



Update

ON COUNTRY LEVEL GAVI & VACCINE FUND RELATED ACTIVITIES

*The information contained in this Update depends upon your contributions
Please send inputs for inclusion to: dassanayakeh@who.int*

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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 **3rd 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.**

ADVOCACY & COMMUNICATION TASK FORCE

28/08/03 from Susan Mackay, WHO/HQ: A Joint WHO/UNICEF Consultation on Advocacy and Communication for Immunization will be held in Geneva, Switzerland from 28-29 August 2003. The draft agenda includes:

- Overview of new global environment around vaccines and immunization
- Regional issues in communication for immunization
- Draft WHO-UNICEF joint strategy for immunization advocacy and communications
- Joint work-planning
- Next Steps and Recommendations

IMPLEMENTATION TASK FORCE

**28/08/03 from the Implementation Task Force:
Capacity Building Call – 30 July 2003**

The purpose of the call was to discuss waste management, including the workshops in countries, and discussion of issues for action.

Waste Workshops: Four waste management workshops were held earlier this year in the following countries:

- Senegal (national)
- India (inter-country)

- Tanzania (inter-country)
- Indonesia (national)
- An inter-country waste management workshop is planned for September 2003 in Senegal.

The objectives of the workshop were to:

- Integrate immunization and environmental health managers
- Demonstrate waste management technologies
- Present technical information on waste management regulation, systems and technologies
- Discuss country systems and experiences
- Introduce district planning methodology
- Prepare plans of actions (national or inter-country)

Inter-country workshops focused on personal action plans for WHO follow-up while national workshops worked with district microplans. It was noted that environmental and immunization managers worked well together since both groups have a practical approach.

Issues around incineration:

A. Construction of Incinerators

- Hospital incineration is one of the best methods of waste disposal at this level, however hospital incinerators are often unavailable or not working.
- The de Montfort incinerator is very good, but requires careful installation, strictly according to the specifications given, regular/expensive maintenance, and careful utilization by well-trained operators.
- It was suggested that consultants are needed to carefully adapt the engineering specification so that construction of incinerators can be carried out to the highest standards using locally available materials.
- Syringe melting research has very important implications for health centers.
- There is a need for system performance and cost data as such data is scarce.

As a solution to some of the problems mentioned, the following have been suggested:

- Assemble a kit of parts manufactured in an industrialized country including all the right materials in the right dimensions and qualities, and ship this to African countries for assembly. Advantages of this is that there will be a control of

quality materials, however potential disadvantages could be the cost of transport and materials.

- Circulate a generic specification that gives optimum materials and dimensions together with terms of reference for an engineering consultant to visit each interested country and “translate” the generic specification into a local specification, taking account of local materials, etc. Advantages are the optimum use of local materials and lower costs, however disadvantages are that local materials may still be inadequate.

B. Emission Standards

Small scale incinerators appear to be highly polluting. WHO recognizes that there is concern about the release of toxic pollutants from the incineration of healthcare waste in small scale incinerators, especially from the emission of dioxins/furans. WHO recently commissioned an analysis of the emissions from three types of small scale incinerators.

C. Training

There is the need to ensure that there are global training materials for the operators of incinerators. It was noted that there is a section on incineration in the revised version of the *Immunization in Practice* and MLM modules.

D. Planning

National plans need to outline where incinerators will be built. It is possible to calculate the number of incinerators needed in a country if the burning times and volume of waste is taken into consideration.

Needle Removers: The concept of needle removal is well accepted, however the equipment is not optimized and too expensive. There needs to be more development and evaluation of this in the field, and issues of outreach immunization and use in campaigns need to be explored.

DATA QUALITY AUDIT

28/08/03 from Olivier Ronveaux, WHO/HQ: Data Quality Audits have been conducted so far in Lao PDR, Cambodia, Niger, Senegal, and Madagascar. Results will be available shortly.

IMMUNIZATION SAFETY PRIORITY PROJECT

28/08/03 from Alison Delo, WHO/HQ: The 4th meeting of the WHO Steering Committee on Immunization Safety was held on 16-18 June 2003. The meeting was well attended, with participation from representatives of the Ministries of Health, UNICEF, CDC, PATH, BASICS, the International Council of Nurses, the International Paediatric Association, the Developing Country Vaccine Manufacturers Network, the International Federation of Pharmaceutical Manufacturers Associations, the International Association of Safe Injection Technology and staff from WHO/HQ, Regional Offices and the Mediterranean Centre for Vulnerability Reduction.

The primary focus of the meeting was an evaluation of the level of integration of safety into the core work of immunization programmes in countries and at WHO, both at global and regional level. Progress towards the

achievement of global safe immunization was applauded, although it was recognized that much remains to be done. The Committee was encouraged by the increase in support provided to countries for injection safety through the Vaccine Fund and acknowledged the support of all those involved in the preparation of applications. It recommended the continuation of this support and that countries be made aware of the ability to use these funds, provided that a related action plan is included in the application, for strengthening National Regulatory Authorities. The level of awareness of members of ICCs of immunization safety issues was discussed at length, with the recommendation that WHO take steps to improve ICC knowledge in this area.

Other issues discussed were: quality assurance of vaccines and injection equipment; supply of AD syringes and safety boxes; strengthening of National Regulatory Authorities; improving AEFI surveillance, investigation and management; and waste management.

The full recommendations of the meeting were published in the 8 August edition of the WHO Weekly Epidemiological Record.

STRENGTHENING IMMUNIZATION SYSTEMS

28/08/03 from Jhilmil Bahl, WHO/HQ: WHO/HQ plans to update the CD-ROM titled Immunization Resources for Managers which currently contains over 400 documents that are useful for immunization managers in the field. The CD-ROM was distributed widely to all regions.

Please send any relevant documents prepared by your organization to be included in the updated CD to Jhilmil Bahl (bahlj@who.int)

COUNTRY INFORMATION

ALBANIA

28/08/03 from Oya Afşar, WHO/HQ:

- The Hib Cost Effectiveness Analysis (CEA) was performed by Gary Ginsberg from 7-13 April 2003. The country plans to submit a Hib application.
- The Financial Sustainability Plan is currently under preparation.
- The MLM and Injection Safety training courses will be held at the end of 2003.

ARMENIA

28/08/03 from Oya Afşar, WHO/HQ:

- A Hib RAT is scheduled to take place from 10-17 November 2003. Drs A. Platonov and O. Afsar will conduct the Hib RAT.
- The Financial Sustainability Plan is currently under preparation.

AZERBAIJAN

28/08/03 from Oya Afşar, WHO/HQ:

- The injection safety assessment will be conducted in the first quarter of 2004.
- The Financial Sustainability Plan is currently under preparation.

BANGLADESH

28/08/03 from Oya Afşar, WHO/HQ: HepB monovalent has been introduced in two provinces and is planned to be expanded nation-wide next year. The government has established a task force of experts to work on a HepB policy paper for the country.

BHUTAN

28/08/03 from Oya Afşar, WHO/HQ: DTP-HepB was introduced nation-wide starting from June 2003.

BOSNIA & HERZEGOVINA

28/08/03 from Oya Afşar, WHO/HQ:

- The immunization programme management review was conducted from 2-10 June 2003.
- HepB vaccine was received in March 2003.
- Immunization of newborns is performed in Republika Srpska, Federation of Bosnia & Herzegovina, and the country plans to start with infant immunization in the coming months.

BURUNDI

28/08/03 from East and South African Sub-Regional Working Group: The implementation of the plan for the introduction of DTP+Hib tetravalent and HepB monovalent is on track. Vaccine deliveries are due at the end of September 2003.

DPR KOREA

28/08/03 from Oya Afşar, WHO/HQ: Country has been approved for HepB vaccine, however introduction has been delayed for two reasons:

- Problems with cold chain due to lack of electricity
 - Delay in the transfer of funds
- Country received \$100,000 last month and started implementation of HepB introduction in four districts.

ERITREA

28/08/03 from East and South African Sub-Regional Working Group:

- Preparations are on track for the measles catch-up campaign, and microplanning has been completed in four out of six zones. The Eritrean Red Cross is involved. A UNICEF consultant has been recruited from August 2003.
- The Department of Health and Statistics (DHS) has released the 2002 results: national coverage for 12-23 month old are:
 - BCG – 91%
 - DTP-HepB3 – 82.8%
 - Measles – 84%

Implications from these results indicate that routine coverage reporting seems to underreport by 18-25% (probably due to denominator errors). Routine coverage in the second quarter of 2003 was 69.8% for BCG, 60.9% for DTP-HepB3, and 57% for measles.

- An external consultant provided technical assistance for the first draft of the Financial Sustainability Plan in mid-August. The FSP has been reviewed, and a local consultant is being engaged to complete the process.

ETHIOPIA

28/08/03 from East and South African Sub-Regional Working Group:

- The emergency measles campaigns targeting 12.3 million children have been completed with high levels of coverage – all above 85%, and most above 90%. This was funded mostly by USAID, UNICEF and WHO.
- Preparations are ongoing for catch-up campaigns for the rest of 2003 where another 12.3 million children are targeted. This is scheduled to start on 17 October 2003. Support will be provided from social mobilization, measles medical officer and logistician from the ICP. The CDC supported measles consultant is expected to start shortly.
- Central vaccine store assessment is currently underway.

INDIA

28/08/03 from Oya Afşar, WHO/HQ: Introduction of HepB was to be carried out in 32 districts and 15 metropolitan slum areas. Up to now, 14 cities have introduced HepB in slum areas, and 32 districts will introduce in September this year.

KENYA

28/08/03 from East and South African Sub-Regional Working Group:

- A CDC consultant is currently visiting to assist with the training and establishment of the CDC routine vaccination project. A project coordinator has been appointed by the Kenya Expanded Programme on Immunization (KEPI). Awaiting supplies and vehicles. EPI 2002 based routine vaccination data capturing system has been demonstrated to be tailored to KEPI needs.
- Routine coverage and reporting has been improving. National reported coverage rates for the second quarter of 2003 are 87% for BCG, 81% for pentavalent1, 71% for pentavalent3, 70% for OPV3, and 64% for measles.
- Central vaccine store assessment was initiated in mid August 2003, and currently awaiting results.
- The draft strategy for the implementation of the Financial Sustainability Plan is available. A mission is scheduled to guide the process to be made from AFRO/ICP from 1-5 September.

KYRGYZSTAN

28/08/03 from Oya Afşar, WHO/HQ: The application for Hib has been postponed to 2006 due to financial concerns. There are also competing priorities like MMR introduction.

LAO PDR

28/08/03 from Asia Pacific Regional Working Group:

A district-based workshop to provide additional support to the microplanning process is being planned for late October 2003. The aim is to develop local capacity for microplanning to enable every child to be reached at least four times a year.

LESOTHO

28/08/03 from East and South African Sub-Regional Working Group:

- Plans to submit application for New Vaccines (pentavalent) in 2004.
- HepB monovalent vaccine has not yet been introduced. Currently awaiting technical assistance from WHO/HQ and WHO/AFRO. The August launching date has been postponed.

MADAGASCAR

28/08/03 from East and South African Sub-Regional Working Group:

- EPI review report has been circulated by Dr Auguste Ambendet (WHO/AFRO) who conducted the review earlier this year.
- Application for Injection Safety is expected to be submitted in the September 2003 round.

28/08/08/03 from Humphrey Karamagi, WHO/AFRO: A country workshop on the Financial Sustainability Plan was held in July 2003. External technical assistance will be provided for this workshop.

MALAWI

28/08/03 from East and South African Sub-Regional Working Group: A comprehensive EPI review has been planned for early October 2003. Exact dates have not been fixed. Technical assistance to assist with the review has been requested from ICP/South.

28/08/08/03 from Humphrey Karamagi, WHO/AFRO: The ICC has met and the FSP is being modified based on the recommendations made. The draft will be available in mid-September 2003.

MOLDOVA

28/08/03 from Oya Afşar, WHO/HQ: The Hib RAT was conducted from 16-23 July with assistance from Drs A. Platonov, K. Cowgill and M. Linehan. The report is currently under preparation.

MOZAMBIQUE

28/08/03 from East and South African Sub-Regional Working Group:

- Disease surveillance review will be conducted from 25 August – 5 September 2003.
- The Hib RAT is rescheduled for October 2003.

28/08/08/03 from Humphrey Karamagi, WHO/AFRO: The draft action plan for the FSP implementation strategy will be shared by mid-September 2003 at the latest.

MYANMAR

28/08/03 from Oya Afşar, WHO/HQ:

- HepB vaccine was introduced in two provinces in July 2003, and there is a plan for a nation-wide expansion next year.
- The government has requested that DQA be postponed for the second half of this year to 2004.

- Currently in the process of hiring an immunization adviser.

NEPAL

28/08/03 from Oya Afşar, WHO/HQ:

- In order to strengthen supervision and monitoring activities using ISS funds, the government was in the process of hiring five regional advisers and one cold chain officer to work on immunization. There is currently one immunization adviser and a HepB adviser has been proposed by the regional office.
- Although HepB support was approved in the quadrivalent format, the country is currently using monovalent due to the global supply shortage. Currently, 15 districts have introduced the vaccine, and a further 19 are targeted this year. The number of districts covered will be 40 in 2004 and 75 in 2005.

PAKISTAN

28/08/03 from Oya Afşar, WHO/HQ: A team consisting of Drs Julian Bilous (WHO/HQ), El Tayeb El Sayed (EPI Manager, Sudan), Said Youssouf (WHO/EMRO), and Klaus Friederich representing the vaccine manufacturers on the GAVI Board will visit from 22-25 September 2003 to assist with the following activities:

- 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 micro-plans in selected areas
- Review progress on improving EPI coverage with the ICC
- Review surveillance data for EPI targeted diseases
- Review implementation of recommendations from DQA audits
- Provide assistance for the preparation of GAVI documents
- Provide specific recommendations with timelines

RWANDA

28/08/03 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.

SRI LANKA

28/08/03 from Oya Afşar, WHO/HQ:

- HepB introduction is on track and has taken place in two provinces. Plans to expand to seven provinces in 2004, and all nine in 2005.
- There is an ongoing Hib study which started in June 2003 in the Colombo area. It is a prospective one year study to examine the burden of Hib in Colombo. All laboratories and hospitals in that area will track all Hib related cases.

TAJIKISTAN

28/08/03 from Oya Afşar, WHO/HQ:

- Plans to submit application for Injection Safety in September 2003 round.

- Financial Sustainability Plan is currently under preparation.

TANZANIA

28/08/03 from East and South African Sub-Regional Working Group:

- Data management training was conducted in Arusha in early August 2003, and there is ongoing support to strengthen data management.
- The draft Financial Sustainability Plan is taking into consideration the comments on the FSP. There will be a country visit from AFRO/ICP to complete the process and guide the development of the action plan from 7-17 September 2003.

TIMOR LESTE

28/08/03 from Oya Afşar, WHO/HQ: The country has a birth cohort of 22,000 children per year. The Multi-Indicator Cluster Survey (MICS) conducted by UNICEF in 2002 revealed the DTP3 coverage as 57%.

TURKMENISTAN

28/08/03 from Oya Afşar, WHO/HQ: An injection safety assessment is being conducted in August 2003. Plans to submit application for injection safety in the September 2003 round.

UGANDA

28/08/03 from East and South African Sub-Regional Working Group:

- District training for the measles campaign has commenced and will be ongoing till end August 2003. The logistics assessment is nearly complete for all districts, some cold chain equipment has already been shipped to the periphery to alleviate central storage problems.
- The Financial Sustainability Plan has been prepared and will be submitted for a pre-review in September 2003.
- A meeting on injection safety will take place in early September 2003. The meeting will be supported by WHO, UNICEF, Deliver and BASICS, and will involve the MOH beyond EPI as well as the Ministry of Environment.

UKRAINE

28/08/03 from Oya Afşar, WHO/HQ: A Hib RAT was conducted from 7-14 July 2003 with assistance from Drs A. Platonov, K. Cowgill and M. Linehan. The report is currently under preparation.

UZBEKISTAN

28/08/03 from Oya Afşar, WHO/HQ: The MLM training is scheduled to be held in September 2003.

VIETNAM

28/08/03 from Asia Pacific Regional Working Group: Country is due to prepare its Financial Sustainability Plan in 2003, and a meeting was held in Hanoi to brief staff from the Ministries of Health, Finance, Planning and Investment on the background to, and the process involved in this exercise.

The guest speaker at the meeting was Dr Steve Landry, Co-Chair of the GAVI Financing Task Force. Presentations were also given by Drs Osman Mansoor (WHO/WPRO) and David Hipgrave (University of Melbourne/CVP at PATH). Active discussion about the concepts and practical issues ensued, and a date has been set for a workshop for participants in the planning process during the visit of a WHO consultant who will facilitate this.

28/08/03 from Asia Pacific Regional Working Group: Preparations have commenced for an EPI review in November 2003. A consultant visit by the Review Team Leader was just completed, and a Planning Team will now commence activities.

28/08/03 from Rikke Schultz, WHO/Vietnam: The new vaccine introduction has progressed well, with HepB vaccine being introduced in all districts that were to commence in 2003. Eighteen remote and mountainous districts (less performing in terms of timely delivery of all doses) have been identified by NEPI being in need for re-training/supervision during the second half of 2003. The major work is on delivering a timely birth dose, and this has included developing monitoring systems for timely receipt.

The EPI review planned for November 2003 will include evaluation of the impact of HepB and assessment of the birth dose.

The Injection Safety support which was approved in 2002 has not yet been transferred to the MOH/Viet Nam. Locally manufactured ADs (except for BCG) are being progressively used in EPI in all four regions in the country, however funding support is needed from GAVI to cover the full cost of supply.

Following the waste management survey completed by an external consultant in the first quarter of 2003, a national plan for incinerator installation will be established including the development of an inventory of incinerators throughout the country.

ZAMBIA

28/08/03 from East and South African Sub-Regional Working Group:

- Training in injection safety has been performed in two provinces and is ongoing. Injection safety supplies are being delivered to the provinces in which health workers have been trained.
- A National Cold Store assessment was conducted by Serge Ganivet and another consultant from 21-26 July 2003. The national EPI team is currently working on recommendations to resolve concerns raised in the assessment.
- The draft Financial Sustainability Plan has been sent for review to WHO/AFRO. A country visit is expected in the last week of September.

ZIMBABWE

28/08/03 from East and South African Sub-Regional Working Group:

- Currently working on submitting the clarifications that was requested for the Injection Safety applications. Technical assistance was provided by Dr Tarande Manzila (WHO/AFRO).

- A Hib RAT is scheduled for 22 September 2003. Dr Chris Nelson (WHO/HQ), WHO/AFRO and the ICP are involved in the mission.

REGIONAL ACTIVITIES

EUROPEAN REGIONAL WORKING GROUP

28/08/03 from the European Regional Working Group:

- A Financial Sustainability Workshop was held in Moscow, Russian Federation from 16-20 June 2003.
- A meeting on Improving Management and Monitoring of District-Level Immunization Coverage was held in Moscow, Russian Federation on 21 June 2003.

ASIA PACIFIC REGIONAL WORKING GROUP

28/08/03 from Asia Pacific Regional Working Group: The Asia Pacific Regional Working Group will meet with the ICC in Mongolia on 1 September prior to the Regional Working Group meeting on 2 September 2003. The proposed agenda is the following:

Country Focus: Mongolia

- Response to GAVI on conditional approval for HepB vaccine
- Plan for resubmitting injection safety support

- Review of Hib surveillance and initial disease burden data
- Progress on wastage concerns
- Vaccine storage capacity
- Issues on high rates of carriage despite high coverage and birth dose: risk of freezing vaccine
- Other technical support needs for 2003-2004

Other Country Updates

- Cambodia, China, Lao PDR, Mongolia, Papua New Guinea, Philippines and Viet Nam

Improving Coverage

- Progress in Cambodia and Lao PDR (and DQAs)
- RED workshops for Lao PDR, Vanuatu and others
- Activities for RWG – Data quality and district mapping
- Advocacy for coverage improvement as a core government function

Financial Sustainability Planning

- RWG strategy – impact of FSP in Cambodia and Lao PDR
- Plan and progress for Viet Nam FSP
- Options for China FSP
- Role of development banks as RWG partners for FSP

Other

- GAVI Updates – July Board meeting, dissolution of ITF and role of RWG
- Vietnam EPI Review
- RWG Role in measles elimination and HepB control

Regional Meetings of Relevance to the GAVI Objectives: August - December 2003

Title of Meeting	Start	Finish	Location	Responsible Partner	Region
Aug-03					
West and Central African Sub-Regional Working Group Meeting	18-Aug	19-Aug	Lome	WHO/AFRO (W&C)	AFR
Senior Level EPI Managers Forum	25-Aug	27-Aug	Bangkok, Thailand	Asia Pacific RWG	WPR
Joint WHO-UNICEF Consultation on Advocacy and Communication for Immunization	28-Aug	29-Aug	Geneva, Switzerland	UNICEF/WHO	Global
Inter-country meeting on Measles Accelerated Control	28-Aug	31-Aug	Tunisia	WHO/EMRO	EMR
Sep-03					
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
Oct-03					
EPI Training Workshop for Andean Countries	6-Oct	10-Oct	Ecuador	WHO/PAHO	AMR
Nov-03					
Caribbean EPI Managers Workshop	17-Nov	20-Nov	tbd	WHO/PAHO	AMR
Technet 21 Global Meeting	18-Nov	20-Nov	Antalya, Turkey	Global	Global
Dec-03					
7th GAVI Eastern Mediterranean Regional Working Group Meeting	8-Dec	9-Dec	Cairo, Egypt	WHO/EMRO	EMR