



# Update

## ON COUNTRY LEVEL GAVI & VACCINE FUND RELATED ACTIVITIES

*The information contained in this Update depends upon your contributions  
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**30 September 2003**

### GENERAL NOTE ON THE VACCINE FUND APPLICATION PROCESS

- The country activities listed below are those that have been initiated by various Partners of the Alliance.
- Please note change in round numbering below.
- The **3<sup>rd</sup> Round 2003 – September deadline is 30 September 2003**. The Independent Review Committee (IRC) will meet from 28 October – 5 November 2003.
- The next **Monitoring Review** will take place from **27 October 2003 to 7 November 2003**. The deadline to receive reports is **30 September 2003**.

### REVIEW PROCESS

**30/09/03 from GAVI Secretariat:** Applications from the following countries have been approved after submitting clarifications which were requested in May 2003: Afghanistan, Albania, Angola, Chad, Congo, Eritrea, Senegal and Zimbabwe. Further detail on applications are given under specific country listings.

### GAVI BOARD

**30/09/03 from GAVI Secretariat:** The 11<sup>th</sup> GAVI Board meeting was held in Washington DC from 15-16 July 2003. A summary of decisions made at the meeting are as follows:

#### Strategic Framework:

- Approved the proposed priorities and their rankings.
- Approved the proposed targets, with some minor editing, acknowledging that they may require some adjustments when activities are more fully developed and issues are more closely explored.
- Approved the proposed partners/entities that will be responsible for developing the workplan activities and budgets, with one exception: UNICEF, and not ICCs should be responsible for developing the workplan activities to ensure that the seven large countries are back on track by 2005.

- Agreed to the process and timeframe for workplan development as proposed in the framework. The overall financing envelope was also endorsed. In response to the suggestion that all funding for implementation of the workplan be channelled through the Vaccine Fund, this will be decided by the concerned donors in consultation with the agencies.

#### Report on Task Forces, Regional Working Groups:

- Approved all the recommendations of the Board sub-group:
- The Research & Development Task Force having successfully completed its Board requested tasks, will come to an end as of this meeting.
- The Advocacy and Communications Task Forces in its current form will come to an end as of this meeting. However, advocacy is a crucial activity for GAVI and will therefore need to be addressed through other means: a small Global Advocacy Coordinating group comprised of main partners (WHO, UNICEF, Secretariat, Vaccine Fund, CVP/PATH and the Gates Foundation) to coordinate messages about the value and importance of immunization; country level advocacy would be the responsibility of the ICCs and partners on the ground; communications on GAVI will be the responsibility of the Secretariat and the Vaccine Fund.
- The Financing Task Force continues to have an important role to play in the work on financial sustainability, and should therefore be continued to end 2005.
- The ITF should cease to exist in its current form after December 2003. The ITF should use the remaining six months to complete its workplan and engage partners on transitioning arrangements to ensure that a forum for collaboration and consultation be continued in the form of an annual partners' meeting with periodic conference calls in between. WHO is the logical candidate to lead this forum.

#### Improving Board Operations:

- Approved the creation of a GAVI Board Executive Committee (EC), to include all five renewable members (WHO, UNICEF, World Bank, Vaccine Fund and Gates Foundation) and one rotating

member each from developing and industrialized country governments. Based on consultations with Board members subsequent to the meeting, USAID (Anne Peterson) and Mozambique (Francisco Songane) have been elected as the first two rotating members of the Executive Committee.

- Decided that the performance of the EC be reviewed after one year of operation.
- Approved the extension of rotating Board member terms from two to three years.

#### **Financial Sustainability:**

- Requested that representatives from selected countries be asked to report on progress in implementing their financial sustainability plans at upcoming Board meetings.
- Requested the Financing Task Force to provide more clarification on its recommendation that countries should report back on how they are addressing their financing gaps, as this is also included in the annual progress reporting system.
- Requested the Secretariat to explore the proposal to work with other global mechanisms such as the Global Fund, Fight AIDS, TB and Malaria, Roll Back Malaria, Stop TB and others to address financing gaps in a more comprehensive way.

#### **Vaccine Procurement Process:**

- Requested the VPP to come back to the Executive Committee with a proposal for specific actions GAVI can take in the premature market environment to ensure vaccine supply at affordable prices.
- Requested the Secretariat to organize a teleconference of the VPP Oversight Committee in the near future to address the Board's concerns about vaccine pricing.

#### **Vaccine Vial Monitor Update:**

- Welcomed the report that adoption of VVMs by manufacturers is accelerating, though behind the schedule proposed by the Board at the last meeting. VVMs will be available on all monovalent Hepatitis B and DTP-HepB vaccines by end 2003. VVMs will be available on the DTP-Hep B-Hib during 2004. Yellow Fever is the only Vaccine Fund purchased vaccine for which VVMs will not be fully available according to the requirements of the GAVI Board.

#### **Data Quality Audit Update:**

- Supported in general an evaluation of ISS and performance-based grants system. The Secretariat is to move forward with USAID, DFID, WHO and a developing country to develop TORs and a timeline for the study.
- Requested partners such as WHO to support countries to improve data management and reporting in countries with low DQA scores.

#### **Country Eligibility for Support from GAVI and the Vaccine Fund:**

- Decided to postpone any revisions to the list of eligible countries until after the first five-year phase of GAVI and Vaccine Fund support (2005) in order to align it with policies for the next phase of country support.

#### **Board Turnover:**

- Endorsed the recommendation to extend CDC's term until end 2003 in order to launch a new search for a replacement.
- Endorsed the recommendation from Institute Pasteur to accept the nomination of Gothenburg University, represented by Professor Jan Holmgren to fill the R&D seat.
- Endorsed the nomination of France, represented by Secretary of State for Foreign Affairs Renaud Muselier.

#### **Extension of the Executive Secretary Term:**

- Endorsed the recommendation of the GAVI Board Executive Secretary search committee that Tore Godal continue until the end of 2004.

## **ADVOCACY & COMMUNICATION TASK FORCE**

**30/09/03 from Advocacy and Communications Task Force:** The communication focal points of several GAVI partners met on 18-19 September to discuss mechanisms for coordination across the wider group of key organizations working on advocacy and communication for immunization. A number of partners were identified and coordination mechanisms proposed.

There will be a larger meeting in November 2003 to:

- Agree upon a new coordination group for immunization communication partners
- Provide input to a paper under development on "Why invest in communication for immunization?"
- Plan for key upcoming advocacy opportunities

## **IMPLEMENTATION TASK FORCE**

**30/09/03 from Implementation Task Force:** As requested by the GAVI Board, an evaluation study of the performance-based Immunization Services Support (ISS) funding scheme of GAVI will be organised soon as defined below:

A first part will consist of an **assessment and lesson-learning on the use of ISS support**. The detailed design for this part will be finalised in October 2003, a bid will be organised by December 2003 and the work will take place in early 2004. Two methodologies will be used:

- An in-depth review of the performance of the ISS account in 6-8 selected countries to gain a better understanding of how these funds are contributing to improved performance and how countries in different situations have chosen to apply these funds. This involves looking at how the scheme translates provision of funds at the national level into activity at the field level.
- A desk review of the overall performance of the implementation of the performance-based ISS grants system. This review would be done in all countries approved for ISS funding.

A second part will consist of a **qualitative study looking at the impact of the performance related funding mechanism** in terms of how this mechanism is affecting the incentives and behaviour of staff, and hence the way immunization services are delivered in practice. It would also consider the impact on reporting and other aspects of the health system. This will be launched at a later stage.

This study will be performed jointly with the Global Fund on AIDS, TB and Malaria according to common areas that will be identified.

## **STRENGTHENING IMMUNIZATION SYSTEMS**

**30/09/03 from Jhilmil Bahl, WHO/HQ:** WHO/HQ plans to print immunization monitoring charts (similar to ones printed in 2003, but without the calendar) in three formats: English, French, Non-Language Specific chart. A CD-ROM will also be created containing all three formats, instructions, and some worked examples. Please send your suggestions and feedback to Ms Jhilmil Bahl ([bahlj@who.int](mailto:bahlj@who.int)).

## **COUNTRY INFORMATION**

### **AFGHANISTAN**

**30/09/03 from GAVI Secretariat:** Application for Injection Safety has been approved after submitting clarifications requested in the May 2003 round.

### **ALBANIA**

**30/09/03 from GAVI Secretariat:** Application for Injection Safety has been approved after submitting clarifications requested in the May 2003 round.

### **ANGOLA**

**30/09/03 from GAVI Secretariat:** Application for Injection Safety has been approved after submitting clarifications requested in the May 2003 round.

### **BANGLADESH**

**30/09/03 from South East Asian Regional Working Group:**

- The additional medical officers for immunization have been recruited, trained and deployed. Currently, Bangladesh is going through a series of training in district level micro-planning and increasing coverage using the ISS support.
- Currently in the process of finalizing their Financial Sustainability Plan for submission on 30 November 2003.

### **BHUTAN**

**30/09/03 from South East Asian Regional Working Group:** The introduction of Hepatitis B vaccine is proceeding as planned. Training has been completed in all districts, and vaccine distribution has been completed. The country is currently working on refining the EPI National Policy document.

### **CAMBODIA**

**30/09/03 from Asia Pacific Regional Working Group:** New vaccine introduction is progressing well, with potential to accelerate the phasing if GAVI provides an additional vaccine.

- AD syringes are now used nationally for all EPI vaccines, with an incinerator in every province.
- Coverage improvement plans (CIPs) are progressively being prepared, however will

require considerable resources as well as monitoring and evaluation.

- The recent DQA found 98% validated reports compared to 84% in 2001 (using locally undertaken modified DQA).

### **CAMEROON**

**30/09/03 from Oya Afşar, WHO/HQ:**

- The ICC had a meeting in mid-September to discuss how to introduce Hepatitis B vaccine into the current programme, and the preferred vial size. The country plans to send a response to the conditions requested in the September 2003 round.
- As the country has not received the Yellow Fever vaccine yet, they plan to start implementation in January 2004.

### **CENTRAL AFRICAN REPUBLIC**

**30/09/03 from Oya Afşar, WHO/HQ:**

- The country has reported that the implementation of Yellow Fever began in July 2003.
- Hepatitis B vaccine introduction is scheduled for 2005.

### **CHAD**

**30/09/03 from GAVI Secretariat:** Application for Injection Safety has been approved after submitting clarifications requested in the May 2003 round.

**30/09/03 from Oya Afşar, WHO/HQ:** A 50% DTP3 coverage level could be achieved by the end of next year provided that RED (Reaching Every District) is implemented seriously, even though they have a very poor health system. The drop-out rate is high.

### **CHINA**

**30/09/03 from Asia Pacific Regional Working Group:** The GAVI project implementation has been delayed by SARs, however Hepatitis B vaccine and AD syringes have been procured and distributed. Assessment of the project and its impact on EPI in 2004 would be useful.

### **COMOROS**

**30/09/03 from East and South African Sub-Regional Working Group:** Currently in the process of preparing their Financial Sustainability Plan for submission in November 2003.

### **CONGO**

**30/09/03 from GAVI Secretariat:** Application for Injection Safety has been approved after submitting clarifications requested in the May 2003 round.

**30/09/03 from Oya Afşar, WHO/HQ:** As the current DTP3 coverage is very low, they are not yet able to resubmit application for New Vaccines (HepB and Hib).

## COTE D'IVOIRE

**30/09/03 from Oya Afşar, WHO/HQ:** The Ministry of Health conducted a post-crisis assessment that revealed a damaged immunization infrastructure, loss of equipment and missing staff in 24 Northern districts.

## DPR KOREA

**30/09/03 from South East Asian Regional Working Group:**

- The cold chain equipment shipment is delayed, therefore it is unlikely to be installed before the end of the year. This has implications on the pace of introduction of Hepatitis B, since cold chain insufficiency is one of the major constraints. The country has commenced introduction of Hepatitis B vaccine, however no further expansion has been reported.
- After much delay, the Vaccine Fund has successfully transferred the lump sum of US\$100,000 for the introduction of new vaccines.
- The transfer of ISS funds are currently in progress.

## ERITREA

**30/09/03 from GAVI Secretariat:** Application for Injection Safety has been approved after submitting clarifications requested in the May 2003 round.

**30/09/03 from East and South African Sub-Regional Working Group:** External technical assistance was provided to support the development of the first draft of the Financial Sustainability Plan in mid-August 2003. The draft has been reviewed, and a local consultant will be engaged to complete the process.

## GUINEA

**30/09/03 from Oya Afşar, WHO/HQ:** The DTP3 coverage is now too low to consider resubmitting the application for New Vaccines (HepB and Hib).

## INDIA

**30/09/03 from South East Asian Regional Working Group:** All original 15 cities except for one have introduced Hepatitis B vaccine as planned. The 32 districts have started to introduce the vaccine this month. The country is expected to submit their next phase proposal for Hepatitis B expansion towards the end of this year or early next year.

## INDONESIA

**30/09/03 from Diana Chang Blanc, CVP/PATH:** Ms Diana Chang Blanc (CVP/PATH) and Mr John Pott (consultant) will conduct an assessment of the regional cold store in Central Java using WHO's Effective Vaccine Management Store (EVSM) tool from 1-10 October 2003.

## KENYA

**30/09/03 from East and South African Sub-Regional Working Group:** The draft strategy for the implementation of the Financial Sustainability Plan is

available. A country visit from WHO/AFRO was scheduled from 1-5 September to guide the process.

## LAO PDR

**30/09/03 from Asia Pacific Regional Working Group:**

- New Vaccine and AD syringe introduction appears to be improving after some delays.
- DQA could only validate 60% of reports, however did not add any new insights into ongoing work to improve data quality.
- District microplanning support activity planned for 2004.

## MADAGASCAR

**30/09/03 from East and South African Sub-Regional Working Group:** A country workshop on the Financial Sustainability plan was held in July 2003. External technical assistance will be provided for follow-up issues.

## MALAWI

**30/09/03 from East and South African Sub-Regional Working Group:** The ICC has met and the process of modification of the Financial Sustainability Plan based on the recommendations has commenced. The draft was available in mid-September for a pre-review.

## MOZAMBIQUE

**30/09/03 from East and South African Sub-Regional Working Group:** The draft action plan for the FSP implementation strategy was expected to be shared by mid-September 2003 at the latest.

## MONGOLIA

**30/09/03 from Asia Pacific Regional Working Group:** The meningitis surveillance has identified Hib as the most common cause of bacterial meningitis in children under five years. A formal Hib disease burden assessment will be undertaken on 2003 data. A timeline of activities, including consideration by Government need to add Hib vaccine, has been drafted for a GAVI application in April 2004 for DTP-Hib vaccine and injection safety support.

## MYANMAR

**30/09/03 from South East Asian Regional Working Group:** Due to the issue of program support cost and the delay in the decision to waive it or not, there has been a delay in the transfer of ISS money to Myanmar through WHO. Although they have been approved for both new vaccine introduction and ISS support, so far Myanmar has not been able to use the money while partners continue to discuss how best to channel the money. The country has requested the DQA to be postponed to 2004.



## NEPAL

### 30/09/03 from South East Asian Regional Working Group:

- Despite the insurgency problem, the introduction of Hepatitis B vaccine in Nepal is reported to be on track. Of the six planned recruitment of additional staff to help the national immunization program, three have already started work. The remaining are expected to join shortly.
- The country has just completed their DQA.

## NICARAGUA

**30/09/03 from Alba Maria Ropero, WHO/PAHO:** The International Evaluation of the EPI Program is scheduled for 20-31 October 2003.

## NIGER

**30/09/03 from Oya Afşar, WHO/HQ:** The response to conditions for Injection Safety has been sent to the WHO Inter-Country office.

## PAPUA NEW GUINEA

**30/09/03 from Asia Pacific Regional Working Group:** It was indicated that the country is unlikely to apply for assistance from the Vaccine Fund before late 2004.

## RWANDA

**30/09/03 from East and South African Sub-Regional Working Group:** The draft action plan for the FSP implementation strategy will be shared by mid-September 2003 at the latest.

## SAO TOME & PRINCIPE

**30/09/03 from Oya Afşar, WHO/HQ:** Currently, 25-30 health workers are in training for New Vaccines introduction. Introduction of Yellow Fever and Hepatitis B vaccines were expected to begin this month.

## SENEGAL

**30/09/03 from GAVI Secretariat:** Application for New Vaccines (HepB and Hib) has been approved after submitting clarifications requested in the May 2003 round.

**30/09/03 from Oya Afşar, WHO/HQ:** A joint visit from WHO ICP, AFRO and HQ is proposed for the end of the year to discuss options for Hib vaccine until pentavalent vaccine becomes available.

## SIERRA LEONE

**30/09/03 from Oya Afşar, WHO/HQ:**

- The Yellow Fever outbreak is still occurring.
- DTP3 coverage is too low to consider submitting an application for New Vaccines.

## SRI LANKA

**30/09/03 from South East Asian Regional Working Group:** The prospective surveillance for Hib diseases in Colombo has commenced. In addition, the regional office is planning for a training of laboratory technicians from member states for Hib isolation and

identification at CMC Vellore in the last week of October 2003. Following this, there will be a network of laboratories in the region for Hib surveillance.

## SUDAN

**30/09/03 from Oya Afşar, WHO/HQ:** A country visit is scheduled from 29 September – 20 October 2003. The participants are Drs Oya Afşar (WHO/HQ), Ezzedine Mohsni (WHO/EMRO), Frank Mahoney (WHO/EMRO), Naveed Sadozai (WHO/Afghanistan), Mohamad Hajar (WHO/Yemen). The purpose of the visit are the following:

- Monitor progress in the implementation of plans to improve EPI coverage.
- Review district-level performance indicators and reporting of these indicators to the regional office.
- Monitor implementation of district-level microplans in selected areas.
- Review progress on improving EPI coverage with the ICC.
- Review surveillance data for EPI target diseases.
- Review implementation of recommendations for DQA audits.
- Provide assistance for the preparation of GAVI documents.
- Provide specific recommendations with timelines.

## TANZANIA

**30/09/03 from East and South African Sub-Regional Working Group:** The draft Financial Sustainability Plan was finalized. A country visit was organized from WHO/AFRO from 7-17 September to complete the process, and guide the development of the action plan.

## TIMOR LESTE

**30/09/03 from South East Asian Regional Working Group:** Country was encouraged to submit an application for Strengthening Immunization Services, however they have deferred till next year.

## TOGO

**30/09/03 from Oya Afşar, WHO/HQ:** Planning to resubmit application for New Vaccines (HepB).

## UGANDA

**30/09/03 from East and South African Sub-Regional Working Group:** The draft Financial Sustainability Plan is ready. Awaiting pre-review this month.

## VIETNAM

**30/09/03 from Asia Pacific Regional Working Group:**

- Implementation continues to progress well, with Hepatitis B vaccine now covering the whole birth cohort.
- EPI review is scheduled to commence on 17 November 2003, which will review new vaccine introduction, information system and other issues.
- A temperature monitoring study of cold chain from national to commune level (in two provinces) will be conducted in October 2003.

## ZAMBIA

**30/09/03 from East and South African Sub-Regional Working Group:** The draft sections 1 and 2 of the Financial Sustainability plan are completed. Sections 3 and 4 are being worked on at present. There will be a country visit from WHO/AFRO in the last week of September.

## ZIMBABWE

**30/09/03 from GAVI Secretariat:** Application for Injection Safety has been approved after submitting clarifications requested in the May 2003 round.

RWG will no longer be “allocated” tasks apart from coordination, for which it will be funded by the GAVI Secretariat.

**RWG Role in Measles Elimination and Hepatitis B control:** The WPRO Regional Committee Meeting (RCM) were to meet from 8-12 September to consider the adoption of resolutions on regional measles immunization and Hepatitis B control.

## REGIONAL ACTIVITIES

### ASIA PACIFIC REGIONAL WORKING GROUP

**30/09/03 from Asia Pacific Regional Working Group:** The twelfth Asia Pacific Regional Working Group meeting was held in Mongolia on 2 September 2003. The following is a summary from the meeting:

**Country Updates:** Are listed under specific country headings.

**Role of RWG (and budget):** The GAVI Board has continued to increase recognition of the RWG for GAVI functions. However, recognizing that it is a coordinating rather than an implementing entity, the

Regional Meetings of Relevance to the GAVI Objectives: September - December 2003					
Title of Meeting	Start	Finish	Location	Responsible Partner	Region
<b>Sep-03</b>					
Asia Pacific Regional Working Group Meeting	1-Sep	2-Sep	Mongolia	WHO/WPRO	WPR
Inter-country meeting on Measles Elimination	3-Sep	6-Sep	Tunisia	WHO/EMRO	EMR
8th Meeting of Operation MECACAR	8-Sep	10-Sep	Budapest, Hungary	WHO/EURO	EUR
13th Meeting of Interagency Coordinating Committee	11-Sep	11-Sep	Budapest, Hungary	WHO/EURO	EUR
<b>Oct-03</b>					
Workshop on EPI Modules Training for EPI Managers in Central America, Mexico and the Caribbean	6-Oct	10-Oct	Mexico	WHO/PAHO	AMR
First GAVI Executive Committee Meeting	29-Oct	29-Oct	New York	GAVI Secretariat	Sub-Committee
<b>Nov-03</b>					
EPI Training Workshop for Andean Countries	3-Nov	7-Nov	Ecuador	WHO/PAHO	AMR
Workshop on Vaccine Safety for Caribbean Managers	10-Nov	14-Nov	Curacao	WHO/PAHO	AMR
Caribbean EPI Managers Workshop	17-Nov	20-Nov	tbd	WHO/PAHO	AMR
Technet 21 Global Meeting	18-Nov	20-Nov	Antalya, Turkey	Global	Global
<b>Dec-03</b>					
Workshop on Vaccine Safety for the Andean Region	1-Dec	5-Dec	Ecuador	WHO/PAHO	AMR
7th GAVI Eastern Mediterranean					