivery

<u>Item summary:</u> The Government of India requested to extend the deadline to submit a satisfactory plan to introduce DTP-HepB-Hib in additional states until 31 December, 2011.

<u>Constituency intervention:</u> Faruque on behalf of civil society supported the request for extension with a clear deadline for progress.

Board decisions: The Board:

- Decided to extend the deadline for the Government of India to submit the Introduction Plan to a date to be agreed by the PPC-appointed Task Team on Large Countries (India and Nigeria), enabling the Task Team to take the Introduction Plan into account in its recommendations to the Board at its next meeting in November 2011; and
- Requested the Secretariat to develop a policy on time limits for the commencement of approved programmes in country, including principles for handling exceptions, and to present it to the Board for consideration at its meeting in November 2011.

<u>Agenda Item 07: Accelerated Vaccine Introduction— progress report (for discussion)</u>

Presented by Jon Pearman, Director, AVI, Policy and Performance

<u>Item summary:</u> Jon provided an update on the current roll-out of Pneumococcal and Rotavirus vaccines as well as planned future and forecast roll-outs. He then focused on progress made towards building a platform for new vaccine introduction and evidence-based decision-making. During the comments period, the Minister of Health from Rwanda, Dr. Agnes Binagwaho, discussed her country's experience in rolling out HPV vaccine, saying that although the country does not have optimum infrastructure for HPV vaccine roll-out, thanks to the tremendous efforts of community health workers, the country was able to vaccinate 90% of its target population within three days.

<u>Constituency intervention:</u> Faruque built on the Rwanda example to remind the Board of the important role that CSOs play in-country, including delivering new vaccines. He then made the following points:

- Civil society welcomes the availability of these new lifesaving vaccines while recognizing that they pose new challenges in cost, schedule, storage, transport and surveillance.
- Civil society believes that the cold chain assessment undertaken to date is not sufficient. The WHO assessment of cold chain is only at national level, and we know that information does not reflect the true capacity of countries. Information on cold chain capacity at the sub-national level is needed.
- Civil society urges the Board to recognize that health systems need significant strengthening in order to support Rotavirus vaccine introduction. In addition, the vaccine industry must improve the presentation of Rotarvirus vaccine so that it's relevant for developing-country environments.
- Civil society looks forward to supporting the introduction of these new vaccines, particularly through our community-based CSO members, and to working with UNICEF and the newly developed Communications Framework at the country level, as well as on related advocacy issues.
- Civil society strongly recommends that surveillance systems be improved. In addition, support is needed to further improve data quality.

Following Faruque's comments, Board member Cristian Baeza from the World Bank commented that it is important to remember that it is not GAVI who is launching these new vaccines, it is the countries. New vaccine introduction is country led.

Board decision: N/A—the item was for information only.

Agenda Item 08: Cash Based Support (for decision)

Presented by Paul Fife, Chair, Cash-based Support Task Team and Board member representing donor countries Ireland, Norway and the U.K; and Nina Schwalbe, MD, Policy and Performance

<u>Item summary:</u> The Cash Based Support discussion was the liveliest debate during the GAVI July Board Meeting. The Board had requested that a cash-based support task team be formed to oversee the development of a comprehensive approach for cash-based support to countries, including a strategy for countries that are below 70% DPT3 coverage, or have declining or stagnating coverage. The task team suggested several bridging mechanisms in the run up to full HSFP roll-out, including via the HSS common form, ISS extensions and extensions of type-B

support to CSOs. For countries with less than 70% or stagnating/declining coverage, it was suggested that focused analytical work was needed to establish reasons for low or declining coverage. An analysis is currently underway.

Civil Society was mentioned many times during the presentation and ensuing comments period. Paul highlighted that civil society had offered to help the Alliance address constraints at the country level. He also underscored the role of local leadership and capacity in a country.

<u>Constituency intervention:</u> during the discussion period, Faruque made the following points on behalf of the CSO constituency:

- Civil Society is pleased that the PPC recommendation of extension for type B (bridge funding US\$ 7,214,100) is being considered. But we want to be clear that this is not progress, it is merely continuing to fund the very few countries that were previously receiving support under this mechanism. Children from the other 46 countries are still not benefitting from well-supported CSO engagement.
- Faruque pointed out that there was an error in the Board paper and that the decisions of the May PPC were not properly transcribed.
- There has been considerable acknowledgement of the important role of Civil Society in meeting GAVI's goal. Yet, since the formation of the GAVI Alliance, less than 1% of GAVI support has gone to CSOs, and that has gone to only 10 GAVI countries. Additionally, this funding has gone through Ministries of Health, which in many countries do not work closely with CSOs.
- Civil Society believes that the evaluation Type A and B support is too narrow as it only looks at two funding mechanisms, rather than examining the broad range of roles that CSOs play in advocacy, service delivery and as a watch dog. Consequently, the CSO Constituency would like to propose that the Board ask the Secretariat to prepare a paper assessing the pros and cons of various approaches to resourcing civil society, including direct funding to be presented in the PPC at its meeting in the September and to the Board in November.
- The CSO Constituency has given significant amounts of input on the development of HSFP systems via Secretariat channels, but does not feel that this has been incorporated into the present iteration of the HSFP. Hence, we request that the Secretariat present to the Board a regular update on how it is "systematically" involving CSOs and the CSO Constituency in the HSFP. For example, on the GAVI Board Action Sheet, item 10 ("GAVI should engage more proactively with civil society in administering the HSFP"), the CSO Constituency would like a more detailed update on actions taken.

Following Faruque's comments, Rajeev Venkayaa, GAVI Board member representing the Bill and Melinda Gates Foundation, recommended instituting a standing task team on cash-based support. Paul Fife commented that civil society plays a number of different roles at the global and local level, including in service delivery.

Board decisions: The Board:

- Requested the Secretariat to continue working with partners to roll out the Health Systems Funding Platform (the "Platform") in a manner which ensures that the immunization outcomes are clearly articulated in accordance with country demand, including assessing and addressing associated risks;
- Requested the Secretariat to develop options for performance incentives for GAVI's cash based support through the Platform in coordination with the design of the Incentives for Routine Immunisation Strengthening (IRIS) pilot;
- Requested countries and their partners to carry out an analysis to establish the main
 reasons why countries have DTP3 coverage rates below 70 percent; why some countries
 have coverage rates stagnating at low levels; and why some countries have seen declines
 in coverage over time. The aim of this analysis is to inform the design of targeted and
 enhanced support, including investment options, to this group of countries to improve
 coverage;
- Requested the Secretariat to work with the Programme and Policy Committee (PPC) to develop a mechanism for ongoing technical input from partners on the design and implementation of cash based programmes;
- Endorsed the bridging mechanism for Immunisation Services Support (ISS) set out in Annex 2 to the report to the Board on Cash Based Support, Doc 08;
- Approved an amount of US\$ 7,214,100 for extensions for countries already receiving "Type B" support for civil society organizations (the "Type B Support Amount") and delegated to the Secretariat the authority to approve such extensions up to the Type B Support Amount in accordance with the process set out in Annex 3 to the report to the Board on Cash Based Support, Doc 08. Should there be a need for further extensions beyond this approved amount, a further request for bridge funding for Type B support will be submitted to the Board for consideration;
- Requested the Secretariat, concurrently with the evaluation of CSO support in 2011, to review options for direct support to CSOs for service delivery and advocacy and submit to the PPC for its recommendation to the Board. In the meantime, systematically promote CSO engagement through the Platform in those countries due to receive all forms of GAVI support; and
- Endorsed the transitioning arrangements from existing GAVI Health Systems Strengthening (HSS) support to the Platform as set out in Annex 4 of the report to the

Agenda Item 09: Cash Programme Risk Management (for decision)

Cees Klumper, Director, Internal Audit

<u>Item summary:</u> Cees gave an overview of the Alliance's current cash programme risk prevention measures and recommendations for improvement. Proposed strengthening measures include increased engagement of Country Responsible Officers at the programme level; more frequent programme reporting; involvement with external auditor appointments; establishing a central reporting hotline; and permanently positioning the TAP function in Internal Audit.

<u>Constituency intervention:</u> Faruque expressed civil society's support for the proposed risk management measures. He also suggested that civil society at the country level could offer support to GAVI's risk management measures in their role as watchdogs.

Board decisions: The Board:

- Requested the Secretariat to more actively engage Country Responsible Officers ("CROs") in the area of fiduciary risk, including, through more frequent visits to implementing countries;
- Requested the Secretariat to engage in more frequent review and follow-up of programme reporting through its CROs and the Transparency and Accountability Policy ("TAP")Team;
- Requested the TAP team to be more actively involved in the selection of the cash support programmes and external auditors and in the determination of their Terms of Reference;
- Requested the Secretariat to examine the possibility of establishing a central confidential reporting hotline;
- Approved permanently positioning the TAP function within Internal Audit and in consultation with the Audit and Finance Committee update the Internal Auditor Terms of Reference accordingly; and
- Requested the Secretariat to implement this resolution with a high degree of priority to avoid unnecessary risks, also considering that implementation will take some time and that total GAVI cash support is increasing.

Agenda Item 13: Committee Chair Reports (for information)

Committee Chairs

<u>Item summary:</u> Bernhard Schwartländer, Chairman of the Evaluation Advisory Committee, in his report stated that the current approach to evaluating type A and B funding is incomplete and that there must be wider discussions on how the Alliance works with civil society at the country level.

Following the Committee Chair reports, there were a number of comments from Board members that are of interest to the CSO Constituency:

- Rajeev Venkayaa, GAVI Board member representing the Bill and Melinda Gates Foundation, suggested that each Alliance partner should have metrics against which their performance is measured.
- Dagfinn Høybråten, Chair of the Alliance Board, commissioned incoming CEO Seth Berkley to look at the nature of Alliance partnerships, suggesting that the Alliance has been tending too much towards a contractual model.

Current Civil Society Board Member Faruque Ahmed's term ended with the July Board Meeting. The new Civil Society Board Member, Alan Hinman, will begin his term effective immediately until 31 July, 2013. Joan Awunyo-Akaba will serve as the Alternate Board Member to Alan during his term.