



© UNICEF/UN0417651/Kabuye

Final Report on the Vaccine Procurement Practitioners Exchange Forum (VPPEF) Clinic held in the Eastern and Southern Africa Region

**UNICEF Supply Division
23 & 24 June 2021**

Contents

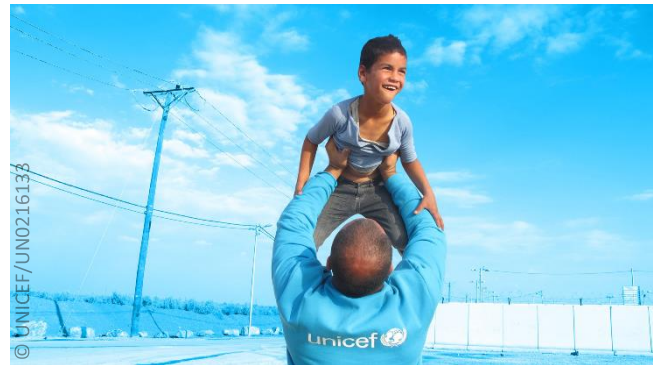
Introduction	3
Participants	4
Agenda and summary of activities	5
Day One	7
COVID-19 Vaccine Rollout	7
COVAX Next Steps Panel	9
VPPN in Eastern and Southern Africa: Strengthening the CoP	11
Day Two	12
Strengthening Procurement Planning Processes and Immunization Financing	12
Country Experiences	13
Strategic Procurement and Planning: Next Steps	14
Feedback from breakout groups	15
Closing Summary	21
Evaluation	21
Lessons Learnt and Next Steps	22

INTRODUCTION

UNICEF works together with national governments to ensure that countries can have timely access to affordable and quality vaccines. Given its pivotal role in the vaccine market, UNICEF, together with partners, provides relevant guidance and support in strengthening the capacity of national vaccine procurement processes.

Strengthening the national procurement systems involves addressing gaps on its different components such as needs planning, forecasting, strategic procurement and financing.

The Vaccine Procurement Practitioners Exchange Forum (VPPEF) is an annual event hosted by UNICEF to foster knowledge sharing and strengthen participants' skills and understanding on diverse vaccine procurement topics. Building on the eVPPEF held in December 2020, which facilitated the engagement of country buyers from 67 countries on procurement of COVID-19 vaccines and related supplies, UNICEF Supply Division, in collaboration with its East and Southern Africa Regional Office (ESARO), hosted an online 2-day VPPEF Regional Clinic on the 23-24 June 2021. The Forum brought together government partners from the region, UNICEF Regional and Country Office colleagues, as well as partners, to discuss and exchange knowledge and experiences on the COVID-19 vaccine roll out in the region, as well as the continued need to strengthen vaccine procurement planning processes and financing for vaccines.



The objectives of the regional clinic were:

- To provide a regional update on the COVID-19 vaccine roll out and discuss key challenges & successes
- To discuss best practices, risk mitigation strategies and recent developments on COVID-19 vaccine procurement and supply
- To provide guidance on strengthening procurement planning processes and immunization financing
- To allow for knowledge sharing of experiences in the region
- To share relevant resources and tools available to support countries
- To foster opportunities to engage with the Vaccine Procurement Practitioners Network (VPPN) regionally

PARTICIPANTS



A total of 92 participants, from 16 countries in the region, participated in the 2-day regional clinic. Participants included government partners, UNICEF staff and other partners. The UNICEF Country Offices in the region facilitated the invitation process as well as the participation of UNICEF staff and government counterparts. Figures 1 and 2 below illustrate the breakdown of participants and the ESAR countries represented at the regional clinic. The higher participation of UNICEF staff is attributed to the low bandwidth of government partners due to their focus on the current COVID-19. Increasing the participation of governments to VPPEFs remains a priority, and

strategies to reach that goal are discussed in the 'Lessons learnt' and 'Next steps' of this report.

Figure 1: Breakdown of participants by organization

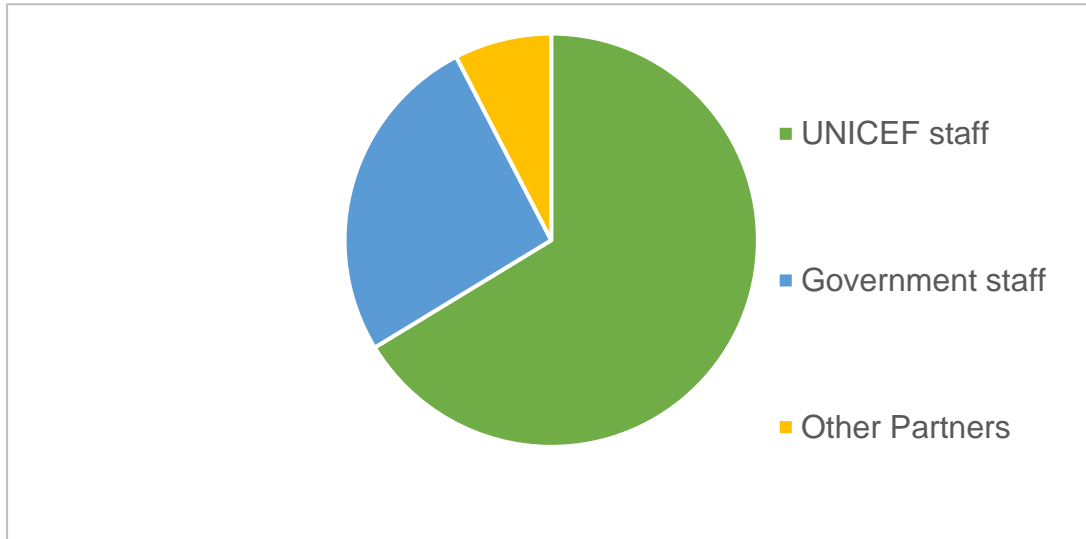
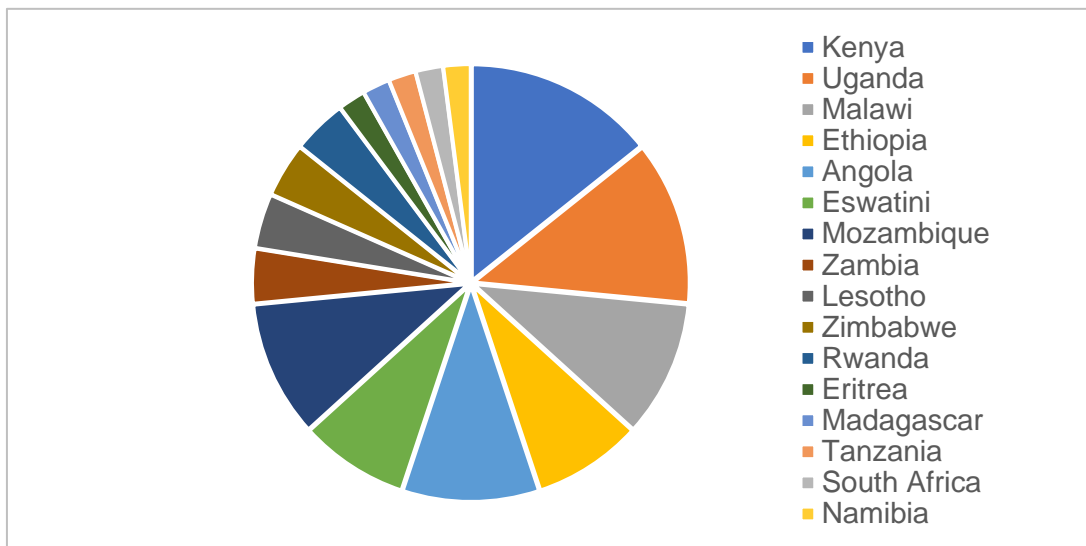


Figure 2: Breakdown of participants from 16 ESAR countries



AGENDA AND SUMMARY OF ACTIVITIES

Information on the sessions and presenters for the 2-day regional clinic is outlined below in the agenda. Live interpretation in French and Portuguese was provided on both days during the event, as well as all presentations and material, which can be found on the [Vaccine Procurement Practitioners Network \(VPPN\)](#), are in English and translated into French and Portuguese. There is also an ongoing e-discussion being held on the Network around these topics.

Agenda – Day 1

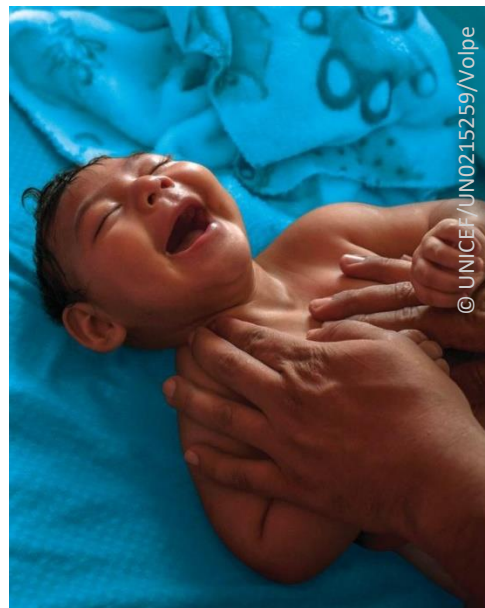
9.00 - 9.20	Welcome, Opening Remarks, and Learning Objectives	<ul style="list-style-type: none"> Lieke van de Wiel Deputy Regional Director, ESARO, UNICEF Jacqueline Enstone, Learning and Development Manager, UNICEF
9.20 - 9.50	COVID-19 vaccine rollout	<ul style="list-style-type: none"> Mekonnen Tadesse Hagos, Covid-19 Regional Coordination Consultant, ESARO, UNICEF Yohannes Lakew, EPI Manager, Government of Ethiopia Denise Ilibagiza, Health Officer, UNICEF Kigali
9.50 - 10.30	Q&A, Exchange and Discussion	Plenary
10.30 - 10.40	Break	
10.40 - 11.40	COVAX Next Steps: Learnings, risk-mitigation strategies, opportunities and recent developments on COVID-19 vaccine procurement & supply	<ul style="list-style-type: none"> Dorcas Noertoft, Senior Contracts Manager, Vaccine Centre, UNICEF Messenger Eshetu Shibeshi, Immunization Officer, IST, Eastern and Southern Africa, WHO Sam Muller, Head of Country Engagement, Gavi Mekonnen Tadesse Hagos, Covid-19 Regional Coordination Consultant, ESARO, UNICEF Dereje Haile, Cold Chain Specialist, ESARO, UNICEF Flint Zulu, Health Specialist, ESARO, UNICEF
11.40 - 11.55	VPPN in Eastern and Southern African: Strengthening the CoP	<ul style="list-style-type: none"> Buya Jallow, Supply Officer, UNICEF
11.55 - 12.00	Moving ahead to tomorrow and Closing	<ul style="list-style-type: none"> Jacqueline Enstone

Agenda – Day 2

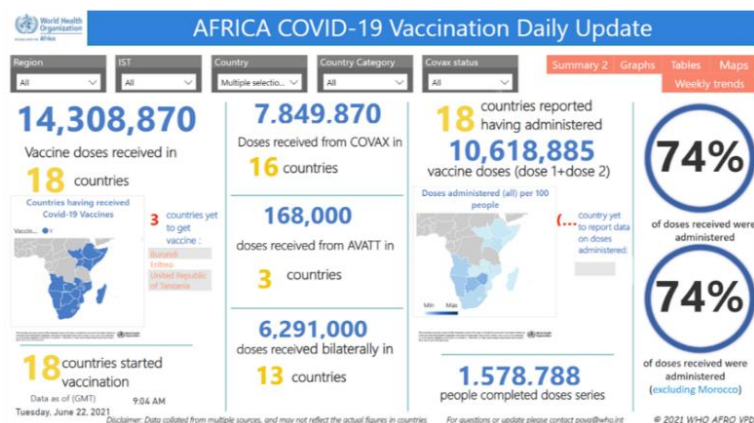
9.00 - 9.15	Welcome, Recap of Day 1, and Learning Objectives	<ul style="list-style-type: none"> Samuel Kweku Ocran, Regional Chief of Supply & Procurement, ESARO, Nairobi, UNICEF Jacqueline Enstone, Learning and Development Manager, UNICEF
9.15 - 9.30	Strengthening Procurement Planning processes and Immunization Financing	<ul style="list-style-type: none"> Anthony Bellon, Partnerships Manager, Vaccine Centre, UNICEF Rie Hoffmann, Planning Manager, MSDEU, UNICEF Marcia Attaran, Procurement Services Manager, UNICEF Manuel E. Lavayen, Supply Chain Manager, SCSC, UNICEF Krista Hund, Planning Specialist, Vaccine Centre, UNICEF
9.30 - 9.50	Country Experiences <ul style="list-style-type: none"> Vaccine Forecasting, Malawi Immunization Financing, Uganda 	<ul style="list-style-type: none"> Mphatso Mtenje, National Cold Chain Manager & National MVIP Focal Person, Ministry Of Health, Government of Malawi Jimmy Ameny, Procurement and SCM Specialist, Government of Uganda
9.50 - 9.55	Introduction to Group Session	Move to breakout groups
9.55 - 10.05	Break	
10.05 - 11.00	Strategic Procurement and Planning: Next Steps?	Breakout Session
11.00 - 11.55	Feedback from Groups and Plenary Discussion	Plenary
11.55 - 12.00	Key Takeaways & Closing Remarks	Andrew O. Jones, Principal Adviser, Vaccine Centre, Supply Division

DAY ONE

The overall objective of Day One was to provide an overview on the COVID-19 vaccine roll out in the region. The day kicked off with a regional overview being presented, that was complemented by two countries – Ethiopia and Rwanda – who shared some of their experiences and lessons learnt. This discussion was followed by a panel that consisted of UNICEF, WHO and Gavi, the Vaccine Alliance (henceforth Gavi), where presenters shared learnings, risk-mitigation strategies, opportunities and recent developments on the status of the COVID-19 vaccine procurement and supply. All sessions were complemented by plenary discussions with participants.



The COVID-19 Vaccine Roll out: Regional Overview



Highlights from the regional overview presentation include:

- There were over 4 million cases in Africa, as of the 18th of June. 74% of the new cases that were reported in week 23 (7–13 June), were from 6 countries, of which 4 are in the ESA region.
- 18 countries in the region have administered over 10 million COVID-19 vaccine doses.
- 1.3 million doses are to be received by 6 countries, through the COVAX dose-sharing mechanism.
- Additional deliveries to 10 ESA countries through the COVAX Facility, are expected in August 2021.
- Multiple funding streams are available for countries.

After the regional overview presentation, government officials from the Ethiopian Ministry of Health shared the country's experience on how they leveraged partnerships to support the roll-out, as seen in the above slide. Highlighted during the presentation was the strong partnerships that were forged, which the Ministry leveraged to ensure a speedy roll out of the vaccine.



UNICEF Rwanda and the Regional Office then highlighted challenges in this process that included:

- Limited supply and subsequent delays
- Slow uptake and risk of vaccine expiry
- Introduction of multiple vaccines
- Data quality and reporting gaps
- Insufficient syringes for some vaccines

The session concluded with the UNICEF Regional Office outlining key next steps that they plan to implement, including:

- Reviewing National Development and Vaccination Plan (NDVP) and contingency plans
- Addressing vaccine hesitancy
- Support countries to monitor stocks at risk of expiry
- Improve reporting on vaccine utilization

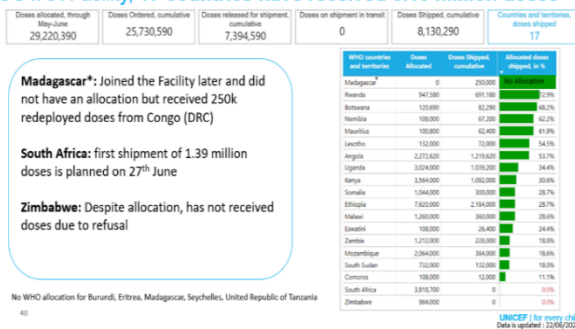
The COVAX Panel on Next Steps

The COVAX panel provided an opportunity to discuss best practices, risk mitigation strategies and recent developments on COVID-19 vaccine procurement and supply. Questions were posed to the panelists from UNICEF Supply Division, UNICEF ESARO, Gavi and WHO. Below are the questions asked of each of the panel members and highlights from their responses.

1. What has been the situation with the COVID-19 vaccine availability and supply over the past few months and what is being done to accelerate the supply and availability?

➔ **Dorcas Noertoft, Senior Contracts Manager, UNICEF Supply Division** highlighted the vaccines that have been delivered to the region, acknowledging the challenges with vaccine availability, including complex supply chains and supplier priorities to meet domestic demand. It was also noted that the situation is expected to improve by the end of the year.

18 countries in ESAR have doses allocated by WHO under the COVAX Facility, 17 countries have received 8.13 million doses



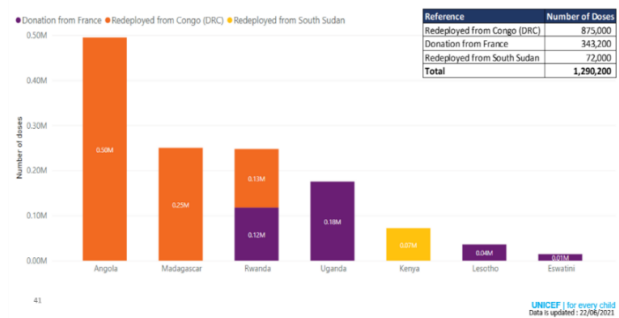
Madagascar*: Joined the Facility later and did not have an allocation but received 250k redeployed doses from Congo (DRC)

South Africa: first shipment of 1.39 million doses is planned on 27th June

Zimbabwe: Despite allocation, has not received doses due to refusal

No WHO allocation for Burundi, Eritrea, Madagascar, Seychelles, United Republic of Tanzania

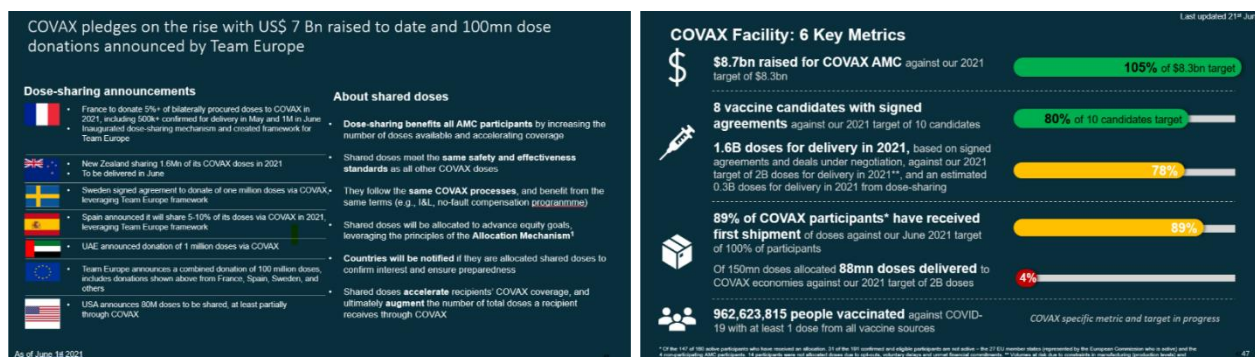
7 countries have received total of 1.3 million doses through donation and redeployment



2. What have been some of the recent developments at the COVAX facility with regards to the COVID-19 vaccine? Could you also speak to some of the recently approved COVID -19 vaccines in the pipeline?

➔ **Sam Muller, Head of Country Engagement, Gavi** highlighted the COVAX Facility's efforts to make COVID-19 vaccines more affordable, focusing on allocations to protect the most vulnerable populations and advance the equity goals of the Alliance. Recent pledges on dose sharing were also

elaborated on, which is expected to support the challenges around addressing the supply availability currently being experienced, including accelerating coverage. The COVAX Facility now has signed agreements with 8 vaccine candidates.



3. What are some of the regulatory challenges' countries have been facing with the COVID-19 vaccine and how will WHO continue to support countries—with risk-mitigation strategies, including receiving COVID-19 vaccines with reduced shelf life?

➡ **Messeret Eshetu Shibeshi, Immunization Systems Focal Person, WHO IST ESAR** highlighted how vaccine pre-qualification processes have been fast-tracked during this pandemic. National Regulatory Authorities have relied on WHO emergency use listing (EUL) to facilitate access to the vaccines. WHO AFRO has supported specific NRAs to conduct joint reviews of pandemic vaccine dossiers and regulatory pathways have been facilitated using a risk-based approach. A [joint position paper](#) by WHO and UNICEF was also released in March 2021 to support countries receiving vaccines with reduced shelf life.

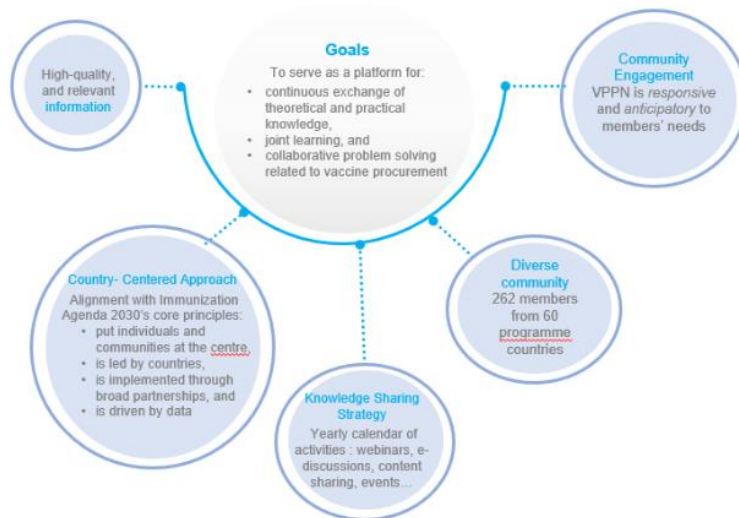
4. What additional preparations would countries need to have in place to ensure they continue to reach priority groups and ensure acceptance and uptake of the COVID-19 vaccine?

➡ **Mekonnen Tadesse Hagos, COVID-19 Regional Coordination Consultant, UNICEF, Flint Zulu, Health Specialist, UNICEF and Dereje Haile, Cold Chain Specharmialist, UNICEF** from the Eastern and Southern Africa Regional Office, emphasized the importance for all countries to have a costed and up-to-date NDVP and Contingency Plan. This should incorporate

lessons learnt from other countries and the initial rollout of the vaccine to ensure that improvements are made, and systems are in place and ready for implementation once the vaccine arrives in country. Similarly, cold chain capacity analysis should be continuous at all levels, to ensure adequate storage capacity for vaccines to be received. Finally, given the endemic vaccine hesitancy being experienced in most countries, it is crucial that in addition to the generally available messaging on the COVID-19 vaccine, countries should conduct analysis on prevalent and existing rumors in country and ensure that key messages are tailored around these existing rumors to ensure increased uptake of vaccines when they become available.

VPPN in Eastern and Southern Africa: Strengthening the CoP

Goals and Strategies of the VPPN



An overview of the [Vaccine Procurement Practitioners Network \(VPPN\)](#) and the resources to support vaccine procurement strengthening for countries was provided. All participants to this regional clinic were invited to join the VPPN, where all the resources will be available in English, French and Portuguese, together with a continuation of discussions and collaborations.

DAY TWO

The overall objective of the second day was to provide a platform for colleagues to share their experiences around procurement planning processes and immunization financing. An overview was presented by UNICEF Supply Division on the key building blocks of strategic vaccine procurement planning. Government partners from Malawi and Uganda also shared their country experiences that focused on improving their vaccine forecasting and sustainable financing processes, respectively. Each presentation provided an overall update on progress made, sharing specific best practices and lessons learned on the two topics.

Strengthening Procurement Planning Processes and Immunization Financing



An overview of the vaccine procurement process and key elements to consider when developing a strategic approach was presented. The key elements include (1) the need for a dynamic **forecast** that is reviewed regularly to capture changes in context as needed, (2) sustained availability of **funding** and the monitoring of the investment for improved transparency to advocate for resources, and (3) appropriate **contracting** in place. Finally, it was also highlighted that quality data is critical, as

this can support national stakeholders to make informed decisions around their vaccine procurement processes.

Experiences from Countries

1. Ministry of Health, Government of Malawi

Malawi shared their experience on vaccine forecasting, highlighting challenges they have been experiencing, particularly around data availability (e.g. lack of country-specific wastage rates) and conflicting data sources. They also highlighted the challenge with the fiscal year and forecasting period being on different timelines.

Forecasting

- Strong collaboration between UNICEF and MoH during forecasting process;
- Forecasting data based on various sources: ViVa, SMT, DVDMT, NSO.

- Challenge in NSO data versus GAVI/UN Data.
- Country's fiscal year different from the Forecasting period.
- Lack of country-specific wastage rates impacts decision-making.

Mitigation Measures

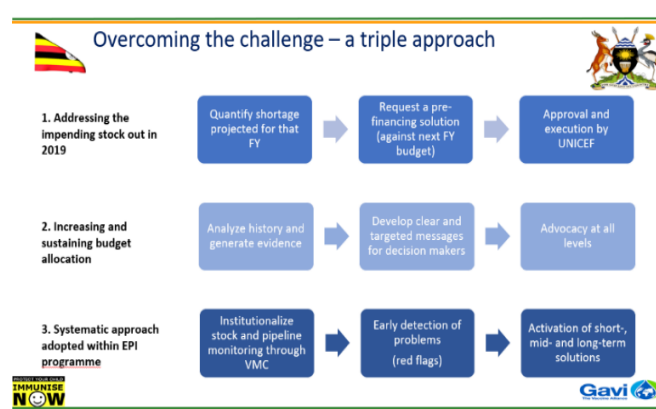
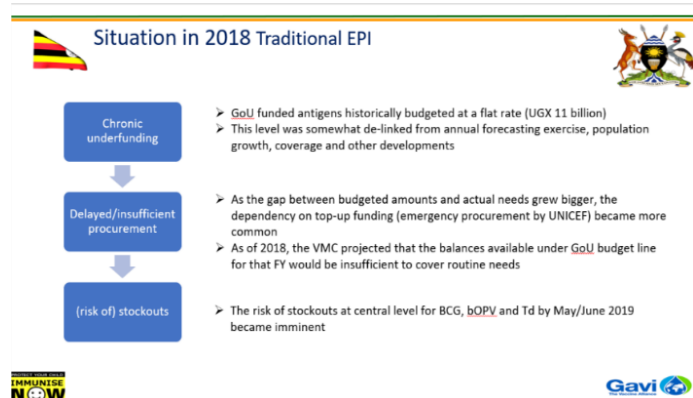
- **Differences in data sources:**
 - Planning to have different forecasting methods to compare with the demographic based forecasting to get as close enough as the actual forecasts;
 - Introduce in-country forecast versus actual analysis annually;
- **Fiscal Year differences:**
 - Still a challenge.
 - The country is basing on utilization trends and provide to the government proxy forecasts to safeguard funds in the GVT annual budget.
- **Wastage Rate:**
 - Using WHO std wastage rates

Malawi also highlighted the mitigation measures they have successfully implemented to address these challenges. The presentation highlighted how having the government lead the forecasting processes has yielded benefits for the country, especially in being able to secure adequate financing for the forecasted amounts. The timely

release of funding has allowed the government to be able to procure their vaccines as per their forecast timelines.

2. Ministry of Health, Government of Uganda

Uganda shared their experience on vaccine financing for traditional vaccines, which had been underfunded, leading to delayed and insufficient amounts, with high risk of stockouts.



This challenge has been overcome through high-level advocacy and systematic monitoring of stocks to generate an evidence-based approach to budgeting. This has led to a dramatic shift from 'flat rate' allocation of vaccines to a budget informed by the annual forecasting exercise. Having clearly defined roles for all stakeholders involved has

improved coordination and accountability in the process.

Strategic Procurement and Planning: Next Steps

Participants were requested to join a breakout group session of their choice that focused on (1) Forecasting, (2) Procurement planning, (3) Sustainable financing, or (4) Data triangulation. The purpose of these sessions was to allow government partners to exchange experiences and learn from each other on the session's topic. The breakout sessions were co-facilitated by UNICEF Supply Division and East and Southern Africa Regional Office, and designed to be as participatory, interactive and collaborative as possible.

Feedback from breakout groups

Forecasting

Guiding questions used:

How do you secure a close link between budgeting and forecasting in your country, including quantities and requested timing of deliveries, to ensure vaccines are procured in a timely fashion (taking into account lead times)?

How do you ensure continuity and alignment in the forecast process from year to year?

What measure do you have in place to capture changes in demand?

How do you ensure good data quality for the input used to generate the forecast?

Best Practices:

- Ensuring data is of the highest quality when sharing with government officials to illustrate the annual needs
- Identifying funding needs throughout the year, looking for gaps that may occur
- Leveraging partnerships with UNICEF SD. E.g. working closely with the MoH has led to improvements with procurement of vaccines, coming at the right time to minimize stock outs.

Challenges:

- Having inadequate cash flow, particularly for campaigns, and managing limited budgets throughout the year, has led to issues with governments being able to release funding on time, leading to delays in receiving vaccines, given the necessary lead times vaccines need.
- Countries have different data systems, which can lead to misinformation and other issues.
- Discrepancy between Gavi supplied vaccines and government forecasts, which are based on administrative data, causing challenges with stock levels.

Way forward:

- Harmonizing the data systems used to inform forecasting
- Advocacy for budget allocations to vaccines

Procurement and Planning

Guiding questions used:

What are the main challenges in transforming the needs assessment (forecast) to the actual plan (shipment plan)?

How do you manage changes, events that can impact your shipment plans?

Do you review the forecast & shipment plan regularly?

How do you ensure good data quality for the input used to generate the forecast?

Best Practices:

- Linking forecast to national budgeting processes in the country
- Ensuring linkages between procurement forecasting and planning with financing
- Need to not only think about vaccines, but also the syringes and CCE necessary

Challenges:

- One of the challenges experienced in all countries represented in the group is alignment of the budgeting, financing and planning processes between the Government and partners, as the financial year cycles often differ between the Governments in Africa, as well as with partners such as Gavi.
- Data/information from lower levels, particularly on utilisation and stock levels, is an essential element of planning; however, timeliness and completeness of reporting are mentioned as challenges among the countries represented within the group.

Way forward:

- Countries need to have a clear picture of roles and responsibilities taken by the Government as well as partners. Coordination between various stakeholders is important to mitigate bottlenecks in procurement and planning for vaccine availability.
- Financing is a critical component of planning to ensure timely procurement and constant availability of vaccines. Countries are making use of crucial support

provided through the pre-financing platform, and support from partners, including UNICEF, around the co-financing obligations, especially when countries are facing challenges in meeting them, is critical.

- It was shared that in some countries, to enable effective planning and coordination to ensure vaccine availability, the stock status of vaccines including current stock levels, pipelines and distributions are shared in monthly vaccine management meetings among the stakeholders. This provides an opportunity for the Government and partners to have a clear outlook on vaccine status in the country, enabling the stakeholders to plan more efficiently.

Immunization Financing

Guiding questions used

Countries experiences/ solutions to tackle low budget execution to vaccine procurement?

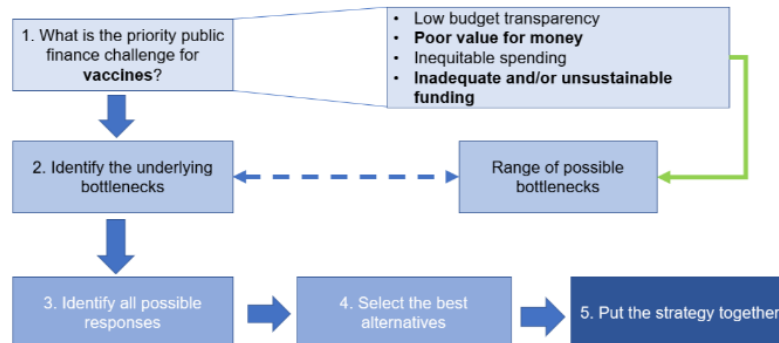
Countries experiences/ solutions to tackle insufficient budget allocations to vaccine procurement?

What else needs to be put in place by a country or jointly?

Best Practices:

- Stagnating allocations: Generate evidence on trends and ensure forecasting inform budgeting and the negative impacts of underinvestment in vaccine procurement.
- Low priority of financing: Advocate for more funding based on evidence, including robust forecasts
- Low impact of advocacy actions: Map out the budgeting process to identify bottlenecks and opportunities for advocacy
- Monitor the size of spending: Advocate for a clear budget line on immunization
- More voices: Also involve CSOs in the budget analysis and advocacy

Understanding underlying root causes to inform direction and build commitment for change



Challenges identified:

- Delayed procurement
- Difficulties in obtaining approvals
- Delayed release of budget and co-financing
- Amendment / reduction in budgets after allocation resulting in less money availed
- Changes in disbursement cycle and currency fluctuations

Way forward:

- Map the process and stakeholders to see what is the cause of delays
- Pre-financing can help but it is also important to understand the root causes
- Front-loading
- Quarterly disbursements
- Include buffers or contingencies to cater for the delays or time lags in between disbursement
- Align budgeting calendars / financial year
- Proper scheduling of procurements and disbursements

Supply Chain Data

Guiding questions used

What are the data sources (is there one or multiple) that you utilize to inform your forecasting, planning, procurement and operational efforts to ensure high levels of equitable access?

Do you match health data (coverage, target populations, etc.) with supply data (consumption, stock levels) to inform planning and logistical operations?

How often do you sit down in the NLWG (or equivalent) to review data to identify trends and inform/modify the initial forecast? Do you update the Continuous Improvement Plans (cIPs) to match country conditions with the strengthening roadmap?

Any experience that you can share regarding good practices or lessons learned including bottle necks, challenges or critical success factors

Best Practices:

- Government leadership, convergence of partners on National Logistics Working Group (NLWG) meeting on a monthly basis
- NLWG meets on a quarterly basis to review the assumptions and identify changes to the original context
- Using coverage data from previous year to inform the forecasting exercise
- Forecast is reviewed twice a year and the cIPs is reviewed annually
- Multiple data sets are utilized to inform the forecasting exercise, and these are broken down by commodity group
- Ministry of Health-led forecast exercise is done in parallel to other commodities
- DHIS-2 is partially available to support the exercise with some data
- Participation of health facility workers is crucial to inform the forecasting process
- Gavi co-financing works very well when the government pays in full and on time.

Challenges:

- Immunization programs stand alone
- Discrepancy between Government fiscal year and forecasting period

- Supply chain is a newly established department with existing limitations
- Stock level reporting is completed manually
- Forecasting cycles are not aligned to Gavi or UNICEF's
- Difficulties in getting harmonized, accurate and complete data sets
- Country office is not capable of procuring on time

Way forward

- Adoption of a process to compare supply and health data to better inform upstream processes, including, but not limited to forecasting, planning distribution, allocation
- Adoption of data triangulation practices to match health, logistics and planning data (EVM and MM) to inform programmatic and supply chain interventions. (in essence the iDash)
- Strengthen the national information system to ensure high quality and integrity data is available to support the forecast process
- Ensure a feedback loop process to open communication with lower levels of the health system (i.e., districts, HF)
- Monitor and update supply and demand levels to better reflect reality and modify original forecast as required (with a monthly process as the normal minimal practice).

CLOSING SUMMARY

The two-day regional clinic yielded rich discussion and knowledge sharing among participants, which will continue on the [Vaccine Procurement Practitioners Network \(VPPN\)](#). The first day focused on the COVID-19 vaccine rollout, highlighting key challenges in the region. Supply constraints and slow uptake of the vaccine, leading to risk of expiry, remains a prominent challenge. Countries were urged to strengthen data availability and maintain adequate vaccine stock levels, as well as to minimize wastage and guide redistribution. Discussions during the second day centered around strengthening the strategic vaccine procurement approach. Leveraging market intelligence, ensuring quality forecasts that are regularly reviewed, adequate and available financing and triangulating data to ensure good quality information is available to guide these processes will ensure vaccines are available at the right time and in the right quantities to support the immunization programme goals and ensure children receive vaccines.

EVALUATION

An online evaluation survey was sent to all participants after the meeting and on the VPPN to assess to what extent the regional clinic met its learning objectives, as well as to generate feedback from participants. A total of 9 responses were received for Day 1, and 6 responses for Day 2.

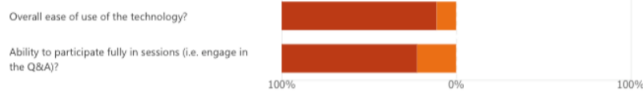
When asked about the duration of the Regional Clinic, 13 of the 15 respondents indicated it was **'just right'**, with the remaining 2 indicating it was **'too short'**. Other comments received in the evaluation suggested that participants are interested in more sessions like this with the opportunity for more countries to share their experiences.

With regards to the technology used and participants experience, over 90% found the overall ease of use of the technology **'very good'**. Over 30% indicated that ability to participate fully in session was **'good'**.

5. Due to COVID-19, the meeting was held online. Please let us know about your experience with the platform.

[More Details](#)

Very Good Good Fair Poor



5. Due to COVID-19, the Regional Clinic was held online. Please let us know about your experience with the platform.

[More Details](#)

Very Good Good Fair Poor

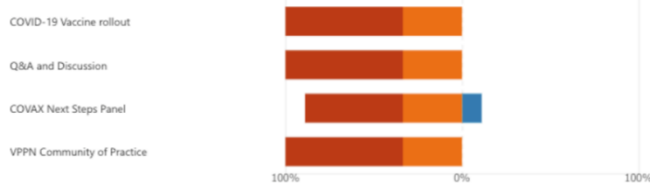


With regards to the content, participants consistently rated the sessions **'very useful'** or **'useful'**. Other comments received from participants also demonstrated the relevance of the sessions.

6. How would you rate the sessions you attended on DAY 1?

[More Details](#)

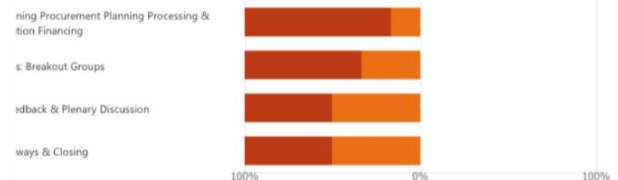
Very useful Useful Fairly useful Not useful



How would you rate the sessions you attended on DAY 2?

[More Details](#)

Very useful Useful Fairly useful Not useful



LESSONS LEARNT AND NEXT STEPS

Country and regional input in defining the content

As evident in the evaluation, participants found the content of the regional clinic to be relevant and 'very useful' to their work. This was attributed to the inclusion of the lessons learnt from the eVPPEF in 2020 and extensive consultation with the Regional Office to define the content of the session and needs from countries.

Virtual meetings – engagement, facilitation and interpretation

As the VPPEF continues to be held through virtual meetings, ensuring that participants are able to engage and contribute to sessions with ease is crucial. The continuous learning on managing online meeting platforms, active facilitation of

breakout sessions provided, and the availability of live interpretation resulted in a positive experience from the participants to participate and engage in the sessions.

Government participation

As over 60% of participants to the regional clinic were UNICEF staff, the participation of government staff was lower than expected. Despite the ongoing time-constraints with responding to the pandemic, there is a need to ensure more government participants are reached. Strengthening engagement with UNICEF Country Offices as part of a long-term strategy to strengthening VPPN membership and participation in country is required. Targeting fewer and more specific countries within the region for future regional clinics to allow for a 'deep-dive' to support their needs should be considered. This will also include extensive pre-engagement to secure commitment from the country in participating, as well as more in-country preparation for the meeting.

Future topics

The evaluation also provided an opportunity for participants to provide feedback on potential topics they would like to see prioritize in future Regional Clinics. These include:

- Immunization financing
- Strengthening the use of logistics management system and data analysis
- Data Management
- Lessons learnt from COVAX and country procurement practices
- Innovative ways to improve data quality related to vaccine supply chain

For more information on either the VPPEF or VPPN, please reach out to Loic Sanchez at lsanchez@unicef.org