STATEMENT

20 June 2024

The Every Breath Counts Coalition calls for a greater focus on reducing vaccine prices at the Global Forum for Vaccine Sovereignty and Innovation, co-hosted by the African Union, Government of France, and Gavi, the Vaccine Alliance (Gavi), in Paris on 20 June 2024.

Many vaccine prices are high and rising so rapidly that they threaten the achievement of vaccine coverage targets, especially in middle-income countries ineligible for Gavi support and for countries graduating from Gavi support. Currently only 54 countries are eligible for Gavi support and 11 of those are in an “accelerated transition” phase.

Our Coalition is especially concerned at the high prices and low coverage of vaccines targeting pneumonia and diarrhea - two leading infectious killers of children. Just 60% of children are protected with the pneumococcal conjugate vaccine (PCV) and **28 countries do not offer it.** Coverage is even lower for the rotavirus vaccine (51%), and **68 countries don’t offer it,** according to the latest WHO and UNICEF estimates.

One of the major barriers to high coverage of these two vaccines is cost. The 2022 WHO Global Vaccine Market Report decried the “poor market health” of the PCV vaccine market with relatively few manufacturers and the largest price differential (18-fold) across country income groups. Some middle-income countries are paying more per dose for PCV than high-income countries. The report described the rotavirus vaccine market as “segmented” with regular supply issues, with only 58% of self-procuring, middle-income countries offering it.

For countries that procure their own vaccines, the average prices of rotavirus and PCV vaccines increased by 55% and 43% respectively between 2019 and 2021, more than any other childhood vaccines. With childhood vaccines for malaria and respiratory
syncytial virus (RSV) entering the market, and new vaccines for higher-valent PCVs, Group B Streptococcus (GBS), shigella, and meningitis in the pipeline, the cost of childhood vaccine programs is about to skyrocket.

How are governments with limited resources going to afford them all? How are they going to prioritize among them? Where are global health donors going to find the resources to enable Gavi and its partners to keep subsidizing vaccine costs for the currently-eligible 54 countries, let alone more?

Enter the World Society for Pediatric Infectious Diseases (WSPID) and its Call to Action for Fair Vaccine Prices for countries with limited resources. The WSPID call asks pharmaceutical companies to commit to fair, equitable pricing strategies for vaccines for all countries with limited resources and to publish pricing by country income status. It asks governments and global health organizations to explore more effective regional procurement strategies to achieve more affordable prices for non-Gavi countries and countries transitioning from Gavi support.

The Pan American Health Organization’s (PAHO) Revolving Fund to Access Vaccines and UNICEF’s Vaccine Independence Initiative (VII) are two pooled procurement mechanisms that have been in operation for over three decades, but still vaccine prices remain unaffordable and introduction delayed in many member countries. For example, there have been delays of over 20 years introducing PCV and rotavirus vaccines in the Pacific, despite the UNICEF VII for Pacific Small Island Developing States.

We urge all organizations to join the hundreds who have already signed the WSPID Call to Action.¹

And we call on Gavi to explain how it plans to deliver on one of the goals in its new 6.0 strategy to, “shape markets to ensure the availability of affordable and suitable vaccines for lower-income countries.” It is critical that “lower-income” countries include those middle-income countries which are home to huge populations of undervaccinated and zero-dose children. For example, six million, or nearly half, of all zero-dose children are in middle-income countries that are currently ineligible for Gavi support - an 83% increase since 2019, according to the Center for Global Development.

¹ There are currently more than 500 signatories to the WSPID Call to Action including the Child Health Task Force, Save the Children International, Médecins Sans Frontières Access, International Pediatric Association, International Society of Pneumonia and Pneumococcal Diseases, International Papillomavirus Society, Every Breath Counts Coalition, JSI Health, Meningitis Research Foundation, RIGHT Foundation, Ministries of Health (Ugandan, Lao PDR, and Fiji), Asia-Pacific Vaccine Research Network, Murdoch Children’s Research Institute, Burnet Institute, George Institute for Global Health, Hong Kong Society for Paediatric Immunology Allergy and Infectious Diseases, and National Institute for Communicable Diseases, South Africa.
More affordable vaccines would also put wind in the sails of Gavi’s new strategy to expand its portfolio to include vaccines for tuberculosis, dengue, mpox, and more.

We wish Gavi every success at the launch of the Investment Opportunity for 2026-2030 this week, and urge donors to replenish with an insistence on Gavi negotiating more effectively to reduce vaccine prices that will benefit middle-income countries which are home to hundreds of millions of undervaccinated children, and stretch donor dollars further.

As we near the 2030 deadline for the Sustainable Development Goals (SDGs), increases in vaccination coverage are key to closing the wide child survival gaps that remain, especially for the 59 countries that are off-track. Most of those countries (46) are eligible for Gavi support while 13 are not, according to the latest UN estimates.

More affordable vaccines have the power to supercharge Child Survival Action!

Contacts:

Leith Greenslade, Coordinator, Every Breath Counts, leith@justactions.org
Professor Fiona Russell, WSPID, fmruss@unimelb.edu.au

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2 SDG 3.2 requires countries to achieve a Child Mortality Rate of at least 25 child (<5 years) deaths for every 1,000 children born by 2030.