



Gavi impact in Africa since 2000




Gavi's mission is to save lives and protect people's health by increasing equitable and sustainable use of vaccines. Our work is driven by country needs and priorities. Gavi supports countries to strengthen primary health care through innovative partnerships that address challenges of access to immunisation, including gender-related barriers.

By improving access to new and under-used vaccines for millions of the most vulnerable children, Gavi, the Vaccine Alliance is transforming the lives of individuals, helping to boost the economies of countries and making the world safer for everyone. By leveraging the strength of the Vaccine Alliance to improve child health and primary health care (PHC), we are working in support of the African Union (AU) Agenda 2063 and the Sustainable Development Goals (SDGs).

Gavi's support helps improve global health security by reducing the risk of infectious disease outbreaks that have epidemic and pandemic potential. Crucial to this engagement is Gavi's support for emergency vaccine stockpiles to protect against the epidemic-prone diseases cholera, Ebola, meningococcal meningitis and yellow fever.

Overview: Gavi portfolio in Africa (2000–2020)


 **40** country partners

 **9** vaccines introduced in multiple countries: human papillomavirus (HPV), inactivated polio vaccine (IPV), measles, measles-rubella (MR), meningococcal A (MenA), pentavalent, pneumococcal, rotavirus and yellow fever (YF)

 **\$5.7bn** disbursed in Gavi-supported African countries

 **\$720m** co-financed by African countries since 2008

 **364m** unique children reached with routine immunisation in Africa

 **8.9m** future deaths averted in Africa¹

¹ Based on estimates of impact from the Vaccine Impact Modelling Consortium (VIMC) using the 2020 WHO/UNICEF Estimates of National Immunization Coverage (WUENIC), July 2021



GAVI2017/Juliette Bastin

Driving progress through partnership

Investing in health care is essential to sustainable development: as children become healthier, they, their families, communities and countries are more able to be economically prosperous and socially stable.

Through our partnerships with 40 African countries, Gavi supports routine immunisation programmes to strengthen access to and delivery of PHC as a pathway towards achieving Universal Health Coverage (UHC).

The COVID-19 pandemic has disrupted essential health services – particularly for lower-income countries in Africa where the associated social and economic effects are far-reaching. To address this crisis, Gavi is supporting governments, civil society and other partners to adopt innovative approaches to support COVID-19 vaccine roll-out while also maintaining routine immunisation services. Through the COVAX Facility, Gavi continues to collaborate with the African Union (AU), Africa Vaccine Acquisition Task Team (AVATT), Africa CDC and African Vaccine Delivery Alliance (AVDA) to support COVID-19 response and scale up efforts to expand vaccination coverage on the continent.

Together with its Vaccine Alliance partners, Gavi continues to drive efforts towards equitable access to immunisation in African countries:

Since its inception in 2000 and in collaboration with African governments, Gavi has helped introduce **9 vaccines** into routine immunisation programmes in multiple countries; reach **364 million unique children**; and avert more than **8.9 million future deaths** on the continent.

Through Gavi's investment in immunisation, more than 25 million children were reached with the third dose of pentavalent vaccine in Africa in 2020 alone (close to 40% of all children immunised with Gavi support globally in 2020).

By the end of 2020, more than **5.9 million girls in Africa had been immunised against HPV**, the main cause of cervical cancer, and more than 13 African countries had introduced the HPV vaccine with Gavi support.²

Gavi has disbursed almost **US\$ 9 billion** to all partner countries since 2000. Out of this amount, African countries account for close to **US\$ 5.9 billion**, representing **65% of total disbursements**.³

In 2020, the 40 Gavi partner countries in Africa achieved coverage of the third dose of diphtheria-tetanus-pertussis-containing vaccine (DTP3) of **74%** on average. This figure has been above 70% consistently since 2008.⁴

² Gavi analysis of 2020 WHO/UNICEF data

³ Gavi co-financing data, November 2021

⁴ Gavi analysis of 2020 WHO/UNICEF data



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Sustainable financing

African governments have increased considerably their co-financing of Gavi-supported vaccines over the last ten years – from US\$ 15 million in 2010 to more than US\$ 93 million in 2020.⁵ This sustained investment is in alignment with the Addis Declaration on Immunization commitment to “increase and sustain domestic investments and funding allocations for immunisation.” By the end of 2020, African governments had invested more than US\$ 700 million in co-financing of Gavi-supported vaccines. In 2020, only six African countries received an exceptional waiver due to the COVID-19 pandemic, and all other countries fully met their co-financing obligations – demonstrating their commitment to maintain routine immunisation programmes despite the challenges of the pandemic.⁶

Progress in country efforts to mobilise domestic resources for vaccines has been impressive in Africa, as the share paid by African countries doubled from 11% to 22% during the Gavi 4.0 strategic period (2016–2020). When countries sustain and subsequently scale domestic investment in PHC systems, they can more efficiently integrate immunisation services, making systems stronger, more resilient.

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⁶ Gavi analysis of 2020 WHO/UNICEF data

Through the Global Action Plan – Sustainable Financing for Health Accelerator, Gavi has strengthened partnerships with the Global Fund, World Bank, Global Financing Facility (GFF), World Health Organization (WHO) and International Labour Organization (ILO) in key African countries to advance sustainable financing for health. This will support countries to mobilise domestic resources for health and improve health spending, while enabling development partners and countries to align on joint financing.

Out of 40 country partners supported by Gavi in Africa, 6 are currently in the accelerated transition phase of Gavi support. Preparation for a successful transition is key: by 2030, 7 African countries, representing a large share of the African population (31%), are expected to transition out of Gavi support.





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Addressing inequities in immunisation, reaching zero-dose children

Despite this progress, millions of children are still being left behind. Of the nearly 73 million children born in Gavi-supported countries in the pandemic year of 2020, more than 12 million did not receive even a single vaccine shot – leaving them vulnerable to some of the world’s deadliest diseases. Nearly 50% of these “zero-dose” children live in urban areas, remote communities and populations in conflict settings. These children and their communities face heightened risk of outbreaks of diseases such as measles, diphtheria and meningitis, as well as medical impoverishment.

By the end of 2020, Africa was home to more than 7 million zero-dose children; 4.7 million of these children live in countries facing fragility. To reach these children, Gavi’s 2021–2025 (5.0) strategy will bring a much stronger focus on reaching the most marginalised by strengthening PHC systems; building and sustaining community demand; addressing gender-related barriers; and bringing innovative approaches to ensure that immunisation services reach these children.

Immunisation protects the health of communities, reduces the number of people forced into poverty, and gives children an equal chance of a healthier and more productive future. Vaccination, because of its preventative nature, averts illness and can provide particularly significant benefits to zero-dose communities, which may lack access to affordable, quality curative care while being at higher risk of vaccine-preventable diseases.

Immunised children are more likely to grow up healthy and to enjoy their right to survival and development. Vaccinated children have higher cognitive abilities, miss school less, are in school for longer, and have better nutrition and education outcomes – all of which translates into better earning potential and productivity as an adult.

In Africa, continued commitment by country governments and local authorities; support from Vaccine Alliance partners; civil society engagement; and the voices of vaccine champions will be pivotal to attaining vaccine equity – both between and within countries. Working together with a collective goal to reach zero-dose and under-immunised children with all the vaccines they need will help ensure that they grow and flourish throughout their lives.



Expanding access to vaccines is vital to improving health and survival in Africa. It is critical that through the pandemic and beyond, we collectively maintain, restore and strengthen routine immunisation, and reach the more than 7 million zero-dose children missing out on basic vaccines.

— José Manuel Barroso, Chair of the Gavi Board