

# Update ON COUNTRY LEVEL GAVI &

## ON COUNTRY LEVEL GAVI & VACCINE FUND RELATED ACTIVITIES

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**20 December 2002** 

## 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.
- There will be an additional GAVI review from 15-24 January 2003 for progress reports and Financial Sustainability Plans.
- The 9<sup>th</sup> round deadline is 2 May 2003. The review for round 9 will take place between 29 May – 6 June 2003.

#### **REVIEW PROCESS**

**20/12/02** from GAVI Secretariat: Out of 25 countries that applied in the eight round, five applied for Immunization Services support, 11 for New Vaccines support, and 21 for Injection Safety support. The Independent Review Committee reviewed 37 applications from 19 countries in this round. Five were approved, 15 received approval with clarifications, 10 received conditional approval, and seven were requested to resubmit applications. Detailed results are classified under specific country headings.

## ADVOCACY AND COMMUNICATION TASK FORCE

20/12/02 from the Advocacy and Communication Task Force:

Anti-Vaccine Rumours: In the coming year, a priority for the ACTF will be the development of effective communication strategies for responding to anti-vaccine rumours. An ACTF teleconference on December 16 will outline initial steps, which are expected to include global and regional workshops to share experience, lessons and develop effective tools. Among others the Global Mid-Year Meeting on Communication for Immunization, hosted by UNICEF in New York, is expected to focus on prevention and response to rumour and adverse events.

UNICEF is developing a **rapid response** mechanism for responding to negative media, which will operate in close collaboration with WHO. The Senior Communication Officer soon to be appointed to the

GAVI Secretariat is expected to work closely with UNICEF and WHO on the response mechanism, particularly when the incidents are specifically GAVI-related. For more information on rapid-response to rumour, contact ACTF Chair, Heidi Larson on hlarson@unicef.org.

In January 2003, a special edition of the **Drumbeat**, released by the Communication Initiative will focus on the handling of negative media surrounding immunization. www.comminit.com.

The ACTF is drawing on partner experience in responding to anti-vaccine rumours, including that surrounding MMR, Hepatitis, DTP, vaccine safety, and the confusion of TT vaccine and contraception, among others. Please share your experience of the impact of rumour and lessons learned regarding rumours about immunization. Contact ACTF Coordinator, Sara Cameron on scameron@unicef.org.

State of the World's Vaccines and Immunization: The launch of the State of the World's Vaccines and Immunization was a great success, generating extensive press coverage not only in Europe and USA but also resulting from the launches in Cairo, Bangkok, and Dakar. Cairo was especially notable with the First Lady of Egypt present along with representatives of all agencies. SOWVI is being locally translated into Arabic. SOWVI will go into its second printing in early 2003. For more information contact Susan MacKay on mackays@who.int.

E-clippings related to the SOWVI launch will be available from the Drumbeat (<u>www.cominit.com</u>) in January 2003.

Making Immunization a Centrepiece in International Development: In 2003, the Vaccine Fund, UNICEF, WHO and other ACTF partners will begin work on a series of advocacy papers and broadcast materials promoting the value of vaccines. Issues to be covered in the series may include "Why we need vaccines?", "How are vaccines made?", "Are Vaccines Safe?", and "Vaccines and Global Security", among others. Prominent members of the Vaccine Fund Board may author the papers. For more information, contact Nancy Ives or Jim Jones jjones@vaccinefund.org from the Vaccine Fund.

Did You Open the Box? The ARK Survey: 1500 English versions of the GAVI Advocacy Resource Kit were distributed a year ago, most through WHO and UNICEF and other agencies to regional and country offices. The ARK contains a huge amount of information. A survey is now underway to find out how far the ARK fulfilled its promise. Did those who received it open the box? Read the materials? Adapt materials for local use? Did the content help improve training, improve advocacy, help change policies? Was it a good idea to distribute so much material in one package? Please get in touch with ACTF member Heidi Lasher at CVP/PATH to share your experience with the ARK on <a href="mailto:hlasher@path.org">hlasher@path.org</a>.

Building Alliances with Religious Groups: UNICEF is sharing with GAVI partners an advanced draft of a guideline for building effective alliances with religious groups as a strategy for expanding immunization access. The guideline includes options to be considered if opposition to immunization emerges in a religious group or sect. The draft will be field tested over the next six months before final revision and publication in 2003. Anyone interested in seeing the draft or participating in the field trials should contact Judy Graeff at <a href="mailto:igraeff@unicef.org">igraeff@unicef.org</a>

**Favourite Links:** CVP/PATH has updated their Library Resources Page and can be viewed on <a href="http://www.childrensvaccine.org/html/immunization-resources.htm">http://www.childrensvaccine.org/html/immunization-resources.htm</a>. This includes immunization resources from many countries.

CVP/PATH is on schedule to complete a set of PowerPoint templates for immunization advocacy at country level. For more information, please contact ACTF co-Chair Scott Wittet on swittet@path.org

Introducing Rotavirus, Pneumoccocal and Other New Vaccines: With support from USAID, the Change Project is developing an advocacy strategy to promote the introduction of new vaccines. The research phase is underway for strategy related to the introduction of rotavirus and pneumoccocal vaccines, to help avoid some of the problems associated with the introduction of Hib vaccine. For more information, contact ACTF member Rebecca Fields on rfields@aed.org

Immunization Media-Alert: UNICEF will distribute immunization and GAVI-related news items to all ACTF members as they arise. Please contact ACTF Coordinator Sara Cameron on <a href="mailto:scameron@unicef.org">scameron@unicef.org</a> if you would like to be included in the immunization news-alert mail list and/or if you have immunization or GAVI news items to share.

#### FINANCING TASK FORCE

20/12/02 from the Financing Task Force:

**GAVI Partners Meeting** – **Dakar, Senegal:** Six countries, Cambodia, Cote d'Ivoire, Ghana, Guyana, Kyrgyzstan and Mali, presented their signed FSPs during the GAVI Partners meeting in Dakar, Ministers and Deputy Ministers of Financing from the countries had a panel discussion on financing immunization and health. The big event for the first round of countries submitting their FSPs was the signing of the Dakar Declaration signed by 13 countries.

FSP Submission: Twelve out of thirteen countries have submitted their financial sustainability plans to the GAVI Secretariat. Madagascar will for creditable reasons defer submission until 2003. The plans are being pre-reviewed by Patrick Lydon at WHO, followed by an Independent Review by the Independent Review Committee in January 2003. Country financial sustainability plans will be available to partners following the independent review.

#### IMPLEMENTATION TASK FORCE

20/12/02 from the Implementation Task Force: *Monitoring & Evaluation Call – 11 December* 

Paper on Performance Based Funding for Strengthening Routine Immunization Alternatives to the Current "Reward" Mechanism: The GAVI Board asked the ITF to explore alternatives to the Performance Based Funding Mechanisms. This activity was added to the M&E workplan. DFID prepared a paper with NORAD and the Vaccine Fund to explore this issue. The main objectives of the funding mechanism are to provide:

- I. Incentives linked to performance to improve and maintain routine immunization coverage
- II. Resources to provide funding to countries so that they have resources to increase routine coverage.

Vaccine Fund thinking on changing ISS funding: As an initial idea to an alternative to the present funding mechanism, the Vaccine Fund suggested that the payment of investment funding over 4-5 years could be based on the increased amount of the initial share. It would be paid in several instalments. This option gives flexibility to the alliance to revisit the funding in case there are serious problems with management or evidence of performance over time.

**Indicators:** It was decided that DTP3 coverage should continue to be used as a basis for measuring increased performance and providing rewards. DTP3 is effective in principle for measuring change and improvement, however this may be over-emphasised at the expense of other important measures of success. A basket of indicators showing success in other areas should be reviewed as a basis of additional rewards. It was suggested that part of the payment should be an investment that is not dependent on performance.

#### Capacity Building Call – 10 December

Cold Chain Activities on Capacity Building Workplan: The three activities on 'Cold Chain and Logistics' in the Capacity Building workplan were selected as joint partner activities which will help alleviate vaccine management constraints at the national level:

- Incomplete five year plans It appears that many 5year national plans do not include a system of replacing equipment over time or mechanisms to check inventory or cold chain and logistics monitoring systems.
- Inadequacy of central vaccine cold stores Failure to manage the central store and to monitor and record temperature needs to be urgently addressed in many countries.
- Plans for CB at district levels relating to the Access approach – there is a wealth of information and training material on cold chain and logistics available for use at the district level. The process of selecting

the most appropriate materials for training and supervision at district level has not yet been addressed.

Cold Store Certification Initiative (CSCI) – Vaccine Management Training Network: The first meeting of the CSCI was held in December 2001. In the first quarter of 2003, a number of cold store certification personnel will be trained at WHO/HQ followed by practical training in five selected countries.

In addition, the Global Vaccine Training Network (GTN) will be formed in 2003 to target vaccine managers, cold store managers, and EPI managers.

UNICEF have selected approximately 22 countries for strengthening cold chain system in 203. These countries have been selected on the criteria that they have adequate UNICEF human resource capacity and have had national level stock-outs affecting 13 million children.

## Strengthening Capacity at District Level for Cold Chain and Logistics Activities:

**Training** - Cold chain and logistics activities are some of the most critical in vaccine management and there is a wealth of material available from partner agencies, yet vaccine management training and supervision at district level is weak.

It was indicated that some countries in AFRO have developed simplified job aids from training materials. Job aids and indicators will be reviewed and will form the basis of further problem solving in this critical area.

**Training Logisticians** – To strengthen district vaccine management, AFRO have decided to select ten national logisticians for eight weeks of training per year who will assist 2-3 countries to improve their vaccine management systems. They will ensure continuous training, integral with the monthly supervision process, in small modules related to the perceived weaknesses of the logistics system.

### Monitoring & Evaluation Call – 27 November

Session on M&E Workplan Item – Design and Follow-up of Reward Mechanism Identification of Alternative Indicators for Rewards: The Board agreed that there is the need to look at alternative ways of funding, parallel to existing mechanisms. DFID and NORAD have discussed the activity on reward mechanisms and raised questions on the following areas for discussion:

- Single indicator versus several indicators
- <u>Funding mechanism</u> as countries fail their DQAs and fail to increase immunization coverage, it may become more difficult for them to achieve targets if funding is terminated. A possible solution could be a mixture of a basic remuneration system, plus incentives for good performance on a case by case basis.
- <u>Performance</u> should performance be based on a quantitative (DTP3 level) mechanism or should it shift towards a more qualitative assessment?
- Level of Funding Currently, funding is fixed at \$20 per child, however should this be related to what a country needs to achieve their outcomes?

Independent Review Committee Proposal for Injection Safety Applications: Fifty percent of injection safety proposals in Round 8 failed to pass IRC review and receive funding, which indicates that countries are not aware of what constitutes adequate content of their proposals, such as timelines, indicators and targets. As a result, the IRC suggested that the ITF develop a template for injection safety proposals in order to assist countries that have not yet passed to improve their proposals for the next round in May 2003.

## Report-back from the Board Meeting in Dakar, Senegal (November 2002):

- Workplans The consolidated workplans were presented to the Board who decided to defer the commitment of funds until there has been a further review of workplans by a sub-committee of the Board. It was emphasised that activities that give an "added value to GAVI" will be funded. WHO and UNICEF are currently reviewing RWG needs to ascertain if there are activities which they can fund internally. The Board is expected to complete the review and reach a decision by end-January 2003.
- GAVI Milestones The presentation on refinements of the GAVI Milestones were presented to the Board, and they agreed that there needs to be continued analysis of the milestones with the possibility of modifying them. Some milestones are to be refined, and new ones to be added.

#### Capacity Building Call - 26 November

**Update on NESI project:** The Network for Education and Support in Immunization (NESI) project commenced in September 2002. They held their first meeting in Nairobi, Kenya from 9-11 December 2002 consisting of delegates from Kenya, Tanzania and Uganda including EPI programme managers, academia and multi-lateral agencies. The training meeting will focus on New Vaccines, past experiences in the African region and lessons to be learned from new vaccine introduction. The programme is well integrated with new vaccines regional WHO focal points, and the ICP office (Nairobi). The primary objectives of the meeting were to:

- Train potential trainers in various aspects of the introduction and maintenance of new vaccines
- Encourage the sharing of country experiences during the recent introduction of new vaccines into EPI programme
- Constitute a forum that stimulates the full interaction of academia with the EPI implementers so that future adaptations in pre-service training can be instituted

Requests for Proposals from the Merck Company Foundation (MCF): When industries became partners of GAVI, one of the major commitments was education and training. Dr Elaine Esber of MCF has designed a programme to bring forth this process. The MCF has agreed to fund the Immunization Training programmes up to \$200,000 per year up to for years. The objective of this initiative "Merck Vaccine Network – Africa" (MVAN-A) is to provide training in Africa for national and regional mid to high-level programme managers of vaccine management and immunization service programmes. The focus of the initiative is on countries within Africa who are Vaccine Fund eligible.

The criteria for the project are selected institutions in Africa in collaboration with US and European academic institution counterparts, and must be fully integrated with the ICCs and other GAVI activities. The programme will use existing source materials (documents, assessment tools, etc. designed by GAVI partners) designed to address the needs of a country as recognized by GAVI. The programme is designed to be supportive and complementary to other programmes, and will avoid duplication and competitiveness of other projects. Merck will monitor the project, however the activities depend on the people working in the countries on these projects.

The deadline for applications is March 2002.

## STRENGTHENING IMMUNIZATION SERVICES

**20/12/02 from Jhilmil Bahl, WHO:** A new CD-ROM on "Resources for Immunization Managers" is out, containing an extensive collection of technical documents, reports and training materials that could be useful for immunization managers in the field.

The documents are classified by date into eight categories:

- Sustainable Financing
- Management
- Strengthening Human and Institutional Resources
- Advocacy & Communication
- Vaccine Supply & Quality,
- Service Delivery
- Logistics
- Surveillance

Documents can also be accessed through an alphabetical listing and a search engine. Useful web addresses are also included.

Documents can be freely downloaded and links to the French versions have been included where possible.

For copies of the CD ROM, please contact epitraining@who.int.

**20/12/02** from the Implementation Task Force: Drafts 1&2 of Immunization In Practice (IIP) have been reviewed internally in WHO and submitted to CVP/PATH. The 3<sup>rd</sup> draft is currently on the Web for external reviewers identified to review either parts or the whole modules. Dr Khristina Engstrom (previously involved with Immunizaiton Essentials) has been recruited to review the entire draft. The 3<sup>rd</sup> draft can be found on the following web-site:

http://www.who.int/vaccinesdiseases/epitraining/immprac.htm.

#### **COUNTRY INFORMATION**

#### **ANGOLA**

**20/12/02 from Robin Biellik, WHO:** A national EPI review is tentatively scheduled from 10-21 March 2003 as a pre-requisite for GAVI submission.

#### **AZERBAIJAN**

**20/12/02 from GAVI Secretariat:** Application for Injection Safety received approval with clarification in 8<sup>th</sup> round.

#### **BANGLADESH**

**20/12/02 from GAVI Secretariat:** Application for Injection Safety requested to be resubmitted in 8<sup>th</sup> round.

#### **BHUTAN**

**20/12/02 from GAVI Secretariat:** Application for Injection Safety received approval with clarification, and application for New Vaccines (Hib) received conditional approval in 8<sup>th</sup> round.

#### **BURKINA FASO**

**20/12/02 from GAVI Secretariat:** Application for Injection Safety received approval in 8<sup>th</sup> round.

#### **CAMBODIA**

**20/12/02 from Asia Pacific Regional Working Group:** The country will achieve exclusive use of ADs for EPI nationally by end of 2002, however new vaccines have only been introduced in one province, and ISS funds have yet to show an impact.

#### **CAMEROUN**

**20/12/02 from GAVI Secretariat:** Application for Injection Safety received approval with clarification and application for New Vaccines (Yellow Fever) received conditional approval in 8<sup>th</sup> round.

#### **CENTRAL AFRICAN REPUBLIC**

**20/12/02 from GAVI Secretariat:** Applications for Immunization Services Strengthening and New Vaccines (Yellow Fever) were approved, and application for Injection Safety received approval with clarifications in 8<sup>th</sup> round.

#### **CHAD**

**20/12/02 from GAVI Secretariat:** Applications for Immunization Services Strengthening, New Vaccines (Yellow Fever) and Injection Safety received conditional approval.

#### **CHINA**

**20/12/02 from Asia Pacific Regional Working Group:** Procurement of supplies (locally produced Hepatitis B and safe injection supplies) is expected to be complete by the end of the year.

#### CONGO

**20/12/02 from GAVI Secretariat:** Applications for Immunisation Services Strengthening, New Vaccines (HepB, Hib and Yellow Fever) and Injection Safety were requested to be resubmitted in 8<sup>th</sup> round.

#### **ERITREA**

**20/12/02 from GAVI Secretariat:** Application for Injection Safety requested to be resubmitted in 8<sup>th</sup> round.

#### **GHANA**

**20/12/02 from GAVI Secretariat:** Application for Injection Safety received approval with clarifications in 8<sup>th</sup> round.

#### 20/12/02 from Messeret Eshetu, WHO/Ghana:

- DQA was conducted from 8-23 July where Ghana scored 87.2% with assistance from Geneva
- Mission on evaluation of the sentinel site for Paediatric Bacterial Meningitis in Accra in greater Accra Region (Korle Bu Teaching Hospital) and expansion of the site to Ashanti Regional Capital in Kumasi (KATH) was conducted from 7-11 December.
- Financial Sustainability Plan was submitted to GAVI in November 2002.
- The MOH has given clearance that FSP evaluation process will be carried out in the week of 13 January 2003.
- Post new vaccine introduction evaluation is planned for the third week of March 2003 by an AFRO team.

#### **GUINEA BISSAU**

**20/12/02 from GAVI Secretariat:** Application for Immunization Services Strengthening received approval with clarifications and application for Injection Safety received conditional approval in 8<sup>th</sup> round.

#### **KYRGYZSTAN**

**20/12/02 from GAVI Secretariat:** Application for Injection Safety received conditional approval in 8<sup>th</sup> round

## 20/12/02 from the European Regional Working Group:

- A Hib rapid assessment was conducted from 18-23 November 2002 by Drs Platanov and Feikin of CDC and Dr Mahoney of NAMROZ.
- An MLM course will be conducted in Osh from 16-21 December 2002 to train 30 managers from southern districts of Kyrgyzstan. The course will be supported by WHO/EURO.

#### **KENYA**

**20/12/02 from GAVI Secretariat:** Application for Injection Safety received approval with clarifications in 8<sup>th</sup> round.

#### **LAO PDR**

20/12/02 from Asia Pacific Regional Working Group: The RWG participated in an ICC meeting that helped to set an agenda to prepare a new strategy with RWG support, on the use of ISS funds more tightly focussed on addressing the critical issues to increase coverage. The approach focuses on a detailed district microplanning and then providing the resources to implement the plan, with evaluation of the process in seven pilot districts before extending nationally. The

Lao ICC is working well with open and frank discussions from the national EPI and good guidance from partners.

#### **MAI.I**

**20/12/02 from GAVI Secretariat:** Applications for Injection Safety and New Vaccines (HepB) received approval with clarification in  $8^{th}$  round.

#### **MALAWI**

**20/12/02 from Robin Biellik, WHO/HQ:** The EPI programme in Malawi received the WHO/AFRO Task Force on Immunization (TFI) Best EPI Performance Award for 2002, for outstanding performance in Routine, Supplemental and Surveillance.

#### **MAURITANIA**

**20/12/02 from GAVI Secretariat:** Application for Immunization Services Strengthening was approved, and applications for New Vaccines (HepB and Hib) requested to be resubmitted in 9<sup>th</sup> round.

#### **MONGOLIA**

**20/12/02 from Asia Pacific Regional Working Group:** An agreement is needed from JICA to transfer funding for application of DTP-HepB vaccine.

#### **MOZAMBIQUE**

**20/12/02 from GAVI Secretariat:** Application for Injection Safety received approval with clarifications in 8<sup>th</sup> Round.

#### **NIGERIA**

**20/12/02 from GAVI Secretariat:** Application for New Vaccines (Yellow Fever) received conditional approval in 8<sup>th</sup> round.

#### **PAPUA NEW GUINEA**

**20/12/02 from Asia Pacific Regional Working Group:** The country wishes to apply in May 2003, however more political requirement is needed to be able to apply. Implementing the three key recommendations of the EPI review would be useful.

#### **RWANDA**

**20/12/02 from GAVI Secretariat:** Application for Injection Safety received approval with clarifications in 8<sup>th</sup> round.

#### **SAO TOME & PRINCIPE**

**20/12/02 from GAVI Secretariat:** Application for New Vaccines (HepB and Yellow Fever) were approved and application for Injection Safety received approval with clarifications in 8<sup>th</sup> round.

#### SENEGAL

**20/12/02 from GAVI Secretariat:** Application for New Vaccines (HepB and Hib) were requested to resubmit in 8<sup>th</sup> round.

#### **SOMALIA**

**20/12/02 from GAVI Secretariat:** Application for Injection Safety received approval with clarifications in 8<sup>th</sup> round.

#### **TANZANIA**

**20/12/02 from GAVI Secretariat:** Application for Injection Safety received approval with clarifications in 8<sup>th</sup> round.

#### TOGO

**20/12/02 from GAVI Secretariat:** Application for New Vaccines (Yellow Fever) received conditional approval in 8<sup>th</sup> round.

#### **TURKMENISTAN**

**20/12/02 from GAVI Secretariat:** Application for Injection Safety received conditional approval in 8<sup>th</sup> round.

#### **UZBEKISTAN**

**20/12/02 from European Regional Working Group:** A Hib rapid assessment was conducted from 11-16 November 2002 by Drs Platanov and Feikin of CDC and Dr Mahoney of NAMROZ.

#### **VIETNAM**

**20/12/02 from GAVI Secretariat:** Application for Injection Safety received approval with clarifications in 8<sup>th</sup> round.

**20/12/02** from Asia Pacific Regional Working Group: The new vaccine introduction has progressed well, and will achieve national coverage by 2003. Work is still needed to increase timely delivery of birth dose. Clarifications for injection safety

application have been prepared and endorsed by the ICC.

## **REGIONAL ACTIVITIES**EASTERN MEDITERRANEAN REGIONAL WORKING GROUP

**20/12/02 from Eastern Mediterranean Regional Working Group:** The 5<sup>th</sup> Eastern Mediterranean Regional Working Group meeting will be held in Cairo, Egypt from 6-7 January 2003. The provisional programme for the meeting includes:

- Briefing on GAVI Board and ITF last meetings
- Briefing on Vaccine Management Training Initiative
- Country progress reports focussing on implementation of multi-year plans using GAVI funds, achievements and constraints
- Role of Country ICC in proper management of GAVI process
- Increasing routine coverage at district level
- Cold Store Certification Initiative

## ASIA PACIFIC REGIONAL WORKING GROUP

**20/12/02 from Asia Pacific Regional Working Group:** The RWG held a "core group" meeting in Lao PDR on 10 December 2002. The primary focus was to review and help in GAVI implementation in Lao PDR, in particular the use of ISS funds. The RWG has previously expressed concerns about the use of the ISS money being able to impact on routine immunization coverage.

**END** 

Regional Meetings of Relevance to the GAVI Objectives: December 2002 - December 2003					
Title of Meeting	Start	Finish	Location	Responsible Partner	Region
Dec-02  New Vaccine Introduction Meeting in East Africa	9-Dec	11-Dec	Nairobi, Kenya	WHO/AFRO (E&S Africa)	AFR
Carribean Managers EPI Workshop	9-Dec	12-Dec	?	WHO/PAHO	AMR
Asia Pacific Regional Working Group Meeting	11-Dec	11-Dec	Laos	WHO/WPRO	WPR
Jan-03 Eastern Mediterranean Regional Working Group meeting	6-Jan	7-Jan	Cairo, Egypt	WHO/EMRO	EMR
Sub-Regional Workshop on Introduction of New Vaccines and Strengthening National Immunization Programmes	20-Jan	22-Jan	Kiev, Ukraine	WHO/EURO	EUR
6th GAVI European Regional Working Group Meeting	23-Jan	23-Jan	Kiev, Ukraine	WHO/EURO	EUR
Feb-03 EPI Training Workshop South East Asian Regional Working Group Meeting Mar-03	Feb 4-Feb	Feb 4-Feb	tbd New Delhi, India	WHO/PAHO WHO/SEARO	AMR SEAR
Apr-03 EPI Training Workshop May-03	April		tbd	WHO/PAHO	AMR
EPI Training Workshop  Jun-03  Sub-Regional EPI Managers'  Meeting for Andean Region, Central  America/Mexico and Southern  Cone	May June/Jul y	May June/July	tbd	WHO/PAHO WHO/PAHO	AMR AMR
20th Inter-Country Meeting of National EPI Managers WHO/EMRO	29-Jun	2-Jul	Syria	WHO/EMRO	EMR
Jul-03 6th GAVI Eastern Mediterranean Regional Working Group Meeting Aug-03	3-Jul	3-Jul	Syria	WHO/EMRO	EMR
Inter-country meeting on Measles Accelerated Control	28-Aug	31-Aug	Tunisia	WHO/EMRO	EMR
Sep-03 Inter-country meeting on Measles Elimination	3-Sep	6-Sep	Tunisia	WHO/EMRO	EMR
Oct-03 Nov-03 Dec-03					
7th GAVI Eastern Mediterranean Regional Working Group Meeting	8-Dec	9-Dec	Cairo, Egypt	WHO/EMRO	EMR