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### The EPI decision-making process is complex and dynamic

The vaccine landscape is continuing to expand, whereas EPI budgets are often not growing at the same pace, implying constrained resources for countries. Weighing decisions about changes to EPI portfolios systematically is therefore necessary. When considering a vaccine introduction or a switch, it is critical this is included within the planning stage. This will allow for a country to make the right decision about whether to move forward with an introduction or a switch, as well as develop a prioritization order for potential implementation.

### Incorporating MI can enhance EPI optimization

When considering an introduction or switch, certain factors should be weighed during the decision-making process to enhance efficiency and effectiveness. While the range of factors is consistent, how they weigh can vary widely not only by the country context but also by the specific vaccine programme. Being aware of what vaccine profiles are available or coming soon, countries are better equipped to prioritise EPI activities, to look for options that have added benefits and to know if and when to move forward. To this end, a wealth of resources is available for EPI managers, who also need to take into account learnings from other countries.

### A clear idea of the problem is critical

While switches can help improve impact, they can also be disruptive. Therefore, it is crucial to examine if they are worth the trade-offs. The temptation to be in a perpetual state of switching should also be avoided by keeping in mind the current and upcoming options that suit the country's context the most.

### MI key resources:

#### General resources

- [UNICEF Strategic Vaccine Procurement e-course](#)
- [WHO Immunization Agenda 2030](#)
- [WHO Immunization Analysis & Insights](#)
- [Johns Hopkins International Vaccine Access Center \(IVAC\)](#)
- [Guidance for switches & EPI portfolio optimisation](#)

#### Product choice

- [UNICEF Key supply markets dashboard](#)
- [UNICEF Market notes and updates](#)
- [WHO Prequalification information](#)
- [WHO MI4A Vaccine Product List](#)
- [WHO Vaccine Wastage Calculator](#)
- [Access to Vaccines Index](#)

#### Market dynamics

- [UNICEF Vaccines Market Dashboard](#)
- [UNICEF Vaccine Industry Consultation \(VIC\)](#)
- [WHO Global vaccine market report 2023](#)
- [WHO MI4A Market Studies](#)

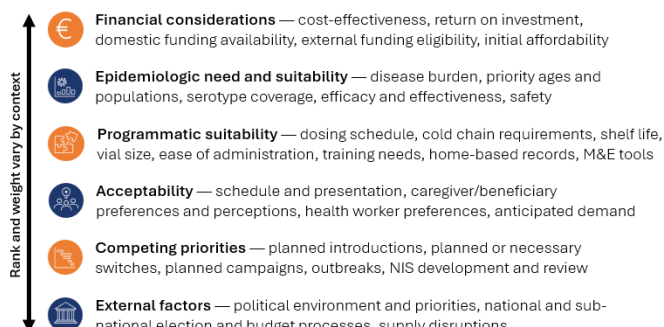
#### Price information

- [UNICEF Vaccine pricing data](#)
- [WHO MI4A Vaccine purchase database](#)

#### Decision support

- [WHO Country-led Assessment for Prioritisation on Immunisation](#)

### What key factors affect EPI decision-making?



**Market intelligence can fill key gaps and shape how and when these factors are examined**

- Supply, cost, and alternatives for currently used vaccines
- Characteristics, cost, and supply for available vaccines that are not yet introduced
- Characteristics, cost, supply, and timelines for vaccines in the development pipeline

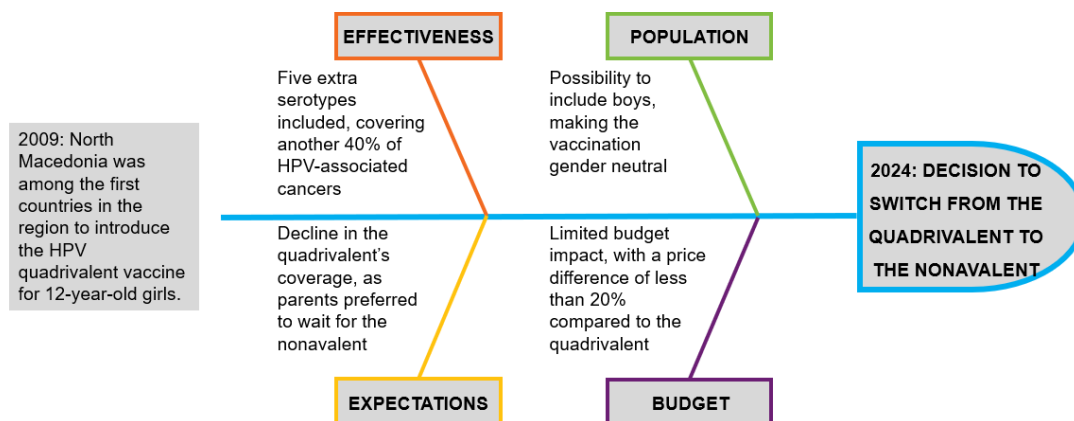
### For additional resources:

#### Market Intelligence Series:

- WEBINAR 1
  - ✓ [Recording & PPT in EN, RU, FR](#)
  - ✓ [Lessons Learnt](#)
- WEBINAR 2
  - ✓ [Recording & PPT in EN, RU, FR](#)
  - ✓ [Lessons Learnt](#)
- WEBINAR 3
  - ✓ [Recording & PPT in EN, RU, FR](#)
- Q&A SERIES** - *How to leverage MI for your vaccine procurement strategy?*
  - ✓ [EN, RU, FR](#)

## MI IN PRACTICE – NORTH MACEDONIA’S SWITCH TO THE NONVALENT HPV VACCINE

### I) Context and reasons for the switch

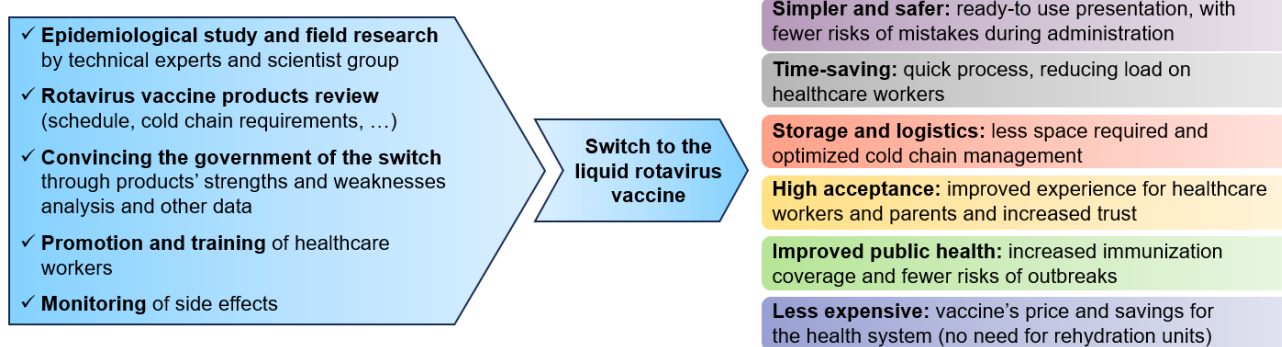


### II) Challenges and best practice in North Macedonia

CHALLENGES	BEST PRACTICE
Healthcare workers' education, including gynaecologists', especially on why vaccinating so early	Switch partly justified by increasing HPV vaccination coverage since COVID-19 decline
Media and social media misinformation and rumours, such as the believed effects on fertility	Transition period considered, with recommendations to finish the started schedules and maximise the use of the quadrivalent stock before administering the nonavalent
Use of monitoring data on vaccine coverage and acceptance to develop tailor-made approaches	Monitoring system showed large regional differences in coverage and parents' attitude and highlighted the importance of communication between healthcare workers and parents
Need for more real-world evidence and national data, to address government and population questions	Promotion efforts increased vaccine acceptance among younger generations

## UZBEKISTAN'S SWITCH TO THE LIQUID ROTAVIRUS VACCINE

### I) Decision-making process and benefits



### II) Challenges and lessons learnt in Uzbekistan

CHALLENGES	LESSONS LEARNT
<b>Cold chain management:</b> ensuring cold chain is maintained as storage space requirements increase	<b>Cold chain strengthening:</b> investment in cold storage infrastructure was needed for sustainability
<b>Supply chain adaptation:</b> adjusting logistics for the vaccine's liquid form	<b>Collaboration:</b> strong partnerships between international organizations (UNICEF, WHO) and local authorities simplified the process
<b>Training:</b> need to retrain medical staff in new procedures for handling vaccine	<b>Improved training:</b> comprehensive training of medical staff played a key role in successful implementation
<b>Public acceptance:</b> overcoming initial reluctance on the part of the medical staff and public	<b>Involving the public:</b> early and transparent promotion of public awareness contributed to trust and acceptance
<b>Regulatory approvals:</b> updating procedures for the registration of liquid vaccines	
<b>Cost:</b> resolving issues related to high initial expenses for procurement and use	