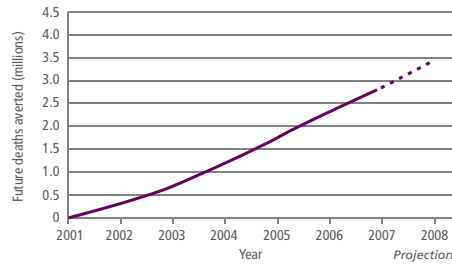


Accelerating vaccines: GAVI support has prevented 3.4 million premature deaths

Future deaths averted with hepatitis B, Hib and pertussis vaccines

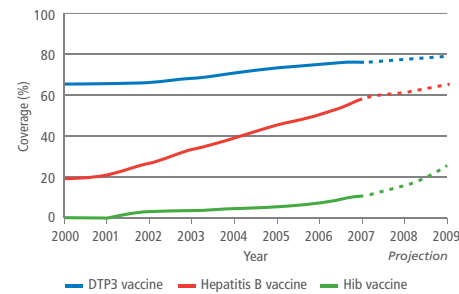


As a result of GAVI Alliance support, WHO projects that 3.4 million future cumulative deaths have been averted with three vaccines by the end of 2008.

This is an increase of 600,000 on the estimate of future deaths averted at the end of 2007.

Source: WHO estimates and projections, 2008

Immunisation coverage in GAVI countries continues to rise



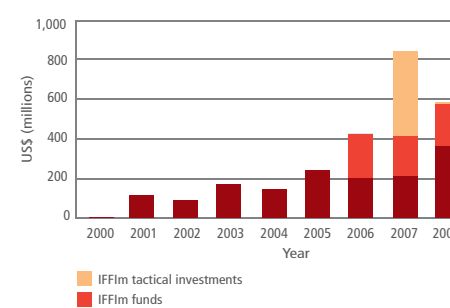
WHO projects a cumulative 213 million additional children have been reached with GAVI-supported vaccines from 2000 to 2008. Cumulative additional children reached with:

DTP3 (diphtheria-tetanus-pertussis) vaccine: 50.9 million
Hepatitis B vaccine: 192.2 million
Haemophilus influenzae type b (Hib) vaccine: 41.8 million

Source: WHO-UNICEF estimates, 2008

Frontloading IFFIm funds: helps to meet country demand

Country demand drives rising GAVI disbursement

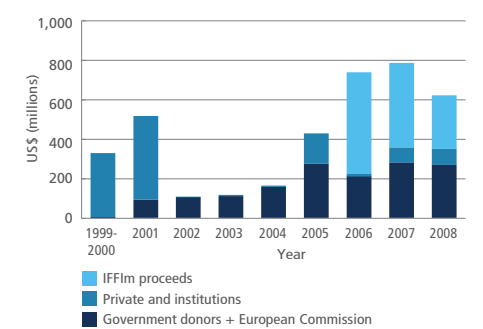


Steadily growing demand from countries for support for new and underused vaccines and programmes drives rising disbursement of GAVI funds.

Predictable and sustainable funding underpins the GAVI model. Countries are able to scale up immunisation and plan for the future.

Source: GAVI Alliance, 2009

IFFIm dramatically boosts public and private contributions to GAVI



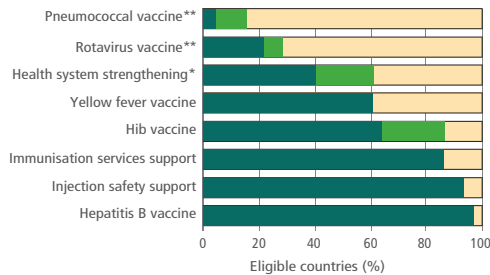
GAVI funding comes from donor governments and private organisations.

Additionally, the International Finance Facility for Immunisation (IFFIm) Vaccine Bonds have significantly increased GAVI's income.

Source: GAVI Alliance, 2009

Uptake of support: GAVI provides long-term funding to countries

Countries take up GAVI support for vaccines and programmes in 2008



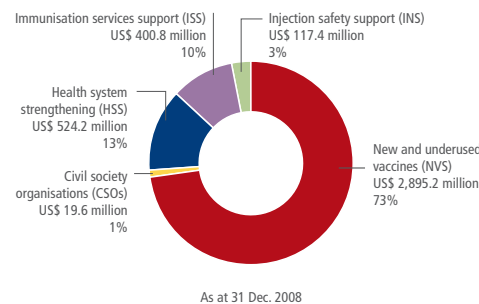
* Funding commenced in 2006
** Funding commenced in 2007

Demand for Hib vaccine and support for health system strengthening rose significantly in 2008. An additional 15 countries received GAVI support for Hib vaccine, bringing the total number of countries to 59, or 86% of eligible countries.

The addition of new pneumococcal and rotavirus vaccines in 2007 is generating country demand.

Source: GAVI Alliance, 2009

US\$ 4 billion committed to countries



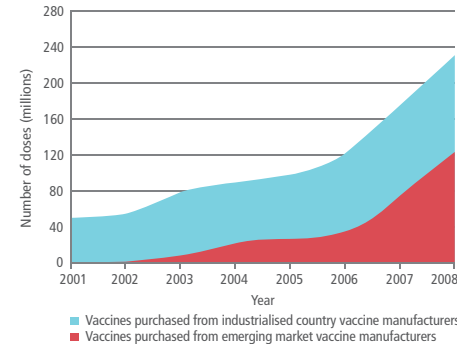
GAVI makes long-term commitments to countries, aligned with their national plans.

Nearly three-quarters of GAVI's support is directed towards provision of new and underused vaccines. Flexible cash support for health systems strengthening and immunisation support services accounts for 23% of resources to 2015.

Source: GAVI Alliance, 2009

Shaping markets for vaccines: more suppliers secure supply

GAVI's consolidation of demand for vaccines secures supply of vaccines

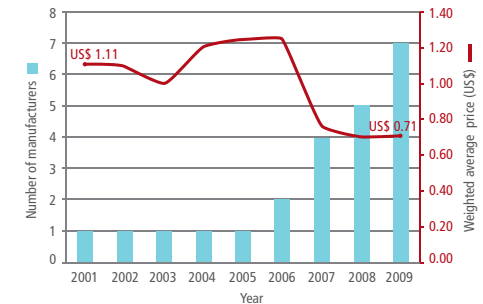


A growing number of emerging market manufacturers are increasing their production capacity for vaccines.

GAVI's ability to consolidate demand for vaccines – making it more predictable and long-term – is encouraging manufacturers to enter the market.

Source: UNICEF supply division, 2009

Increased competition decreases the price of DTP-Hepatitis B vaccine



More manufacturers are crucial to secure a more stable supply of vaccines and increased competition leads to lower prices.

As a result of GAVI's market shaping influence, countries are more confident to scale up their immunisation programmes.

Source: UNICEF supply division, 2009