

ON COUNTRY LEVEL GAVI & VACCINE FUND RELATED ACTIVITIES

The information contained in this Update depends upon your contributions Please send inputs for inclusion to: <u>prohomr@who.int</u>

17 August 2004

GAVI BOARD

GAVI Board meeting was held 6-7 July 2004 in Washington DC, hosted by the American Red Cross. Many topics were discussed and all documents can be found on GAVI website:

www.vaccinealliance.org

Measles Investment Case

The GAVI Board gave final approval of a proposal submitted by the Africa Measles Partnership to invest \$50 million of Vaccine Fund (VF) resources over five years (2005-2009) to support accelerated and sustained measles mortality reduction activities in 35 priority countries in Africa.

The details of this support are outlined in two documents submitted to the GAVI Board: (i) The Measles Investment Case (April 23, 2004); and (ii) Addendum to the Measles Investment Case (June 23, 2004), which were discussed by the GAVI Board May 6 (Board teleconference) and July 6-7 (Board meeting) respectively. Copies of these documents are attached and are also available on the GAVI Web site: www.vaccinealliance.org

For supplementary immunization activities, the GAVI Board approved \$37 million to be contributed to the UN Foundation to support measles "catch up" campaigns. Following the plans outlined in the Measles Investment Case document, identified countries will access resources for catch-up campaigns through the Measles Partnership.

For the introduction of a routine 2nd dose of measles vaccine, the GAVI Board approved \$13 million to be made available via the GAVI/VF country application process, to support eligible "high performing" countries that meet the criteria outlined in the Measles Investment Case.

Yellow Fever Stockpile

The Board endorsed the annual progress report for the yellow fever stockpile, and requested the Vaccine Fund to release a maximum of USD \$ 6 million for the 2005 supply.

REVIEW PROCESS

IRC (Independent Review Committee) met for three days (24-26 May 2004) to review proposals from six countries: Benin, Ethiopia, Guinea-Bissau, Mali, Mongolia and Mauritania

The IRC met also for the Monitoring Review of the Annual Progress Reports from 21st June to 2nd July 2004 and specific country recommendations can be found in this Update.

Next Monitoring Review will be held from 27th September to 1st October 2004 for countries who did not submit their reports on time for the June Review.

Next Proposals Review will be held from 18th to the 27th October 2004 and deadline to send proposals to GAVI Secretariat is 24th September 2004.

GAVI UPDATE QUESTIONNAIRE

We would like to thank all the people who kindly replied to this questionnaire.

Overall, there was strong support to continue the GAVI Update, but also a number of suggestions for improvement.

Many suggested that the GAVI Update should be on the web, and we are pleased to report it is accessible via the GAVI website (www.vaccinealliance.org).

We will experiment a few changes in the next Updates, based on your comments and recommendations. As a first step, we will try to produce the GAVI Update in French and English, to give more people a chance to read it.

Please find below a summary of the results: To the question "GAVI Update is it useful?": 100% answered "Yes".

To the question "Should we continue to produce it?": 95% answered "Yes".

To the question "Should the GAVI Update be different?": 46% answered "Yes".

GAVI FINANCING TASK FORCE

28/07/04 from Mr Patrick Lydon, WHO/HQ:

Immunization Financing Database Website

In July a new immunization financing website was launched: http://www.who.int/immunization_financing.

This site is intended to be an online resource for GAVI partners, international donors, policy-makers, health planners, immunization programme managers, and researchers that seek and share information about immunization financing.

- GAVI partners, international donors, researchers and other groups with an interest in the area can benefit from the country information and the immunization financing database, designed to provide reliable data on the quantity of financial resources used for immunization, their sources, the way they are used and how these compare across countries.
- Policy-makers and health planners can learn more about immunization financing options and the benefits of financial sustainability planning as a tool in policy formulation.
- National immunization programme managers can learn more about the value of financial planning, how to develop and implement a financial sustainability plan for a national immunization programme, and use existing costing and financing tools available.

The site contains 4 main sections. The data section of the site is the gateway to the immunization financing database and essential information about its data. At a glance, country pages present a summary of the immunization financing situation for available countries, and provide key data and indicators of interest. The tools page makes available existing guidelines and tools related to immunization financing and costing, and finally, the options page provides existing information on immunization financing options and is targeted at immunization service managers and policy makers in developing countries.

The site has been developed by WHO's Immunization, Vaccines and Biological Department (IVB) under the auspices of GAVI, supported by the GAVI Financing Task Force and with the guidance of a technical expert team from many GAVI partner agencies (World Bank, USAID's Partnership for Health Reform (PHR+), the Center for Global Development, WHO, the Vaccine Fund, the Children's Vaccine Program, UNICEF and PAHO). Financial support for the development of this site has been provided by Aventis Pasteur, the Bill & Melinda Gates Foundation, GlaxoSmithKline, the World Bank and WHO.

Please share this news and register to the site if you wish to join an electronic mailing list and receive updates.

If you have relevant information you would like to post on the site, please get in touch immunizationfinancing@who.int

COUNTRY CASE STUDIES

02/08/04 from Dr Joseph Naimoli, World Bank: By virtue of its role as a partner in GAVI, and its corporate commitment to poverty reduction, the MDGs, and human development, the World Bank has become increasingly engaged in operational issues related to immunization program implementation and evaluation. For example, to stimulate more evidence-based strategic thinking and action about investments in immunization, and to enhance collaboration with multinational and bilateral partners, the Bank's Africa Region, in collaboration with its Human Development Network, recently embarked upon a multi-stage immunization program performance assessment and improvement exercise. The exercise is being carried out with the cooperation of WHO and UNICEF country offices.

Using estimates developed jointly by WHO and UNICEF of coverage of children with DTP3 and measles, Phase I evaluated the effectiveness, over time (1997-2002), of immunization programs in 43 African countries. A two-dimensional indicator of effectiveness, which included a measure of central tendency (average coverage) and change (linear trend), was used. The results indicated substantial inter-country variation in performance for both DTP3 and measles coverage. For example, the DTP3 analysis classified 37% (16/43) of the countries in the sample as strong performers, 28% (12/43) as mixed performers, and 35% (15/43) as weak performers. Considerable within-group variation for both antigens was also found. A manuscript that describes in greater detail this performance analysis has been drafted and is currently under review. Although this method has been used to compare performance across countries, it can also be used within countries to compare performance across districts. The Bank is currently supporting such a study in Burkina Faso.

To better understand why some countries have been successful while others have been less so, an in-depth investigation of supply, demand, financing and politicalbureau cratic factors in selected countries with varying levels of performance is now underway. The lessons learned from these case studies of Phase II will be developed into a grounded theory of what works in practice in sub-Saharan Africa. Such a best practice theory that is grounded in recent operational experience can serve as a benchmark against which struggling countries can refashion their immunization programs, as well as measure their progress. It can also help to inform and enrich the normative guidance usually provided by multilateral and global initiatives concerned with immunization and child health programs in low-income countries. The purpose of Phase III will be to engage countries in validating the best practice theory, and in identifying practical solutions that will raise the performance of all countries to the level of the strong per form ers.

POLIO

02/08/04 from Ms Melissa Corkum, WHO/HQ: The partners of the Global Polio Eradication Initiative welcome the resumption of polio immunization

campaigns in Kano, Nigeria and signalled their commitment to working with the federal ministry of health, state, traditional and religious leaders to ensure the country reaches its goal of stopping poliovirus transmission. With Sub-Saharan Africa on the verge of the largest polio epidemic in recent history, this resumption comes at a critical time in the program. The number of cases in west and central Africa is nearly 5 times that for the same period in 2003 (483 compared to 95), due to the outbreak originating from Kano and surrounding states.

The resumption of immunization activities in Kano is one of several measures needed to stop polio transmission in Nigeria and to halt the international spread of the virus. With 30'37 states infected, high quality campaigns in the entire country and particularly in Kano and surrounding states, during the upcoming National Immunization Days from September to November, will be central to broader efforts to prevent the further spread of polio. Key to success will be rebuilding community confidence in the safety of oral polio vaccine to ensure all children are reached during these upcoming polio immunization activities.

On June 30 WHO was informed that the Governor of Kano had accepted the safety of the polio vaccine and the state was preparing for polio campaigns. WHO reinforced that all international travelers to Nigeria protect themselves by being up-to-date with vaccination against poliomyelitis as outlined in WHO's *International Travel and Health*. WHO has also undertaken a consultative process with experts to evaluate additional measures that might be required to prevent the further international spread of wild poliovirus to polio-free countries and areas in the future.

TRAINING

16/08/04 from Mrs Jhilmil Bahl, WHO HQ:

Immunization in Practice - a practical guide for health staff will be available by end September. To order copies write to epitraining@who.int

3 inter-country MLM courses are planned for this year: one for lusophone countries in Maputo, from 13 - 24 September, the second one for Anglophone countries, from 11 to 22 October in Cape Town and the third one for Francophone countries, in Dakar -Saly from 1 -12 November 2004.

For further information, please contact Dr. Evariste Mutabaruka, <u>mutabarukae@whoafr.org</u>

COUNTRY INFORMATION¹

AFGHANISTAN

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions :

- ¹ ISS = Immunization Services Support
- INS = Injection Safety Support
- NVS = New Vaccine Support
- DQA = Data Quality Audit
- $DQS = Data\,Quality\,\,Self\,Assessment$

FSP = Financial Sustainability

- **ISS**: The country will continue to receive support and will get its first reward.
- **INS**: The country will continue to receive the injection safety support.

ALBANIA

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions :

- **INS**: The country will continue to receive the injection safety support.
- **NVS**: For 2005, Albania will receive HepB vaccine according to the revised HepB1 target. **29/06/04 from EURO**:
- The country is interested to apply for Hib.
- Albania is working on finalizing the FSP, and is expected to submit it this year. A WHO consultant visited the country in May to assist the national working group.

ANGOLA

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions:

- **ISS**: The country will continue to receive support.
- INS: The IRC could not make a specific recommendation due to insufficient information.

ARM ENIA

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions:

- **ISS**: The country will continue to receive support and will get its first reward.
- INS: Armenia has received INS support for three years and is no longer entitled to receive further support according to GAVI policies.
- NVS: Armenia will receive HepB vaccine according to its request for 2005.

AZERBAIJAN

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions:

- **ISS**: The country will continue to receive support and will get its second reward.
- **INS**: The country will continue to receive the injection safety support.
- **NVS**: Azerbaijan will receive HepB as per previous targets for 2005.

BANGLADESH

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions :

- ISS: The country will continue to receive support and will get its first reward.
- **INS**: The country will continue to receive the injection safety support.
- **NVS**: Bangladesh will receive HepB as per previous targets for 2005.

BENIN

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions :

- **NVS**: Benin will receive Yellow Fever as requested.
- Introduction of Hib has been approved, after submitting clarifications.

BHUTAN

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions :

- ISS: The country will continue to receive the injection safety support.
- NVS: Bhutan will receive support according to its request for 2005.

BOSNIA & HERZEGOVINA

16/08/04 from Dr Oya Afsar, WHO HQ:

A rapid assessment of Hib diseases (HibRAT) in Bosnia and Herzegovina took place between 20-30 July 2004. The participants of the mission were Salah Al-Awaidy, MoH/Oman, Oya Afsar, WHO/HQ and Andrei Tulisov, Russian Federation. According to preliminary results, Hib meningitis incidence under 5 years of age is 15-27 per 100 000 population, which shows a moderate disease burden.

BURKINA FASO

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions:

- **ISS**: The country will continue to receive support and will get its first reward.
- **INS**: The country will continue to receive the injection safety support.

BURUNDI

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions :

- INS: Burundi has received INS support for three years and is no longer entitled to receive further support according to GAVI policies.
- NVS: Burundi will receive DTP-Hepb+Hib as requested for 2005.

CAM BODIA

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions:

- **INS**: Cambodia has received INS support for three years and is no longer entitled to receive further support according to GAVI policies.
- NVS: Cambodia has updated its DTP-HepB targets for 2005 and will receive support according to its request.

05/08/04 from WPRO:

 HepB monovalent vaccine (in 10-dose vials) for birth dosing has been secured through JICA for continued phased introduction in 2005 and 2006. • System-wide barrier study: Cambodia has deferred the participation in the initiative till the second quarter of 2005.

CAM EROON

27/05/04 from AFRO:

- The country will start hepatitis B vaccine introduction in January 2005.
- YF fever vaccine has been introduced.
- There is a vaccine coverage survey planned for the 4th quarter.

CHAD

27/05/04 from AFRO:

- YF vaccine has arrived.
- ISS money has been received.
- Priority remains polio.

CHINA

05/08/04 from WPRO:

- Hepatitis B vaccine was integrated into the EPI nationwide in 2003. The GAVI project implementation plan (PIP) was formally issued to the provinces on 12 February 2003. GAVI and the central government will provide for hepatitis B vaccine and AD syringes for EPI vaccines in 12 Western provinces and in national poverty counties in Shanxi, Anhui, Jiangxi, Henan, Hubei and Hunan provinces.
- Financial sustainability plan: due November 2004.
 Technical assistance from WHO has been requested.

CONGO

27/05/04 from AFRO:

- Country is interested in pentavalent vaccine introduction.
- A Yellow Fever introduction evaluation is required during 2004. There would be a possibility of combining support for both Yellow Fever and Pentavalent, including an assessment of RED approach.

DR CONGO

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions :

- **ISS**: The country will continue to receive support.
- **INS**: The country will continue to receive the injection safety support.
- **NVS**: DR Congo will receive Yellow Fever as requested for 2005.

ERITREA

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions:

- **ISS**: Final decision will be taken later on, once all necess ary information has been received.
- **INS**: Eritrea will receive the injection safety supplies according to its request for 2005.

 NVS: Eritrea has decreased its DTP-HepB targets for 2005 and will receive the vaccine according to its revised request.

21/07/04 from AFRO:

- DQA planning on track; trying to include WHO surveillance officer in Tanzanian DQS training.
- DQA will be held the 23rd of August.
- FSP well under way with strong input from Ministry of Finance and Ministry of Health; currently awaiting the letter requesting support to allow WHO to appoint in-country consultant.
- Ongoing needle-cutter trials.

ETHIOPIA

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions :

 INS: Ethiopia has received INS support for three years and is no longer entitled to receive further support according to GAVI policies.

21/07/04 from AFRO:

- The country applied for Hep B introduction in May 2004 round but the application has not been approved. Country will resubmit as soon as possible.
- Coverage Improvement Plan finalized, starting to include new districts in RED support.
- Cold chain rehabilitation including central store.

GAM BIA

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions :

- **ISS**: The country will continue to receive support and will get its first reward.
- INS: Gambia has received INS support for three years and is no longer entitled to receive further support according to GAVI policies.
- **NVS**: Gambia has updated its previous targets for 2005 and will receive DTP-Hib and HepB vaccines according to its request.

GEORGIA

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions:

- INS: Georgia has received INS support for three years and is no longer entitled to receive further support according to GAVI policies.
- **NVS**: Georgia has revised its HepB targets for 2005 and will receive HepB vaccine as per its request.

GHANA

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions:

- INS: Ghana will receive the injection safety support (cash in lieu of supplies) according to its request for 2005.
- **NVS**: Ghana will receive DTP-HepB+Hib and Yellow fever vaccines according to its request.

GUYANA

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decision:

NVS: Guyana will receive DPT-HepB+Hib vaccine according to its request for 2005.

HAITI

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions :

• **ISS**: Final decision will be taken later on, once all necess ary information has been received.

INDONESIA

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions :

- **ISS**: The country will continue to receive support.
- **INS**: Indonesia will receive the injection safety support according to its request for 2005.
- NVS: In 2005, Indonesia will receive cash to purchase HepB (uniject) vaccine based on the target provided. The Independent Review Committee did not accept to provide support for children to be vaccinated after 7 days since it is not part of the original proposal.

KYRGYZSTAN

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions :

- INS: Kyrgyzstan will receive injection safety supplies according to its request.
- **NVS**: Kyrgyzstan will receive HepB vaccine according to its request.

LESOTHO

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions:

- **ISS**: Final decision will be taken later on, once all necessary information has been received.
- **INS**: Lesotho will receive the injection safety support according to its request for 2005.
- **NVS**: Lesotho will receive HepB vaccine according to its request.

MADAGASCAR

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions :

• **NVS**: Madagascar will receive DTP-HepB according to its request for 2005.

MALAWI

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions:

 NVS: Malawi will receive vaccine according to previously approved figures. The request for pentavalent vaccine will be adjusted to the revised targets once they have been received.

MALI

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions:

• **ISS**: Final decision will be taken later on, once all necessary information has been received.

MOLDOVA

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions:

 NVS: For 2005, Moldova will receive HepB vaccine according to its request. The Independent Review Committee has accepted the revised targets.

29/06/04 from WPRO:

The country has requested technical assistance to resubmit INS proposal. Denis Maire (from EURO office) will conduct a mission next month.

MONGOLIA

28/05/04 from GAVI Secretariat:

- Introduction of pentavalent DPT-hepB-Hib vaccine (2005-2009) and support for injection safety (2005-2007) was approved in July 2004. According to the Strategic Plan for introduction of DTP-HepB-Hib vaccine, Mongolia intends to introduce the pentavalent vaccine in a phased manner (over three years-2005-07), initially targeting five out of 9 districts of Ulaanbaatar and five out of 21 provinces accounting for approximately 25% of total eligible population starting from 3 January 2005 and expand it nationwide in 2008. The schedule of administration of this pentavalent vaccine will be at 2, 3, and 4 months (same as DPT) following the birth dose of Hep B vaccine.
- MOH needs Technical Assistance to develop a national New Vaccine introduction expansion plan, AEFI surveillance, training HW and advocacy issue. RWG intends to hold its next meeting in Mongolia to assist and coordinate the technical assistance for introduction of new vaccine.

Mongolia is the first country in Asia to be approved for Hib vaccine introduction.

MOZAMBIOUE

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions :

• **ISS**: Final decision will be taken later on, once all necessary information has been received.

MYANMAR

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions :

- **ISS**: Final decision will be taken later on, once all necessary information has been received.
- **INS**: Myanmar will receive injection safety supplies according to its request.

 NVS: For 2005, Myanmar will receive HepB vaccine in 6 and 1 dose vials according to its request.

NEPAL

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions :

 ISS: Final decision will be taken later on, once all necessary information has been received.

PAKISTAN

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions :

- **ISS**: The country will continue to receive support and will get its second reward.
- **INS**: Pakistan will receive injection safety support for 2005 based on its request.
- NVS: Pakistan will receive HepB vaccine according to its request.

16/06/04 from EMRO:

- Training for microplanning has started in a sample of districts. Provincial committes have been formed to ensure implementation.
- Hib not a priority. Will have to be re-assessed in light of progress with RED, HepB and polio.

PHILIPPINES

24/05/04 from WPRO:

- GDP per capita continues to fall. Country not currently eligible for GAVI support however WHO has considered a situation analysis to be submitted to GAVI. Immunization infrastructure and programme is very open to improvement provided that adequate external support is given.
- The country may need technical assistance for HepB implementation. The amount of HepB in stock is only enough for 40% of the target population, however, the disease burden for hepatitis B is high.

RW AN DA

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions:

- **ISS**: The country will continue to receive support and will get its second reward.
- INS: Rwanda will receive the injection safety support (cash in lieu of supplies) according to its request for 2005.
- NVS: Rwanda will receive DTP-HepB+Hib vaccines according to its revised targets.

SAO TOME

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions:

- **INS**: Sao Tome will continue to receive the injection safety support.
- NVS: Sao Tome will receive HepB and Yellow Fever vaccines according to its revised targets.

SIERRA LEONE

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions:

- **ISS**: ISS: Final decision will be taken later on, once all necessary in form ation has been received.
- INS: has received INS support for three years and is no longer entitled to receive further support according to GAVI policies.
- **NVS**: Sierra Leone will receive Yellow Fever as requested unless a new updated request is submitted.

SOM ALIA

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions:

- **ISS**: The country will continue to receive support.
- INS: Somalia will receive cash in lieu of supplies according to its new request.

SRI LANKA

24/05/04 from WPRO:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions:

- **INS**: Sri Lanka will receive injection safety supplies according to its new request.
- **NVS**: The Independent review Committee accepted the new targets and Sri Lanka will receive HepB vaccine according to its request.

SUDAN

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions :

- **ISS**: Final decision will be taken later on, once all necess ary information has been received.
- INS: has received INS support for three years and is no longer entitled to receive further support according to GAVI policies.
- NVS: The country will receive HepB as requested.

TAJIKISTAN

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions:

- **INS**: The country will receive Injection Safety Support as requested.
- NVS: The country will receive HepB as requested.

TANZANIA

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions:

- ISS: The country will continue to receive support and will get its second reward.
- **INS**: The Independent review Committee accepted the new targets and Tanzania will receive support according to its revised request.
- **NVS**: The Independent review Committee accepted the new targets and Tanzania will receive vaccine according to its revised request.

21/07/04 from AFRO:

- Site for jet injector trials by PATH.
- DTP-HepB vaccine supplied at beginning of July.
- Planned DQS training in August.

TOGO

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions :

- **ISS**: The country will continue to receive support.
- **INS**: Togo will receive support according to its request.

TURKMENISTAN

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions :

- **INS**: The country will receive Injection Safety Support as requested.
- NVS: The country will receive HepB vaccine (one dose and 10 dose vials) according to its request.

UGANDA

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions:

- **ISS**: The country will continue to receive support and will get its second reward.
- INS: Uganda has received INS support for three years and is no longer entitled for further support according to GAVI policies.
- **NVS**: Uganda will receive DPT-hepB+Hib vaccine according to its request.

21/07/04 from AFRO:

- Routine vaccination continues to improve.
- Sufficient penta vaccine in stock.

UZBEKISTAN

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions :

- **INS**: The Independent review Committee accepted the new targets and Uzbekistan will receive support according to its revised request.
- NVS: The Independent review Committee accepted the new targets and Uzbekistan will receive vaccine according to its new request.

VIETNAM

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions :

- INS: Vietnam will receive support according to its request.
- NVS: Vietnam will receive support according to its request.

24/05/04 from WPRO:

- FSP submitted to the GAVI Secretariat in late January 2004: minor clarifications sought by GAVI Secretariat.
- The country is interested in the GAVI systemwide barriers study.

ZAM BIA

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions :

- **ISS**: The country will continue to receive support and will get its first reward.
- INS: Zambia has received INS support for three years (INS material approved in 2004 will be shipped in 2005) and is no longer entitled for further support according to GAVI policies.
- **NVS**: The Independent review Committee accepted the new targets and Zambia will receive vaccine according to its revised request.

ZIM BABWE

10/08/04 from GAVI Secretariat:

The Independent Review Committee has reviewed the 2004 Progress Report and took the following decisions :

- **ISS**: Final decision will be taken later on, once all necessary information has been received.
- **INS**: Zambia will receive INS support after clarifications are received.

Regional Meetings of relevance to GAVI objectives : July - Sept 2004					
Title of Meeting	Start	Finish	Location	Responsible Partner	Region
July 2004					
Regional Working Group	7July 2004	9 July 2004	Manila, Philippines	WHO/WPRO	WPRO
III Regional Rotavirus Meeting	20-July	20-July	Santa Cruz, Bolivia	WHO/AMRO	AMRO
August 2004					
				WHO/SEARO	SEARO
AEFI	9 Aug 2004	10 Aug 2004	Delhi, India		
EPI Programme Managers' Meetings	11 Aug 04	11 Aug 04	Delhi, India	WHO/SEARO	SEARO
				WHO/SEARO	SEARO
TCG		13 Aug 2004	·		
September 2004					
Regional Working Group meeting	1 Sept 2004	2 Sept 2004	Nairobi, Kenya	WHO/AFRO	AFRO
EPI Programme Managers' Meeting	20 Sept 2004		Douala, Cameroon	AFRO Central and Western Block	AFRO
Regional Working Group meeting	29 Sept 2004	29 Sept 2004	Ulan-Bator, Mongolia	WHO/WPRO	WPRO