



unicef 
for every child

Gavi 
Global Vaccines Alliance

 World Health
Organization

WELCOME

Day 1 presentations

MENA Regional VPPEF
19 & 20 October 2022
Amman, Jordan

Key information and a few ground rules...

TIME

- Please be punctual as we have a packed agenda!

INTERPRETATION

Interpretation is available as follows:

- Arabic – English
- French – English
- Arabic - French

QUESTION & INTERVENTIONS

- Please raise hands when you would like to intervene and wait for the facilitator to give you the floor.
- Kindly keep questions and interventions until the end of the presentation.
- All questions will be addressed – if not in the session, these will be noted and addressed after the meeting.

KNOWLEDGE SHARING

- All presentations, resources and accompanying material will be shared on the [Vaccine Procurement Practitioners Network \(VPPN\)](#).

OVER THE NEXT TWO DAYS

KEY OBJECTIVES

TO SHARE EXPERIENCES & LESSONS
LEARNED AROUND NVI

TO PROVIDE PRACTICAL INFORMATION
& OPPORTUNITIES TO ENSURE
SUSTAINABLE ACCESS TO VACCINES

TO REVIEW THE CURRENT SITUATION &
CHALLENGES FACED IN THE REGION
DURING INTRODUCTIONS & DEVELOP
ROADMAPS TO ADDRESS THESE
CHALLENGES

TO FOSTER OPPORTUNITIES TO
CONTINUE THE CONVERSATIONS ON
THE VPPN AND IN THE REGION

TO SHARE RELEVANT RESOURCES AND
TOOLS AVAILABLE TO SUPPORT
COUNTRIES & IDENTIFY ANY
ADDITIONAL NEEDS

DAY 1 | WEDNESDAY

OPENING & WELCOME

INTRODUCTIONS, OBJECTIVES &
SECURITY BRIEFING

OVERVIEW OF THE REGION'S
IMMUNIZATION PROGRAMMATIC STATUS

GOVERNMENT PARTNER UPDATES

UPDATE ON THE CURRENT STATE OF
GLOBAL VACCINE SUPPLY

LEVERAGING MARKET INTELLIGENCE

VACCINE SECURITY

UPDATE ON UNICEF PROCUREMENT
STRENGTHENING INITIATIVES

DAY 2 | THURSDAY

OPENING & RECAP

GOVERNMENT PARTNER UPDATES

NVI: PROGRAM IMPLICATIONS &
IMPLEMENTATION

SUSTAINABLE FINANCING FOR NVI IN
MENA

ROADMAPS: DEVELOPMENT OF
COUNTRY ACTION PLANS

NEXT STEPS & CLOSING

WHO WE ARE

We represent different countries...

Algeria, Djibouti, Egypt, Jordan, Iran, Iraq, Lebanon, Libya, Morocco, State of Palestine, Sudan, Tunisia

Our roles include...

General manager
 Vaccines Manager
 Health and Nutrition
 Logistics Associate
 central vaccine
 Immunization Specialist
 Health Specialist
 Supply
 Head
 EPI Manager
 Vaccines Officer
 department manager
 Management Officer
 Supply Chain
officer
 Vaccine
 Health officer
 Procurement
 National EPI
 Procurement Officer

We work at...

Programme Health medical supply
 medical technology
 Health and Population
 Egyptian authority
 Health and Nutrition
 Minister of health
 UNICEF MENARO
 supply and the management
UNICEF
 Ministry of health
 REGIONAL OFFICE
 Ministry of Finance
 MOH - Jordan
 UNICEF Jordan
 unified procurement
 Directorate of Population
 UNICEF - Programme
 Public Health

Jordan

Security Briefing

JORDAN

UNICEF – MENA RO Security team



Jordan Quick Facts



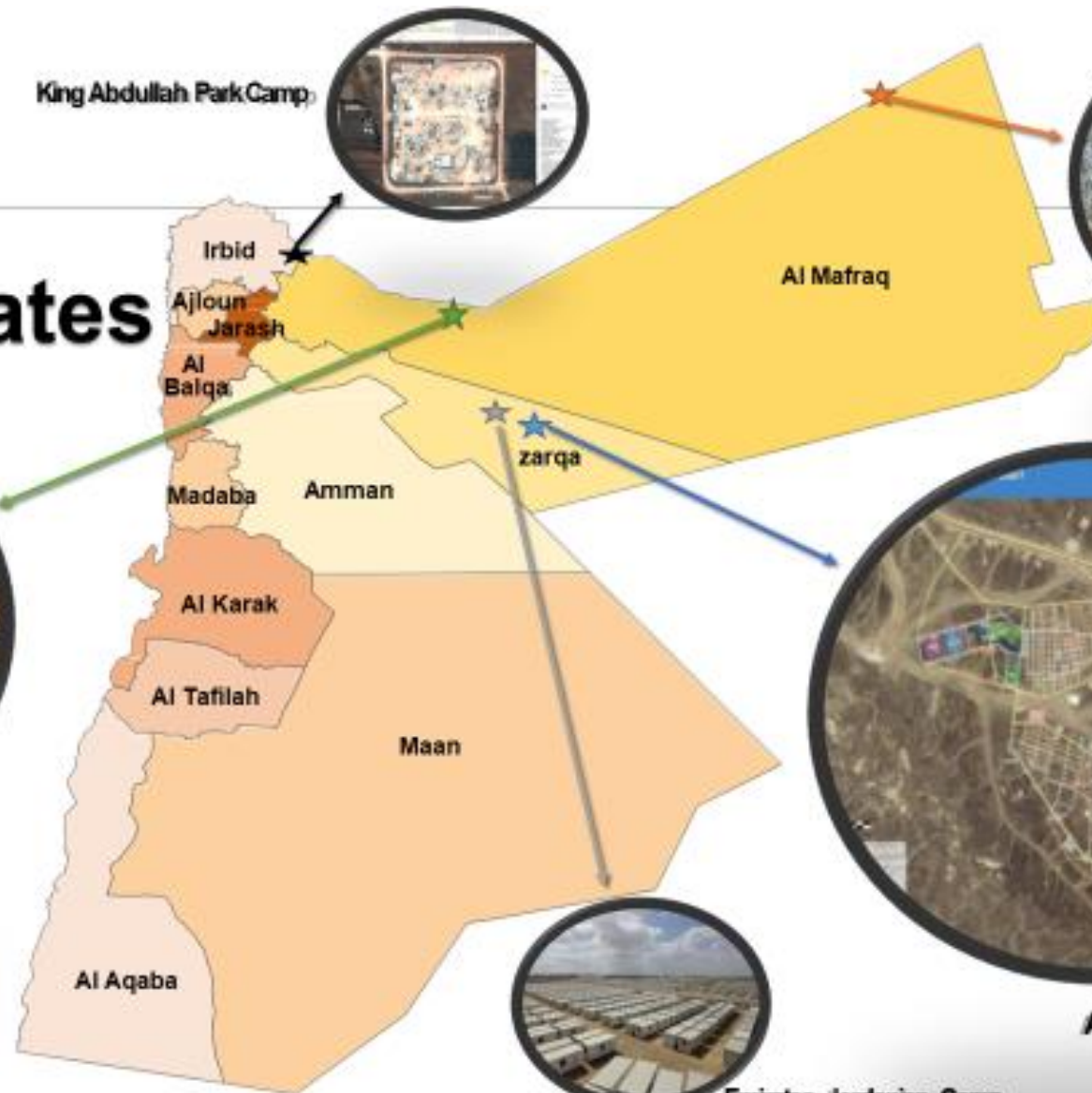
- **Official name** : Hashemite Kingdom of Jordan
- **Form of government** : constitutional Monarchy
- **Head of state**: King Abdullah II
- **Capital** : Amman
- **Official Language**: Arabic, English is widely spoken
- **Official religion**: Islam (97% Muslim , 2.2 Christian
- **Population**: 10,248 m
- **Weather in Jordan**: hot, dry summers, and wet, relatively cold winters. Nights are relatively cool in all the highlands.

Governorates

12 Governorates



Za'atari Camp



Emirates Jordanian Camp

Public Transportation



- Its safe to use Uber & Careem.
- Its not recommended to use Yellowtaxi.
- If so;
 - Note the plate number of the taxi.
 - Text the Taxi number to family, friend or colleague as reference.
 - If you feel uncomfortable, leave the taxi.
 - If you travel at night alone use taxi drivers you know.
 - Stand up for your rights.

The Currency

The "dinar" is the official currency in Jordan. It is also called "laira". One "dinar" equals 100 gersh and in dollars it almost equals 1.5 US\$.

Bargaining

Bargaining is common in Jordan. You can always ask "Is this the last price?" Usually, you can bargain at small boutiques for clothes or shoes and handcrafts/gifts but you never bargain at pharmacies, supermarkets and big stores.





Travel in Jordan

- Jordan offers a variety of wonders, from vast desert, to the Dead Sea, to the ancient city of Petra.



Food in Jordan

- Mansaf is considered Jordan's national dish, which consists of lamb stewed in a jameed (yogurt sauce) and rice, topped with nuts, more jameed, and a flat bread called shrak.
- Jordanians often eat hummus (a dip made of chickpeas) with fava beans and falafel (fried balls of crushed chickpeas mixed with oil and spices).
- Bread is dipped into zayt (olive oil) and za'atar (Middle Eastern herb, similar to oregano and thyme, mixed with sesame seeds and other spices). Lamb and chicken are the most commonly eaten meats.

Security situation

- Jordan is considered a stable, peaceful country with a strong security apparatus. In comparison with the region, the security and emergency services are effective, responsive and well organized, and the medical facilities are very good.
- The political situation in Jordan is stable. However, protests do sometimes occur in Amman and other cities. Most of such protests are peaceful, but you should take sensible precautions, follow news reports and avoid all political gatherings and demonstrations.
- In Amman, protests most often take place on Thursday evenings, near the Prime Ministry at 4th Circle, and on Fridays after midday prayers near the Hussein mosque in downtown Amman.



General Threat Assessment

Category	Threat Rating
Armed Conflict	Minimal
Terrorism	Low
Crime	Low
Civil Unrest	Moderate
Hazards	Moderate

Category	Threat Rating
Armed Conflict	Moderate
Terrorism	Low
Crime	Low
Civil Unrest	Substantial
Hazards	Substantial

Jordan

Security Level - 1
Minimal

NE Border

Security Level - 3
Moderate

Travel advice for women in Jordan



EMERGENCY CONTACT DETAILS

Hospitals & Medical Services

- Al Khalidi Hospital (near 3rd Circle)
- Ishtishari Hospital (near 4th Circle)
- Jordan University Hospital (Tla'a al Ali)
- Jordan Hospital (Abdali)
- Farah Maternity Hospital (Jabal Amman)
- Civil Defense & Emergency: 911



Emergency Numbers:

Police: 911
Ambulance: 911
Fire Brigade: 911



UNICEF Security Personnel:

Mr. Ayman Almadi, RO Security Associate: +962795401110
Mr. Mosa Elayan, CO Security Officer: +962790036317
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Bakhtiar Safi, Regional Security Adviser: +962797169987

UNDSS Jordan:

Radio Room: + 962795415242
Ms. Chandana Tiwari, Chief Security Adviser: +962790850976
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Colleague and/or Friend:

Mr./Ms.: Cellphone#.....

Mr./Ms.: Cellphone#.....



General safety information

- Always update your profile on TRIP system (required for all areas outside Amman.
- Always carry identification documents. Leave your passport in a safe place and carry a photocopy for identification purposes.
- If you encounter a demonstration avoid the area, do not stay and take pictures.
- Avoid all demonstrations and large gatherings, follow the advice of local authorities and monitor local media.
- Avoid travelling alone in remote areas.
- Call **911** in case of emergency.
- Call UNICEF Security team if needed, contacts in the emergency contacts list.
- Avoid shopping area(downtown) after 10 pm.

Safety and Security start with awareness and awareness starts with you



Thank you!

Stay Safe!



MENA Regional VPPEF
19 & 20 October 2022
Amman, Jordan

Overview of Immunization Programme in Middle East and Northern Africa Region

Daniel Ngemera
Senior Immunization Advisor
UNICEF MENA Regional Office

Dr. Osama Mere
Technical Officer (Life Course Immunization)
WHO EMRO

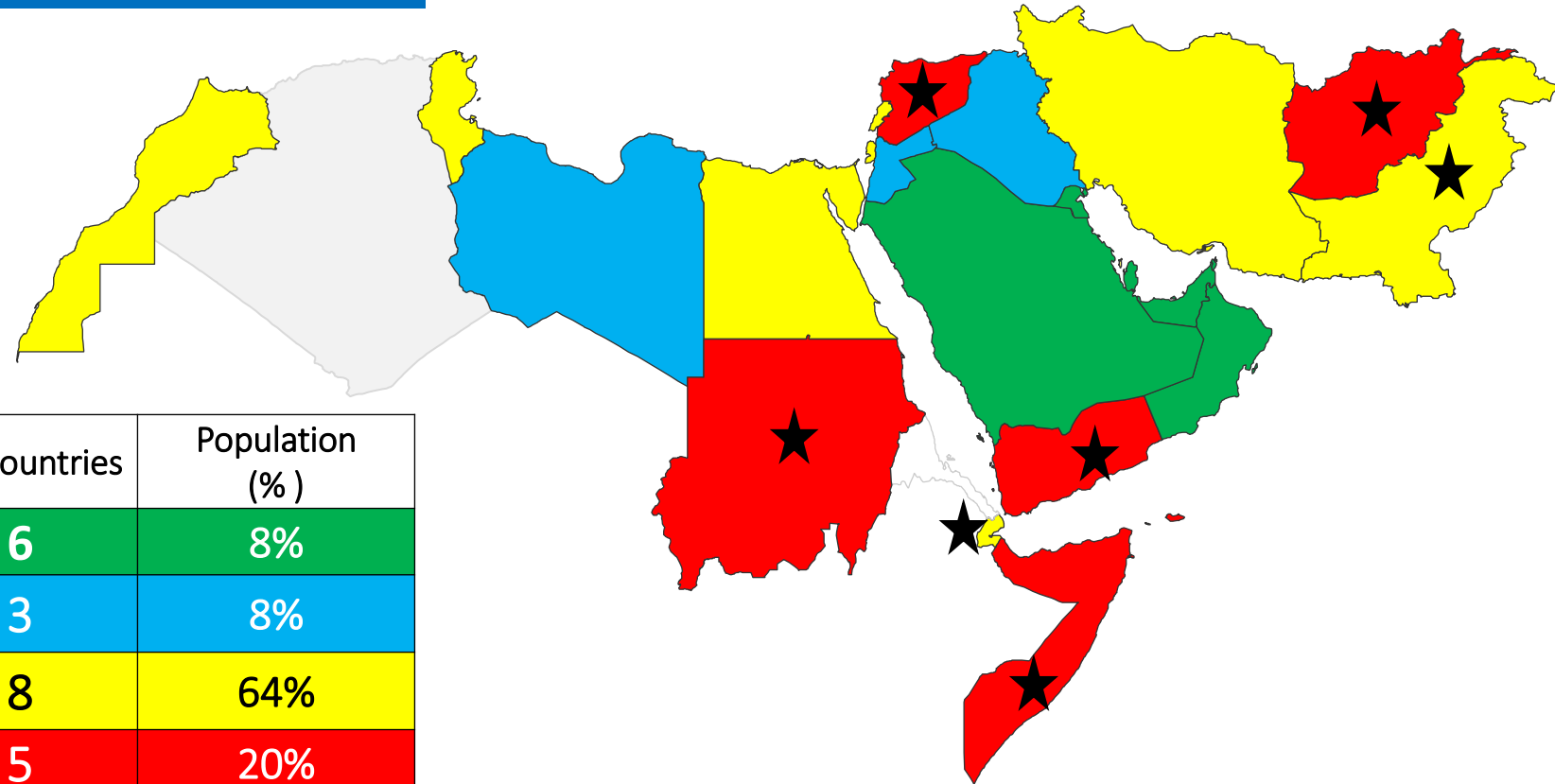




Overview of the region's immunization programmatic status

EMR countries by WB income group and Gavi eligibility status

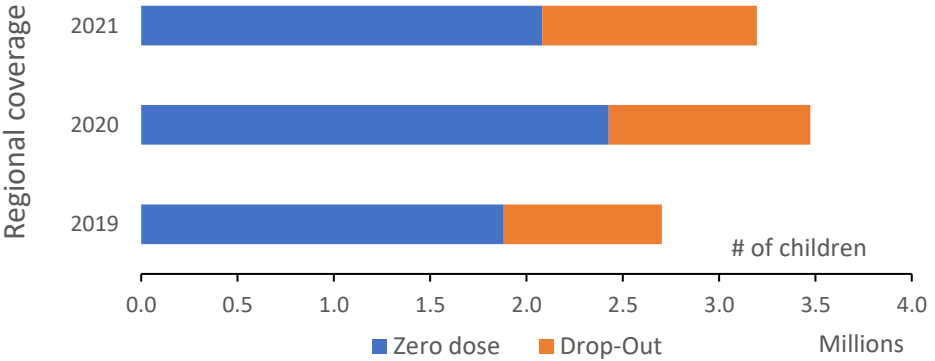
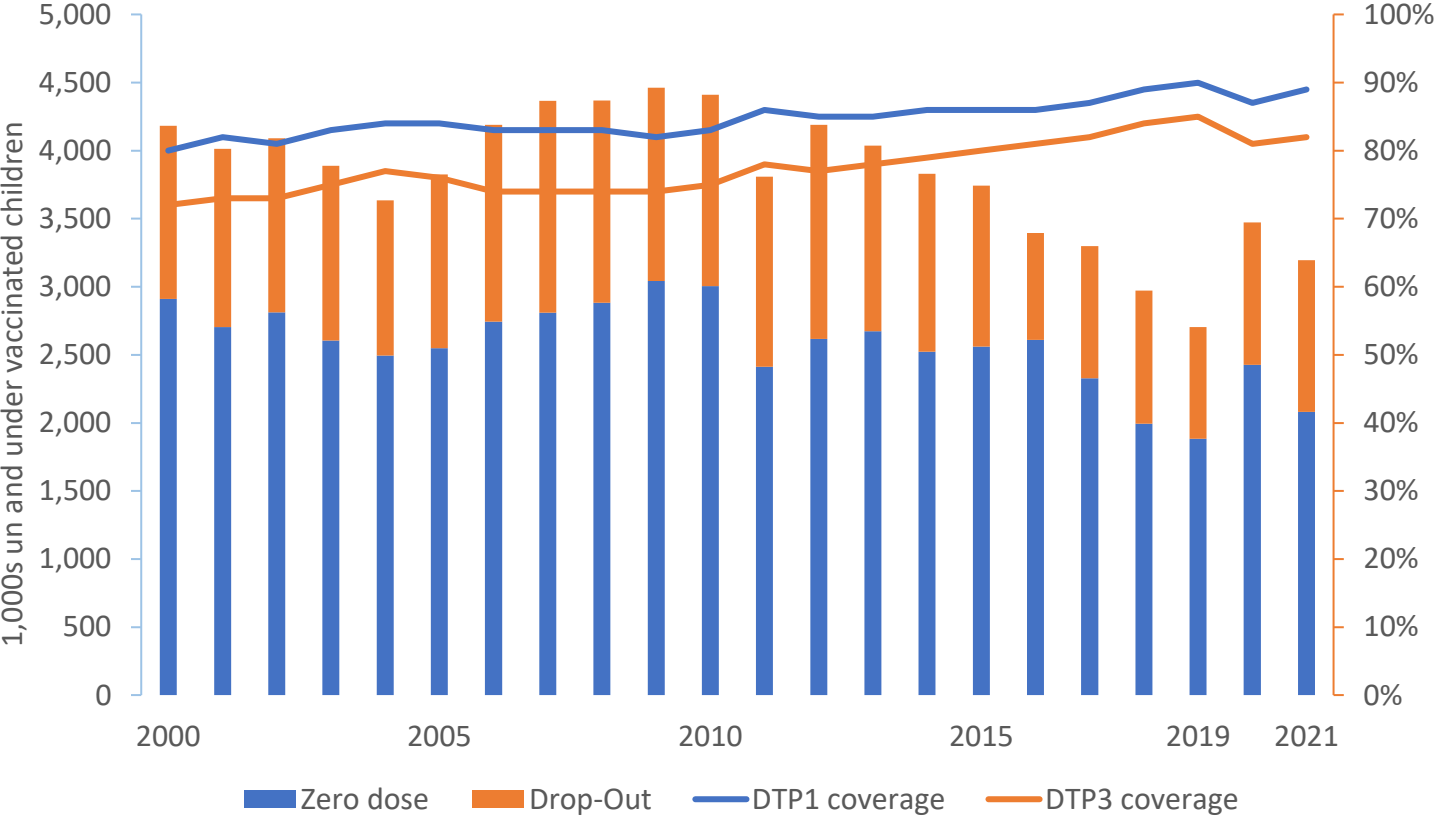
Seven out of 22 countries are eligible for Gavi support



Income group (GNI 2022)	# of countries	Population (%)
High income countries	6	8%
Upper middle-income countries	3	8%
Low middle income countries	8	64%
Low income countries	5	20%
Gavi eligible countries	7 ★	51%

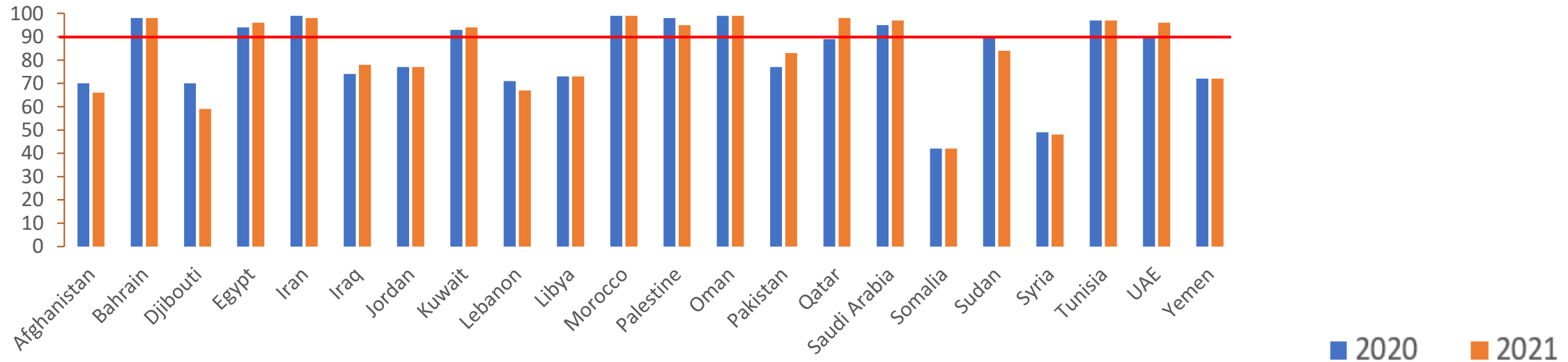
3.1 million children were un- and under-vaccinated in EMR in 2021, ~half a million more than in 2019

DTP1 and DTP3 coverage lower in 2021 than in 2019, leaving more than 3 million children vulnerable to vaccine preventable diseases

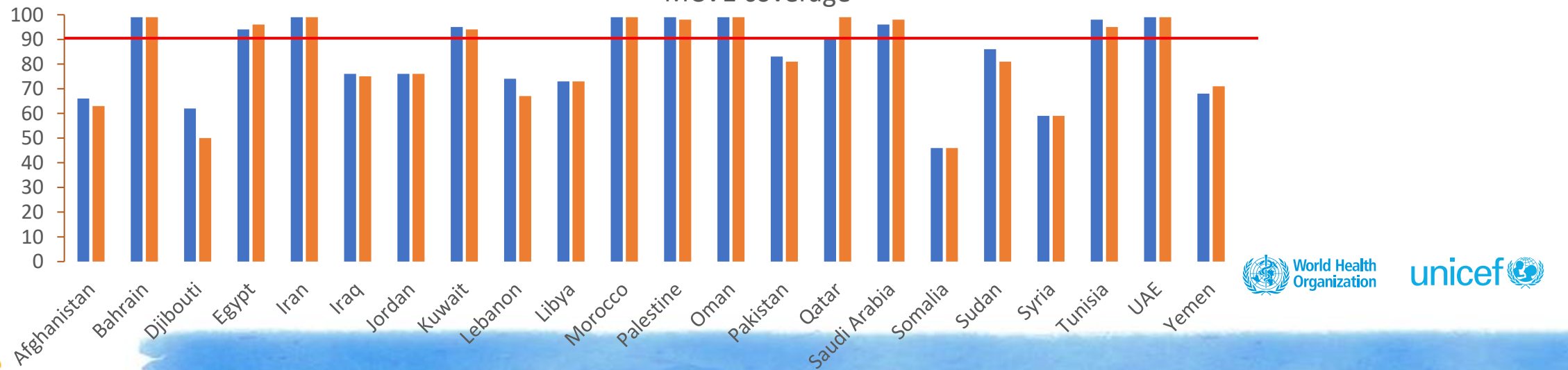


DTP1, DTP3 and MCV1 coverage, EMR

DTP3 coverage



MCV1 coverage



a call for solidarity and action



Globally, 25 million children were un-or under-vaccinated in 2021, 2 million more than in 2020, and 6 million more than in 2019

- COVID-19 pandemic years represent the **worst continued decline in coverage reported in 30 years**
- **Preceded by a decade-long plateau** in global progress on immunization coverage
- Increasing global crises: **conflict, food crises, extreme weather events and drought, displacement, economic shocks**. All contributing to **growing adversity & deprivations for zero-dose communities** and underscore urgency of required response.

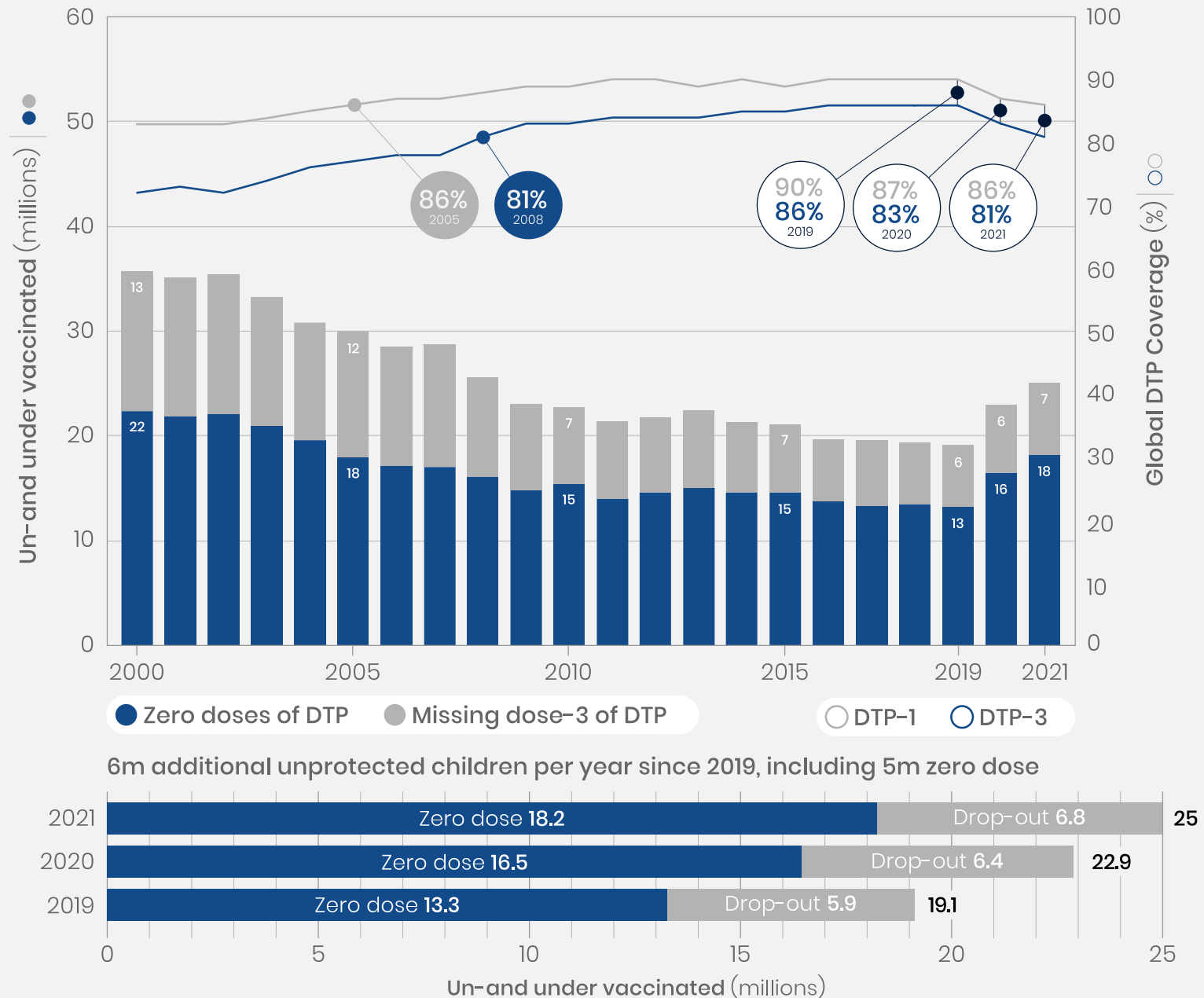
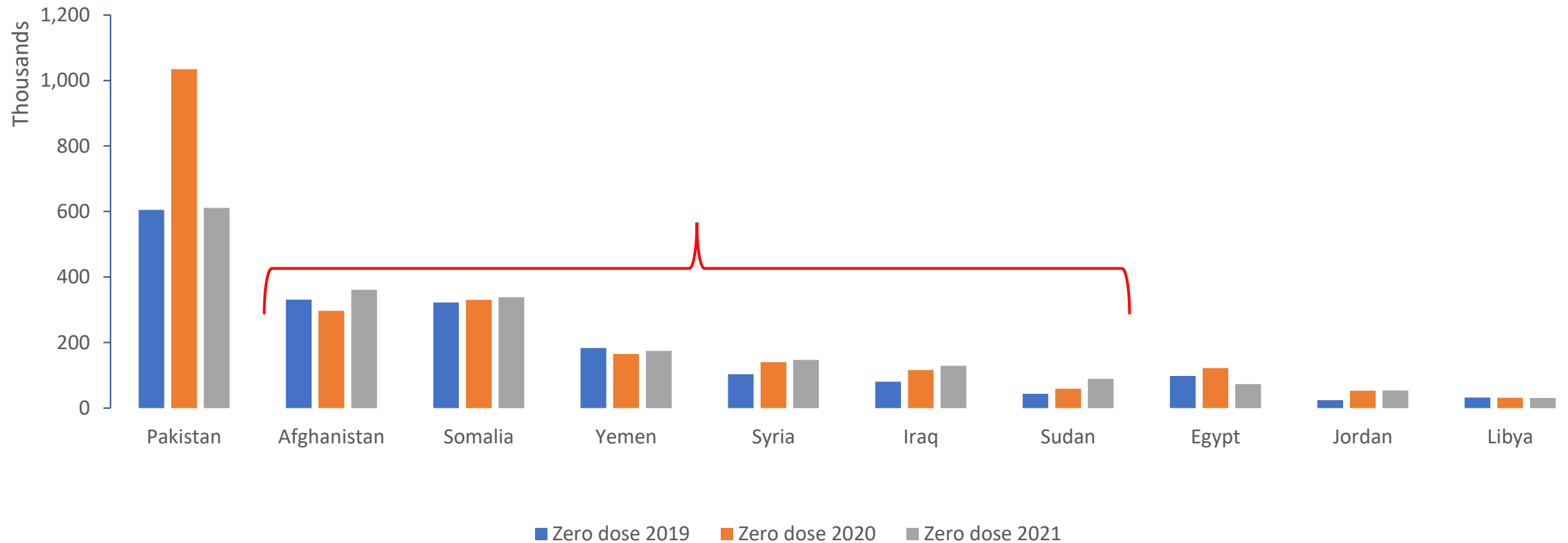


Chart source: UNICEF Immunization Regional Snapshots <https://data.unicef.org/resources/regional-immunization-snapshots/>

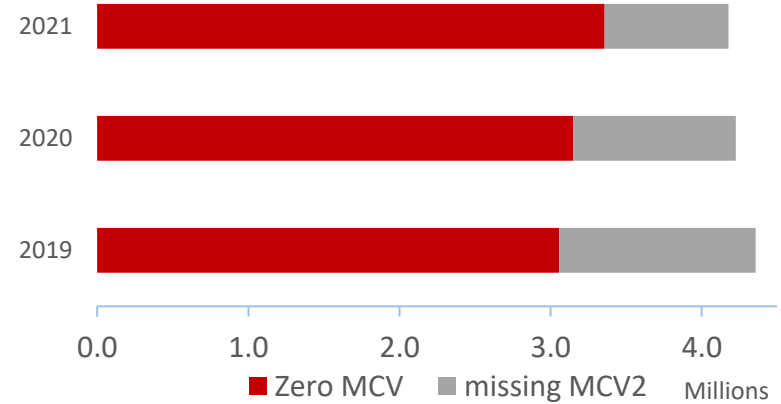
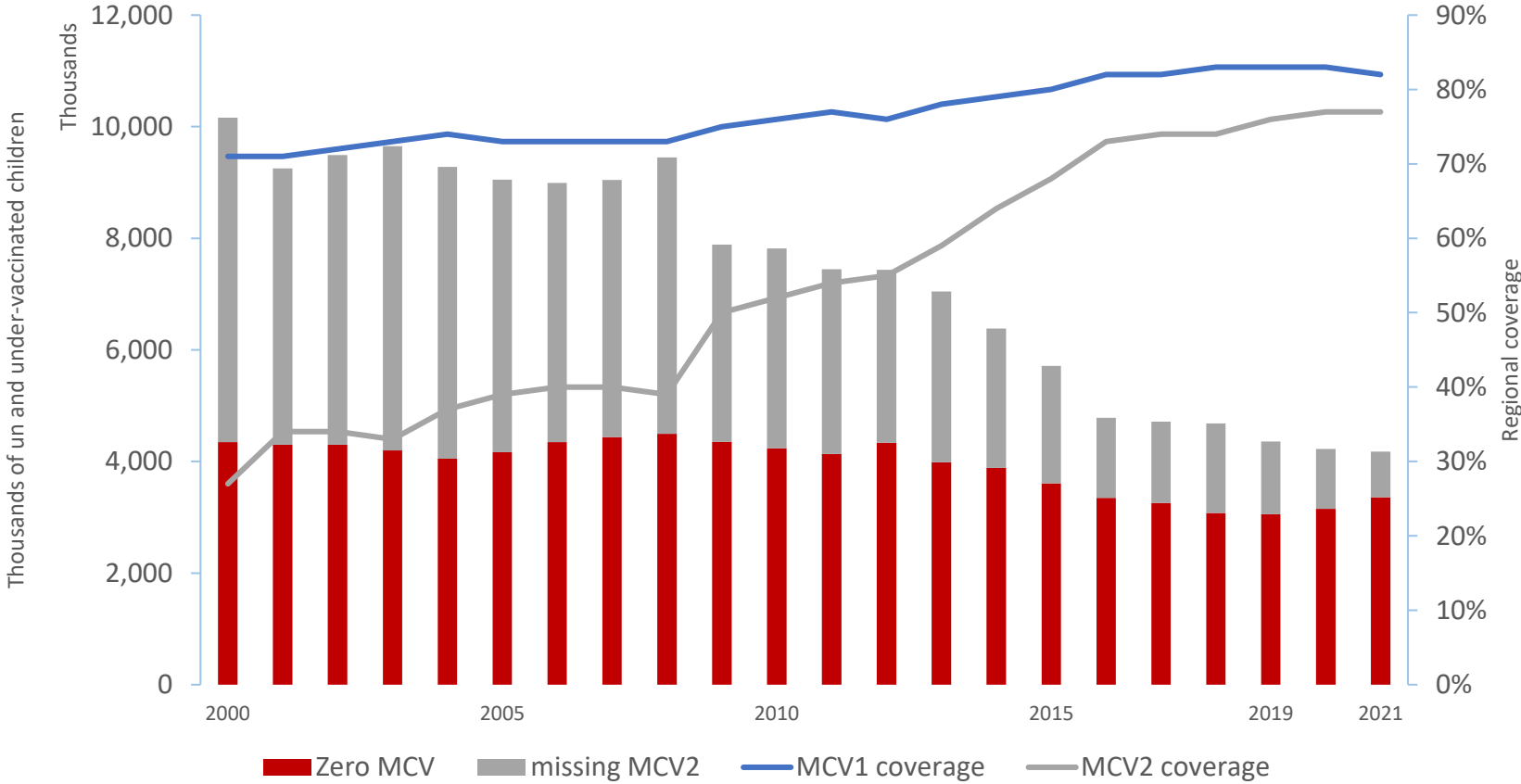
Trend in zero dose children, EMR 2019 - 2021

Increasing trend in six out of top seven countries with highest number of zero dose children



Over 4 million children un-protected against measles in 2021

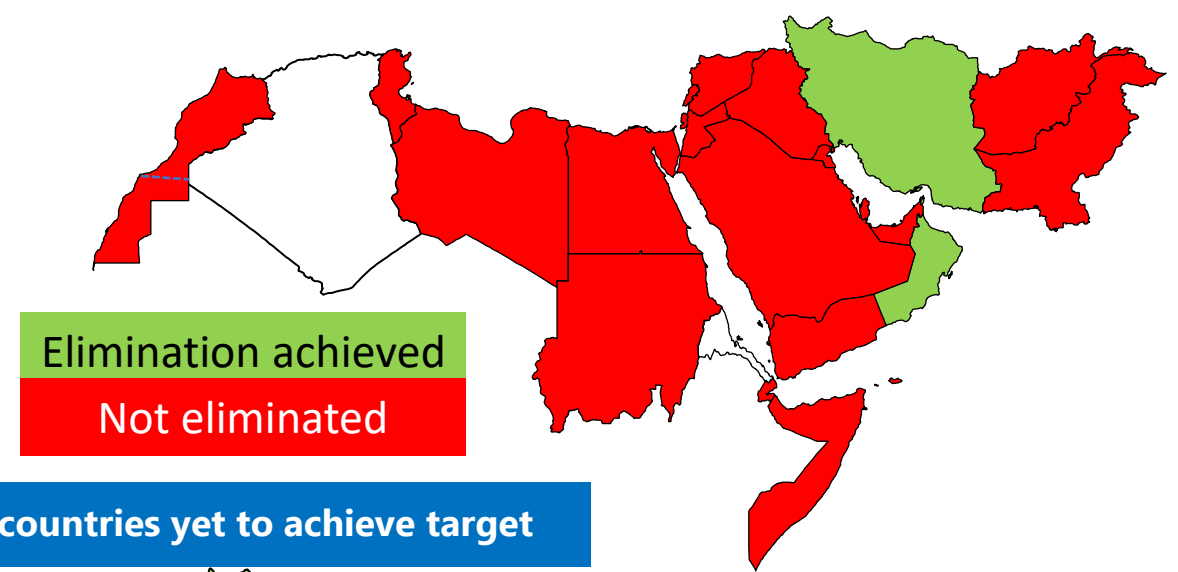
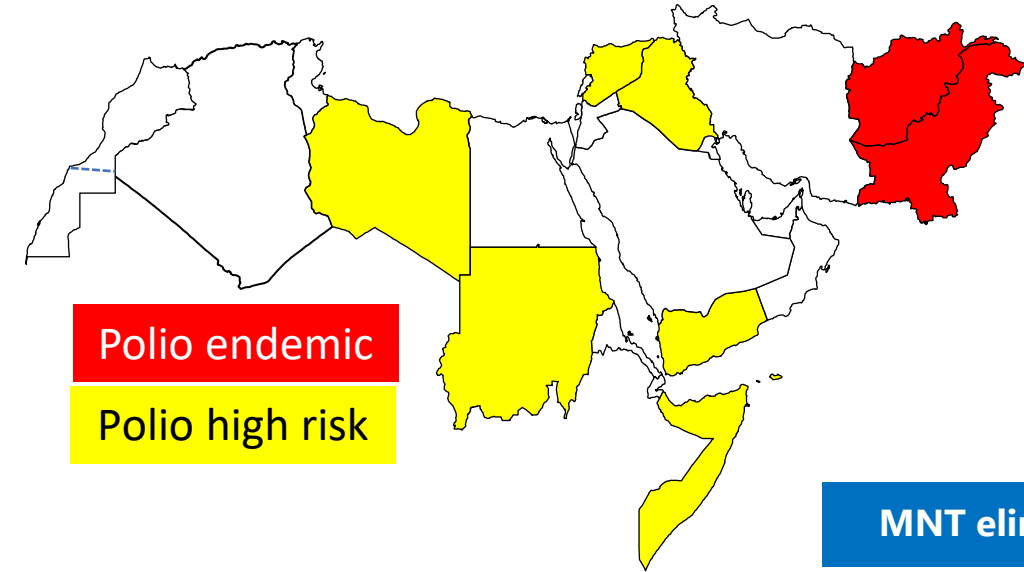
Supplemental Immunization Activities (SIA) continue to be required to ensure that all children receive 2 doses of measles containing vaccine (MCV)



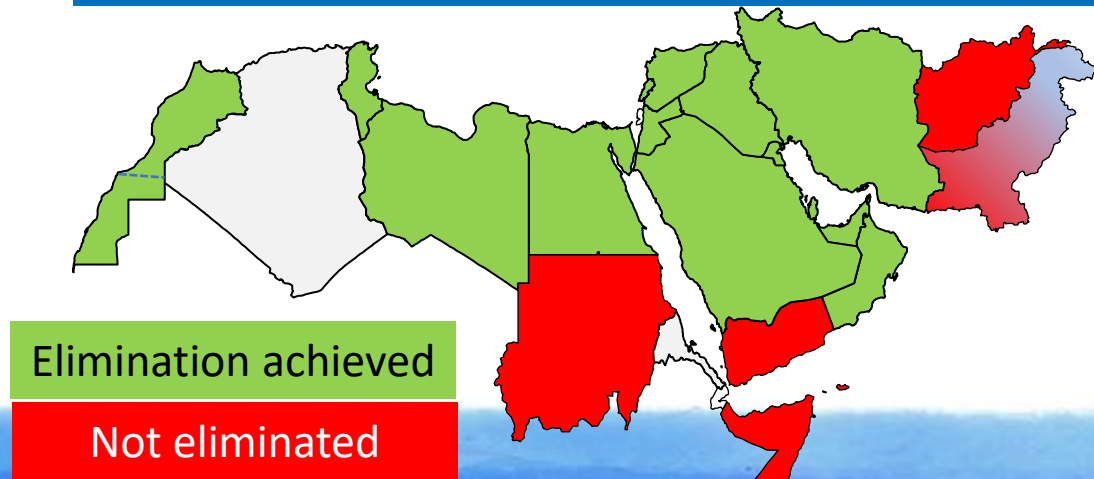
Targets for vaccine preventable diseases eradication, elimination and control

Polio eradication: Afghanistan and Pakistan still endemic

Measles and Rubella elimination: Bahrain, Iran and Oman eliminated measles

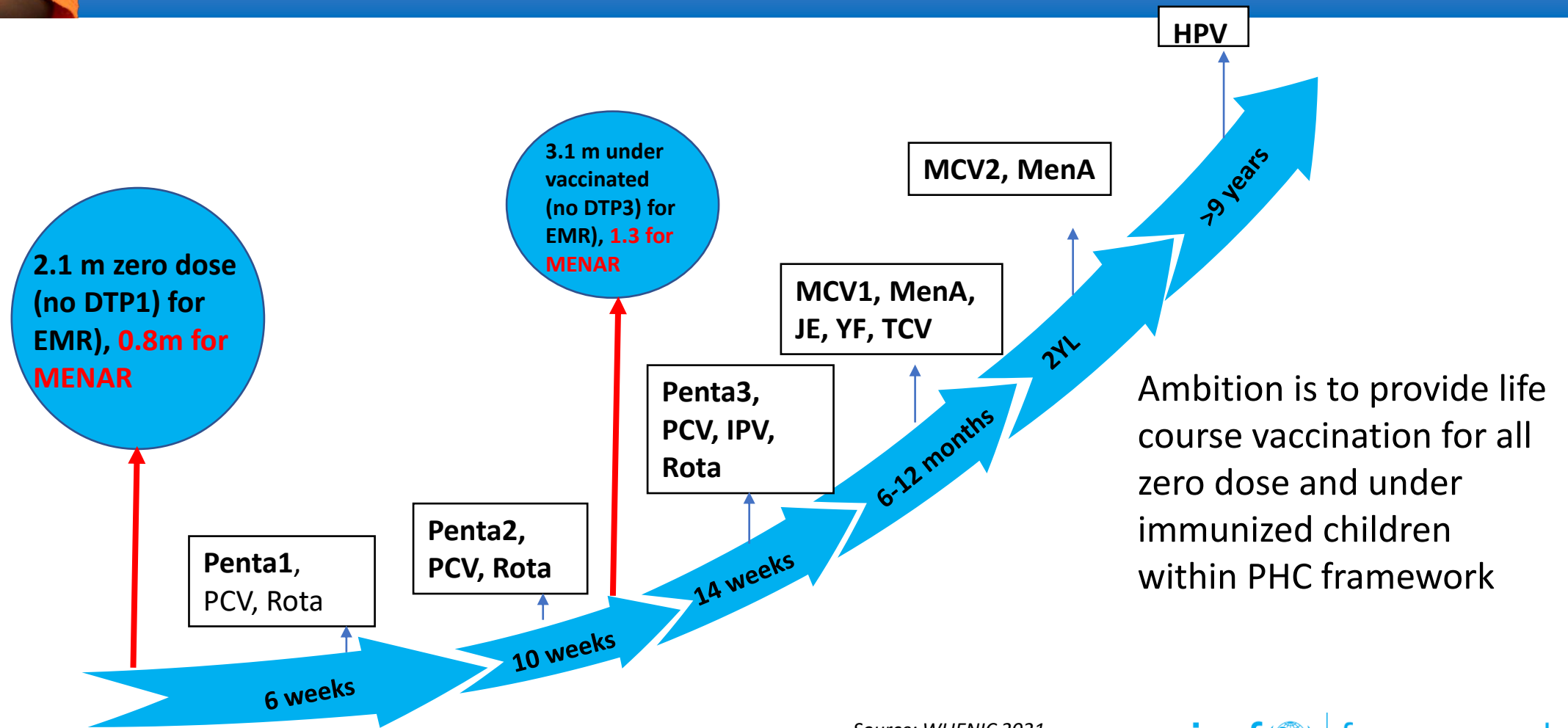


MNT elimination: Five countries yet to achieve target





Fully vaccinate every child everywhere



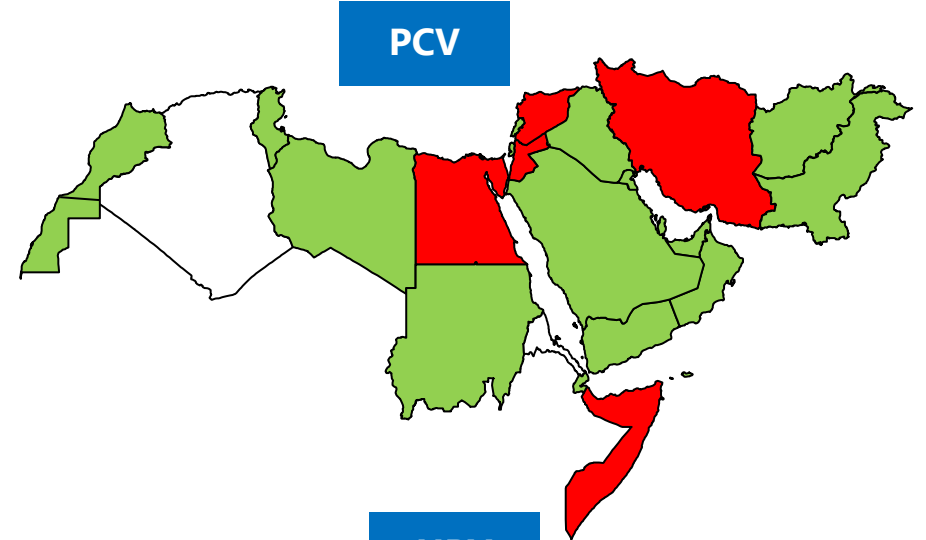
New vaccine introduction in EMR

Hib

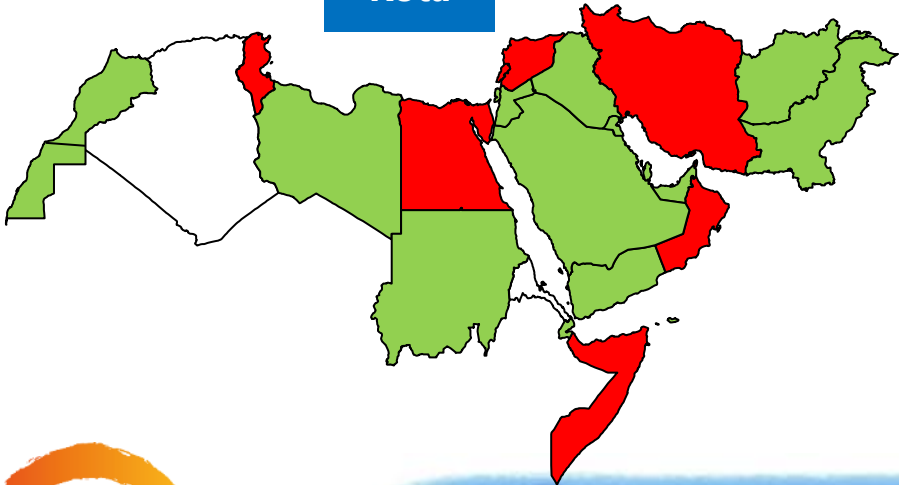


With the exception of HPV most of the Gavi eligible countries have introduced most of the new vaccines compared to Middle Income Countries (non-Gavi Eligible Countries)

PCV



Rota



Introduced

Not introduced

For MENA: Algeria not introduced Rota and HPV

HPV



Vaccination status of MENA countries, 2021

	DPT-1	DPT-3	PCV-3	OPV-3	IPV-1	Rota	HPV
MENA	93	88	44	87	90	39	
Algeria	96	91	91	91	94		
Bahrain	99	98	99	99	99	99	
Djibouti	70	59	59	59	59	66	
Egypt	97	96		96	97		
Iran	98	98		98	98		
Iraq	89	78		78	81	41	
Jordan	78	77		76	78	75	
Kuwait	99	94	96	94	99	75	
Lebanon	88	67	70	64	80		
Libya	74	73	73	73	74	73	
Morocco	99	99	98	99	99	98	
Oman	99	99	99	99	99		
Qatar	99	98	98	98	99	98	
Saudi Arabia	97	97	97	97	97	97	
Palestine	99	95	95	95		87	
Sudan	94	84	85	85	94	84	
Syria	65	48		52	65		
Tunisia	99	97	96	97	95		
UAE	96	96	95	96	96	91	
Yemen	82	72	72	66	68	73	

LEGEND: 90-99 80-89 70-79 60-69 < 60

Cold Chain Equipment Inventory and Vaccine Stock Management

Real time Cold Chain Equipment Inventory with Regular update System

GAVI eligible Countries: Djibouti, Yemen, Sudan and Syria



Except for Jordan and NW Syria CCE Inventory updating is adhoc or not taking place

Source: Country Report-2022

Routine Immunization Vaccine stock visibility system: DHIS-2, VLMIS, VSSM/others

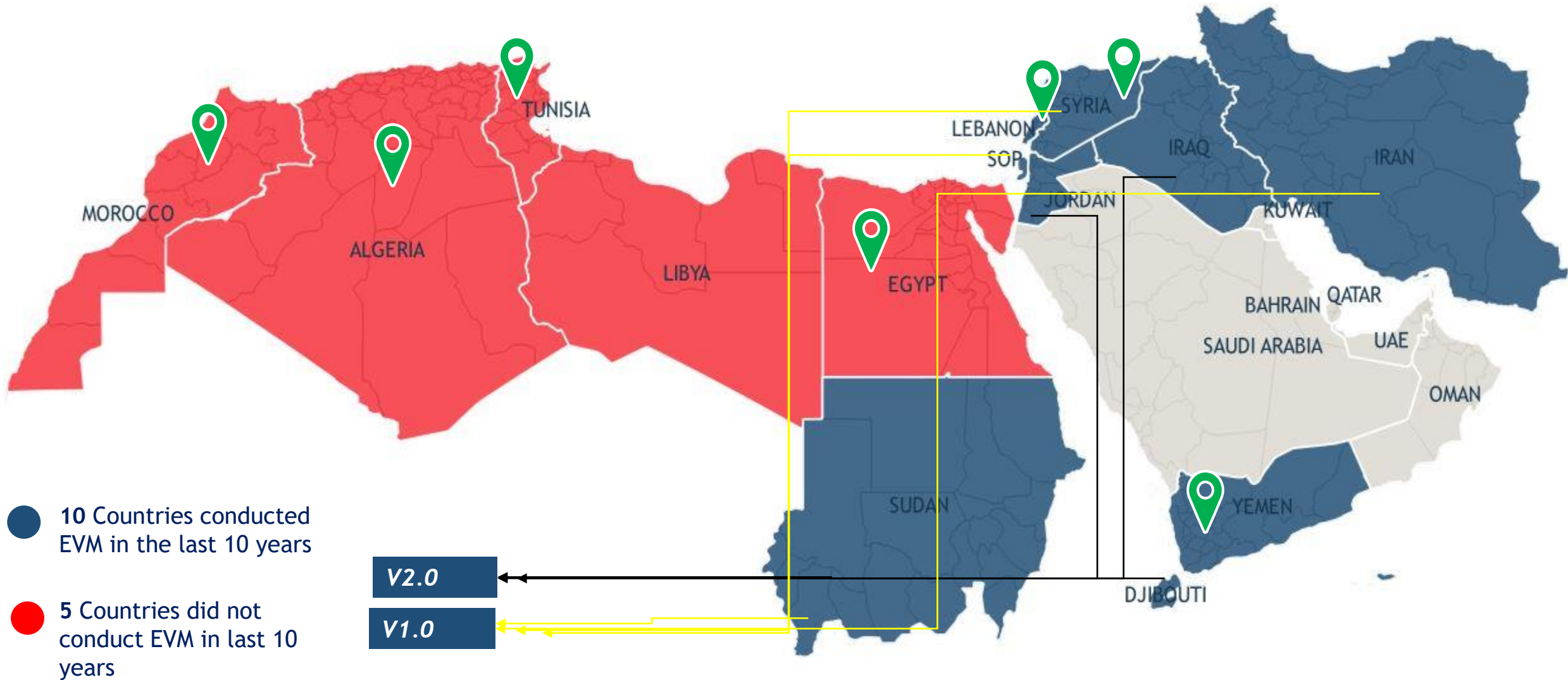


Categories

- Not done (5)
- Partially done (7- YEM done offline at central level, SYR NW/ Damacus is paper based,DJI irregular at district level)
- Yes (2- EGY done at all levels, IRN wVSSM)
- Not included

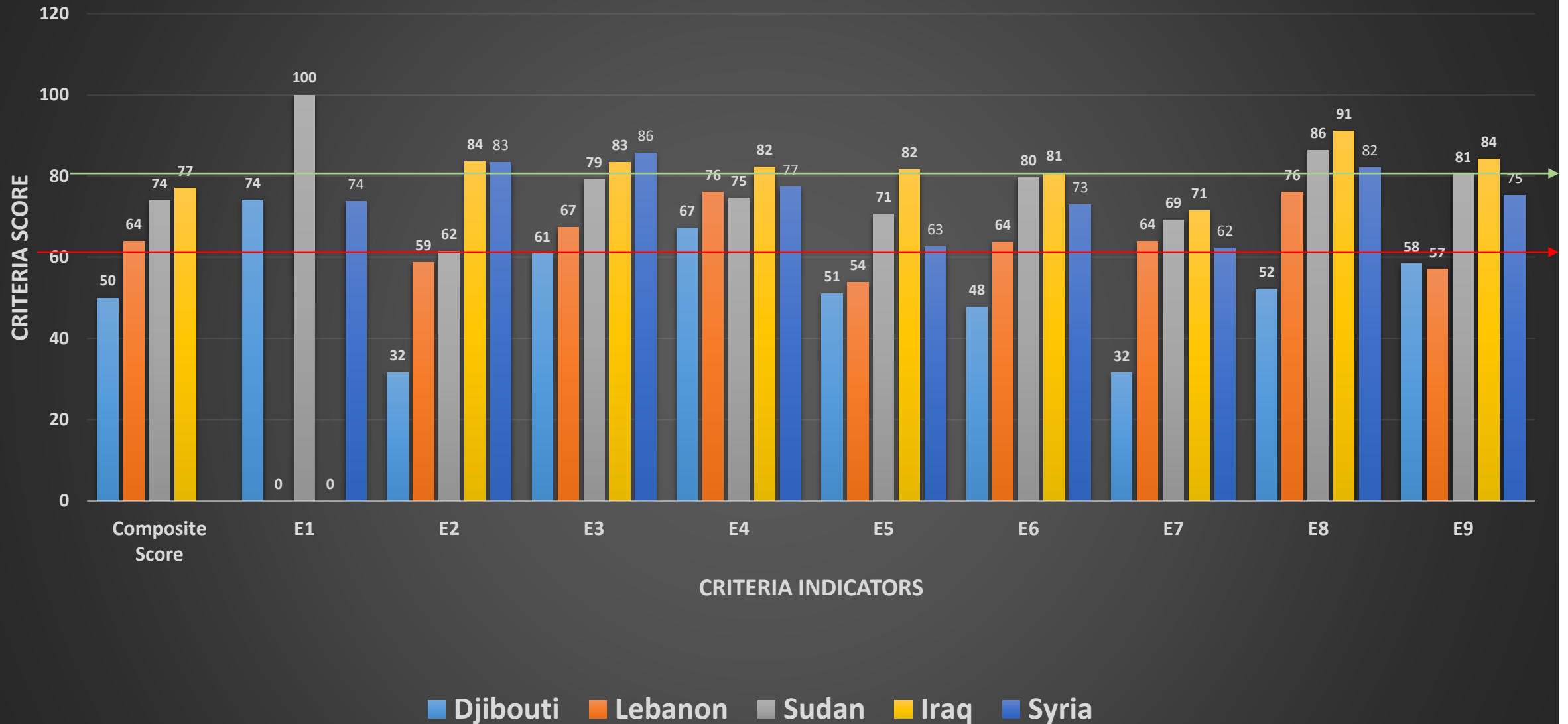
Source: Country Report

Effective Vaccine Management initiative implementation

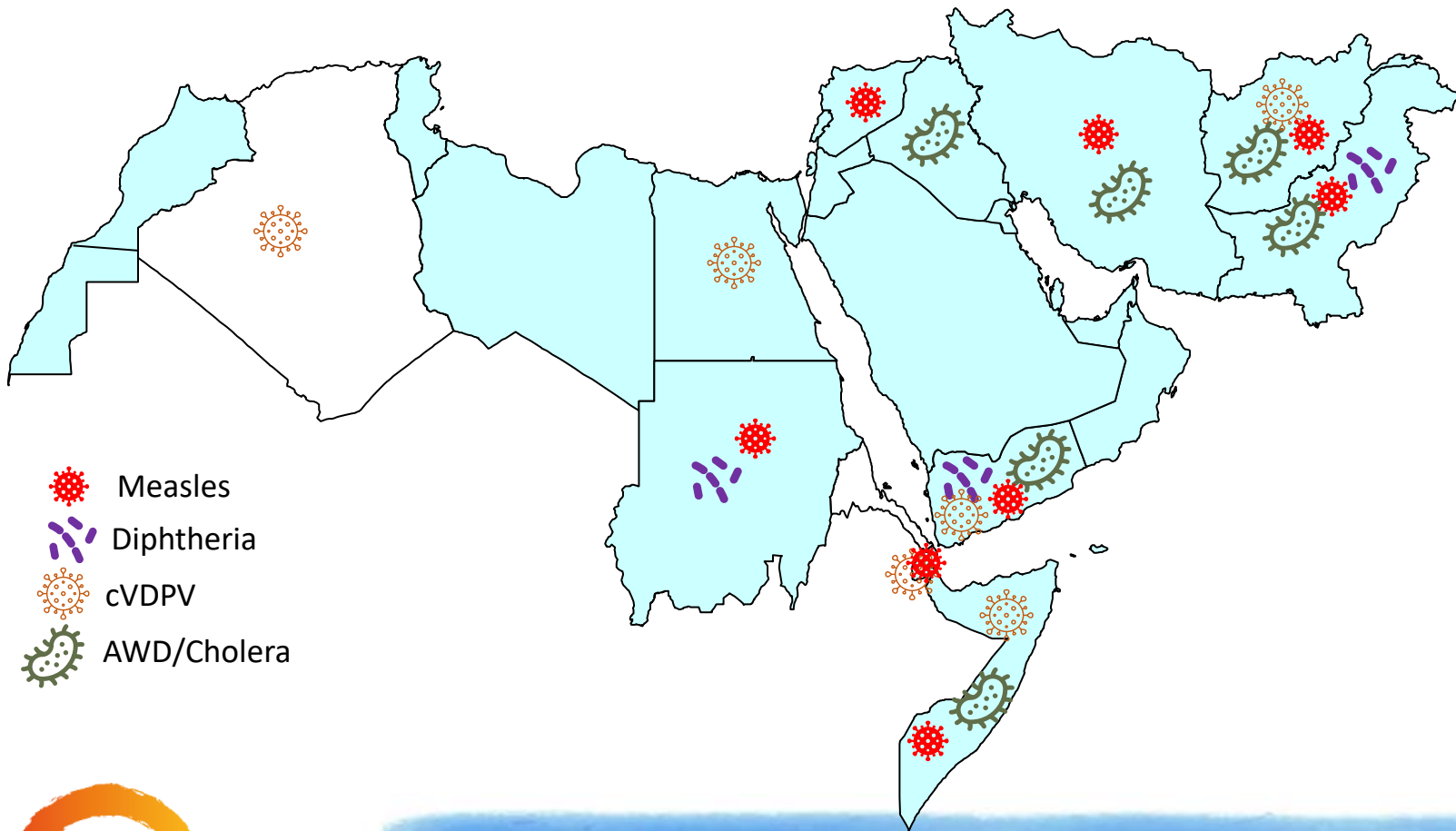






continuous Improvement Plan(cIP) : Lebanon, Syria and Iraq

EVM composite & overall criteria score MENA countries (2019-2021)



Reported vaccine preventable diseases (VPD) outbreaks in EMR, 2022

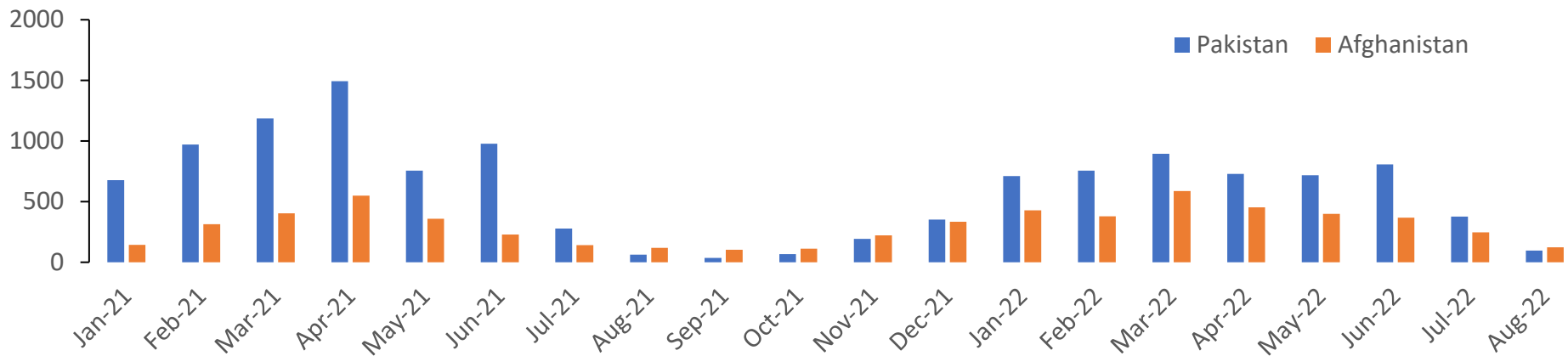


-  Measles
-  Diphtheria
-  cVDPV
-  AWD/Cholera

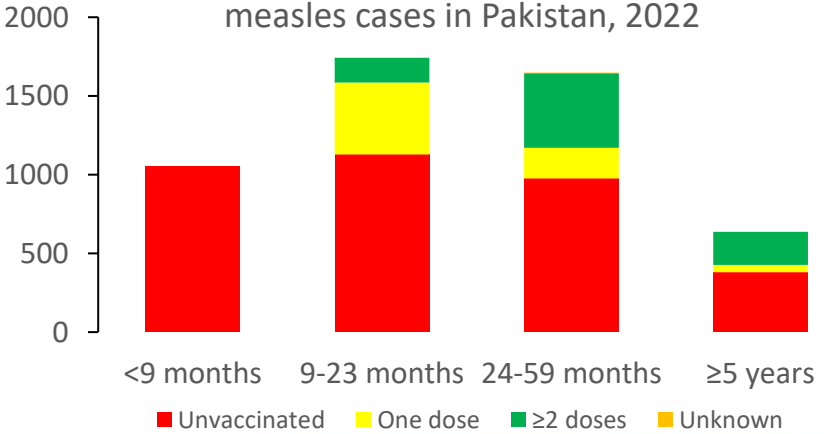
	Reported cases	Deaths
Measles	106,453	465
Diphtheria	163	-
cVDPV	83	-
AWD/Cholera	273,380	136

Measles – most of the cases are reported from Pakistan and Afghanistan

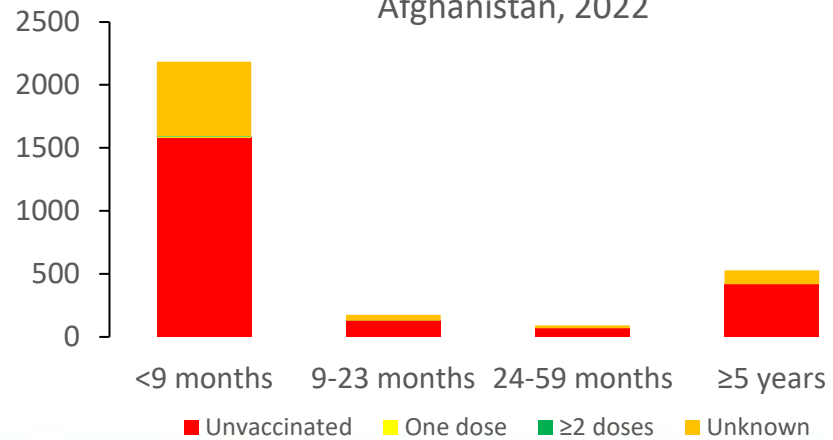
Confirmed measles cases, 2021 - 2022



Age and vaccination status of confirmed measles cases in Pakistan, 2022

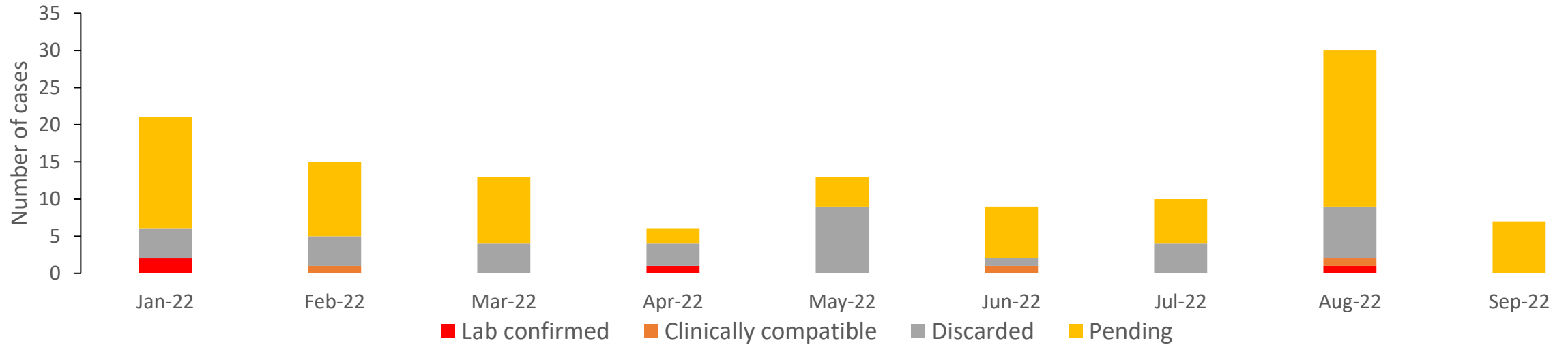


Age group of the confirmed measles cases in Afghanistan, 2022

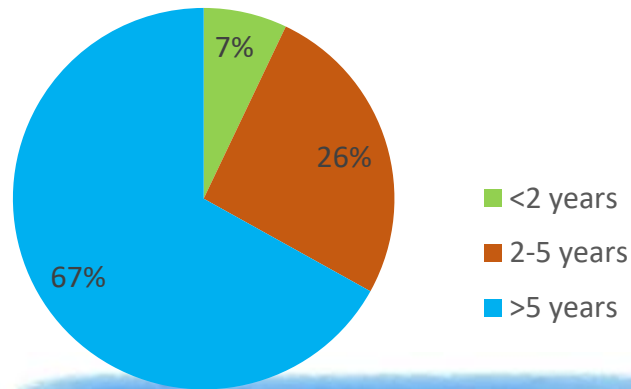


Diphtheria – most of the cases are reported from Pakistan

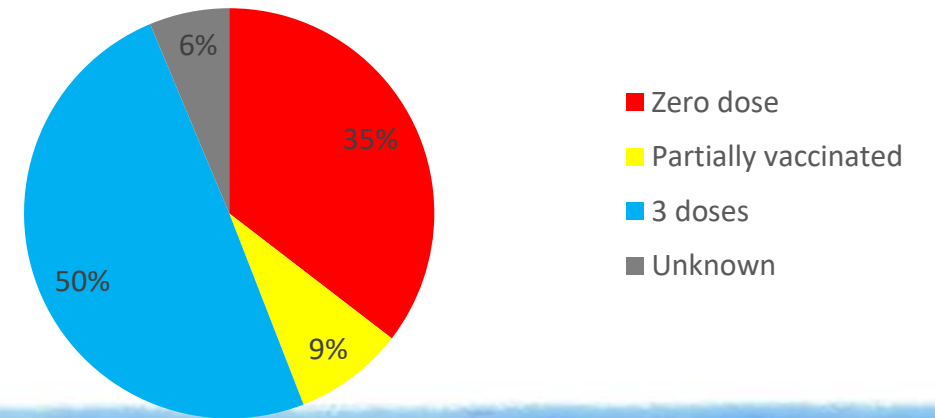
Suspected diphtheria cases, 2022 (n=124)



Age distribution of the suspected cases



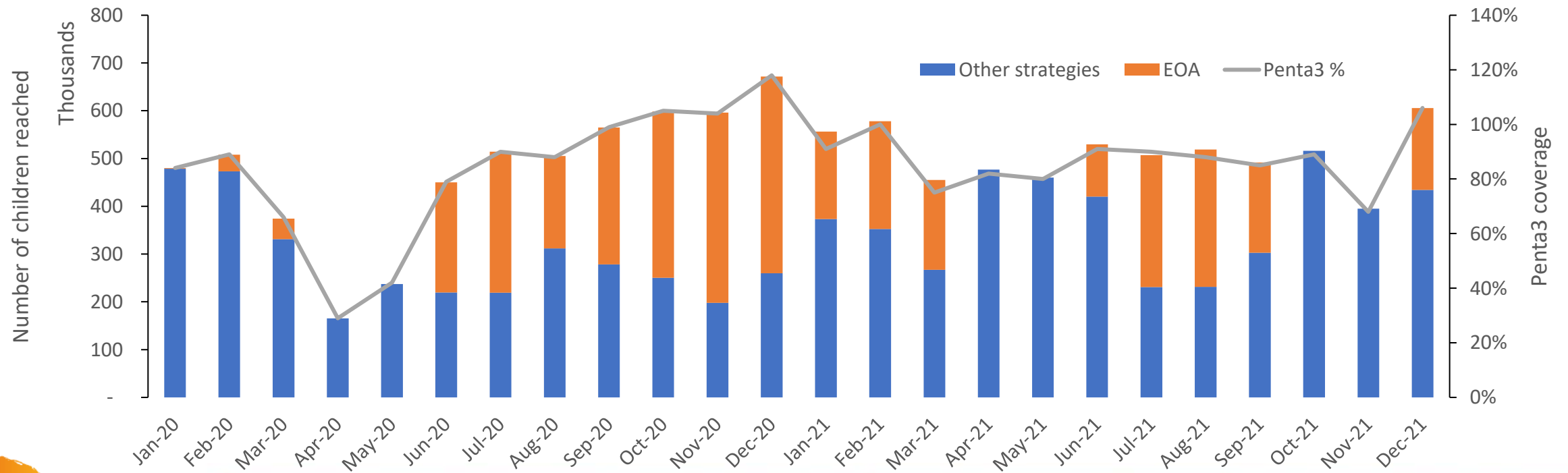
Vaccination status of the suspected cases



Actions taken – Pakistan

- 435 mid level managers trained → 5.74 times more sessions received supportive supervision in 2022 in comparison to 2019
- >9,000 vaccinators were trained on microplanning → improved quality outreach activities

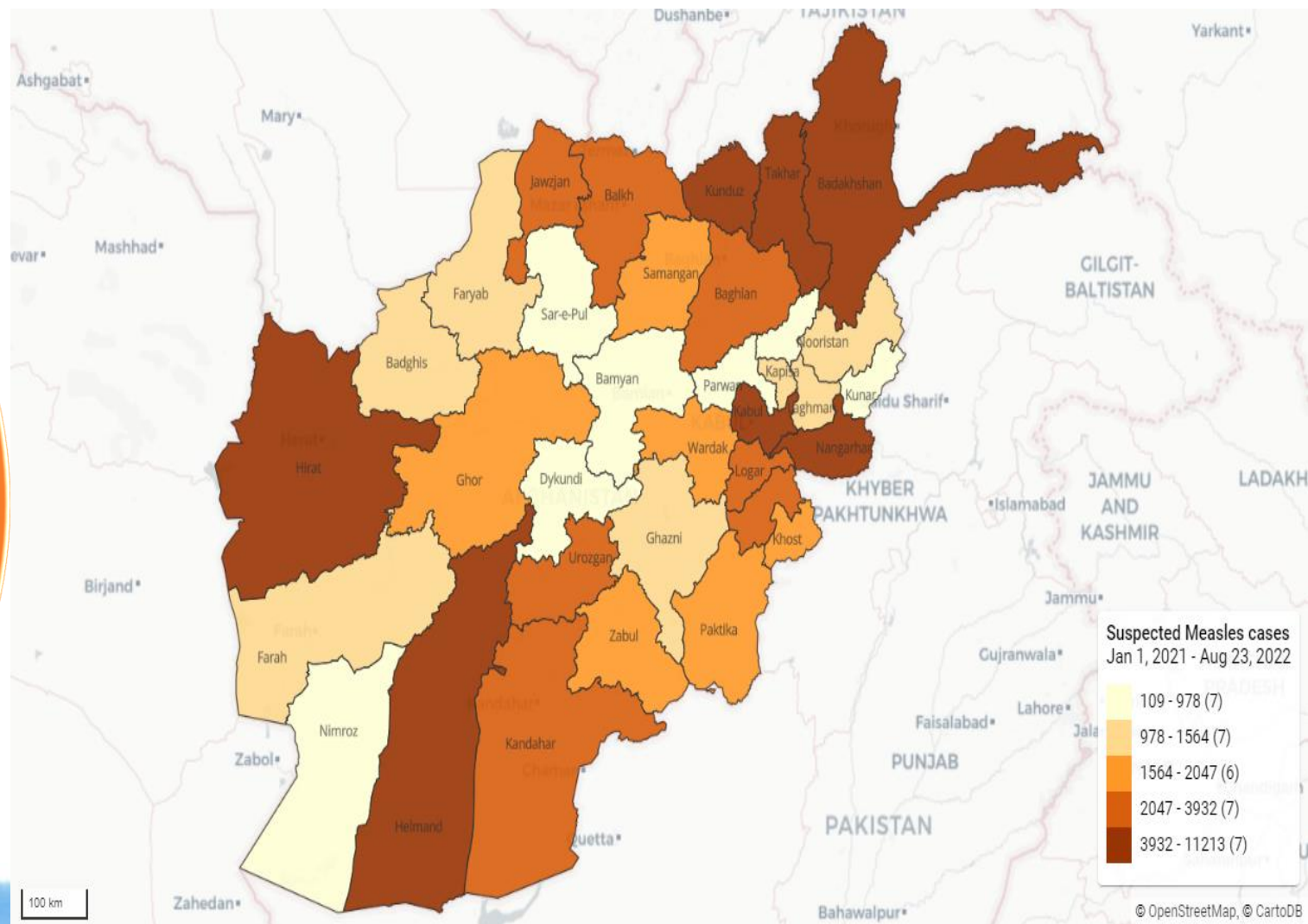
Recovery through enhanced outreach activities (EOA), Pakistan 2020 - 21



Actions taken – Afghanistan

Measles outbreak response vaccination activities 2022

- 41 districts, Q1 2022
- 7 flood affected districts (multi antigen)
- 85 districts, Q3 2022



a call for
solidarity
and action

Actions taken – Somalia

Nov 2021 – Jan 2022

Accelerated immunization activities

- 231 vaccination teams in 54 low performing districts
- 75,217 Zero dose children reached (Penta1)
- 66,585 children received Penta3
- 59,426 children received IPV1
- 73,519 children received MCV1
- 33,701 children received MCV2
- 22,720 Td doses administered as Td2

2022

Measles outbreak response

- >1.36 million U5 years children received MCV

Integrated outreach

- 101 teams in 39 drought affected districts
- >55,000 zero dose children reached (Penta1)
- >80,000 MCV administered
- >70,000 IPV administered
- >20,000 Td administered
- >30,000 ORS distributed
- >148,000 clinical consultation

Mar – Aug 2022



Actions taken in other countries

- Iraq: Intensified Integrated Immunisation services (3iS);
- Sudan: Accelerated campaigns in 2021;
- Syria: RI antigens added to the ongoing MR SIA (for defaulters and missed children);
- Yemen: the integrated outreach (IOR);



Other priority activities planned/ongoing, 2022

Country activities

- National Immunization Strategy: Djibouti, Lebanon, Yemen (development in process)
- Full portfolio planning (FPP): Gavi eligible countries
- COVID-19 vaccination campaign: Pakistan, Sudan, Somalia, Syria, Yemen
- Conduct CEA and qualitative gender and demand barriers analysis (Sudan)
- EAF applications (Sudan, Syria, and NWS)
- Emergency vaccination for flood affected communities: Pakistan
- Enhanced and integrated outreach activities: Pakistan and Yemen
- MCV follow-up SIA: Afghanistan, Sudan, Somalia, Syria and Yemen
- TCV campaign: Pakistan (partially)
- MNT elimination validation: Pakistan (Sindh)
- Effective vaccine management (EVM) assessment: Qatar

Regional events/activities

- Training on molecular diagnosis of measles and rubella for national and regional measles-rubella lab personnel: 16 – 20 October 2022, Muscat
- Gavi Regional Working Group meeting: 17 – 18 October 2022, Dead Sea, Jordan (organized by UNICEF-MENARO)
- Measles Regional Verification Commission meeting: 1 – 3 November 2022
- Inter-country meeting of EPI managers: 21 – 23 November 2022, Cairo
- Meeting of the Regional Technical Advisory Group (RTAG) on immunization: 24 November 2022, Cairo
- Development of Regional strategic plan for MR elimination 2022-2026
- Development of Strategic framework for implementation of IA2030 and regional scorecard
- Development of Regional strategy for life course immunization building on COVID-19 experience
- Support countries in the completion of zero dose mapping, develop strategies to address zero dose;
- UNICEF HAC funds are mobilised for use in integrated delivery of C-19 and routine vaccines;
- MERNARO is conducting multi-country analysis on gender and demand barriers for zero dose children (Sudan, Syria, Yemen, Egypt and Djibouti);
- Ongoing support on development of Gavi EAF applications (Sudan, Syria)

Mid-term priorities (2023 – 2025)

- National immunization strategies focusing on zero dose children
- Using technology for improved performance monitoring, surveillance and use of data for action
- **Introduction of new and underused vaccines**
 - **Over 8 million children in EMR do not have access to PCV and Rotavirus vaccine**
 - **Over 90% adolescent girls in EMR do not have access to HPV**
 - **Over two-third children in EMR do not receive any booster dose for diphtheria**
- Life course immunization integrated in to PHC
- Improved country capacity for evidence-based decision making by strengthening NITAGs
- Strengthen technical support for countries for Gavi-eligible countries and MICs
- Continuity of essential polio functions and best use of polio assets in polio transition countries
 - >90% zero dose children in polio endemic and polio transition countries
- Implementation of strategies for VPD eradication, elimination and control
- Partnership and collaboration with other partners and programmes and through the RWG

Key areas of iSC strategic interventions for four GAVI eligible countries : 2022-23

- Implement EVM Initiative 2.0 , cIP development, cIP implementation tracking
- Cold Chain Management Information System, Vaccine stock management and visibility, and an online EPI-SC dashboard by Q3- 2023
- Vaccine cold chain Temp monitoring at all levels of SC
- Regional Vaccine and Cold chain Management Capacity building (Q3 2023)
- Institution building for Supply chain capacity building by Q4 2023 (Regional)
- Regional forum for review of EPI-SC activities by Q2 2023

Challenges

- About two-third population in the region live in countries in FCV settings suffering from natural or man-made humanitarian crisis
- Outdated/absent national statistics – no consensus on denominator, coverage in most of the priority countries
- **Unpredictable immunization financing in some middle-income countries due to economic constraint/sanction**
- **Most of the middle-income countries have not introduced new vaccines (Rota, PCV, HPV and Hib)**
- Gav-eligible countries not able to meet the co-financing obligation and some are unable to fund traditional vaccines
- Weak health system – migration of experienced, skilled health workforce, broken service delivery infrastructure, weak governance
- Political instability – mistrust, opposing de-facto authorities, disruption in essential fund flow, commitment
- Competing priorities – other VPD outbreaks (polio, measles, diphtheria, cholera etc.)
- No TA and ops support for MICs



Photos collected from internet

Summary

- Our priorities
 - Reaching zero dose children using better data
 - Access to new vaccines – HPV is the priority
- Our opportunities
 - Using technology
 - Polio transition
- Our challenges
 - Weak health system
 - FCV situation
 - Resource constraint for MICs and domestic fund for traditional vaccines



QUESTIONS & DISCUSSION

MENA Regional VPPEF
19 & 20 October 2022
Amman, Jordan





Government partner updates

** Please note that country posters are saved in separate file*

MENA Regional VPPEF
19 & 20 October 2022
Amman, Jordan

MENA Regional VPPEF
19 & 20 October 2022
Amman, Jordan

Update on the current state of global vaccine supply: HPV, PCV and Rota

Oluwaseun (Seun) Ayanniyi
Contracts Specialist
UNICEF Supply Division



Human Papilloma Virus (HPV) Vaccine Market Update



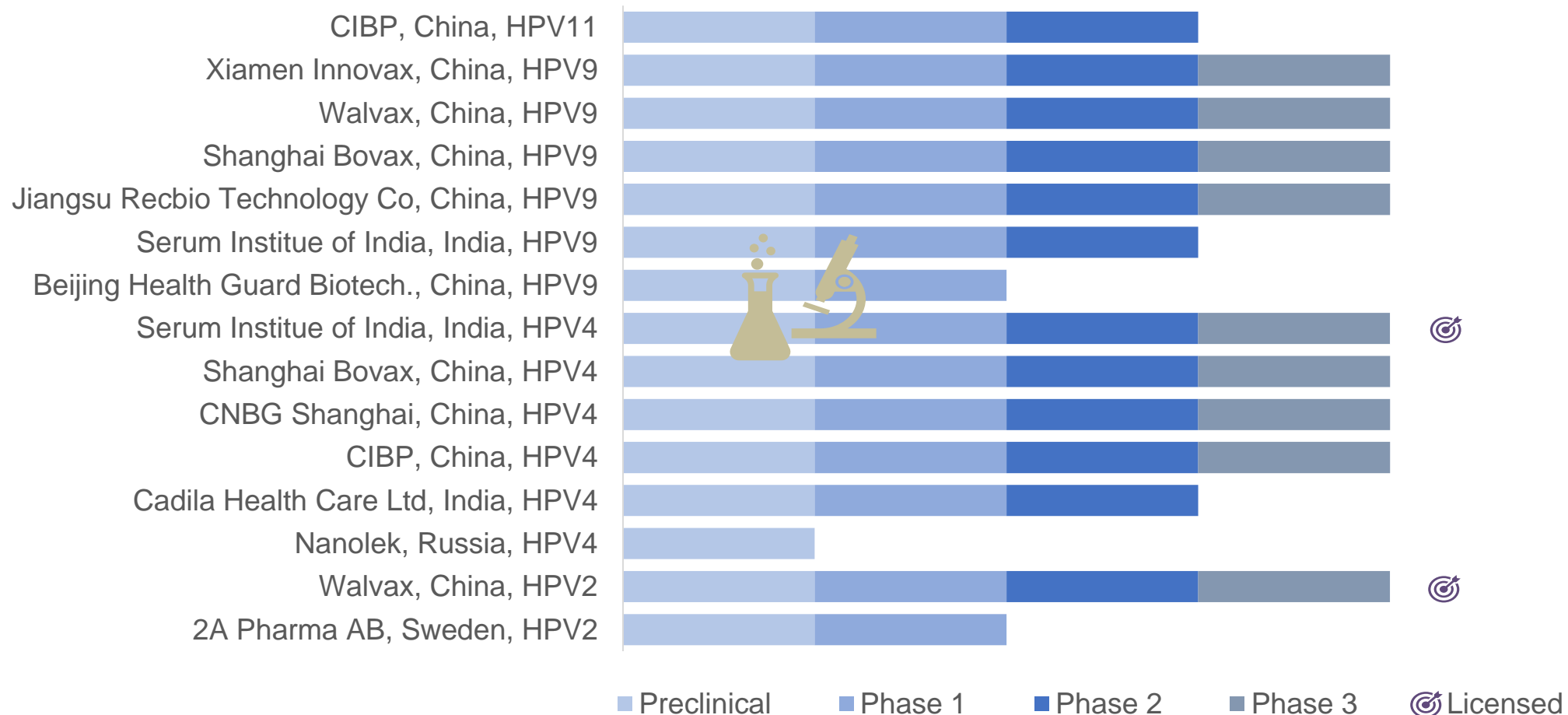
WHO Prequalified Vaccines



Manufacturer	Type	WHO PQ	Formulation	Vial	Shelf Life	VVM	Cold Chain Volume
GlaxoSmithKline (Belgium)	Bivalent	2009	Liquid	1 dose	60 months	Type 30	9.7 cm ³
		2009	Liquid	2 dose	60 months	Type 30	4.8 cm ³
Merck, Sharpe & Dohme (USA)	Tetravalent	2009	Liquid	1 dose	36 months	Type 30	15.0 cm ³
	Nonavalent	2018	Liquid	1 dose	36 months	Type 30	15.1 cm ³
Xiamen Innovax (China)	Bivalent	2021	Liquid	1 dose	36 months	Type 14	14.29 cm ³

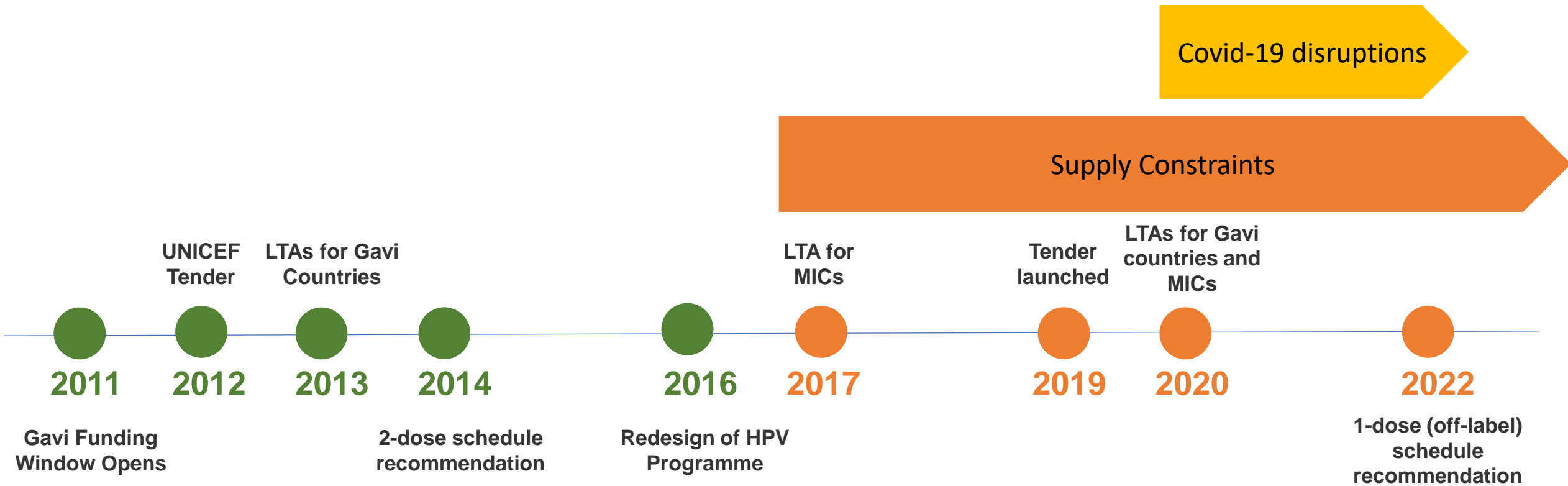
➤ GSK and MSD have prefilled syringe presentations (not WHO prequalified)

Pipeline Status Overview*

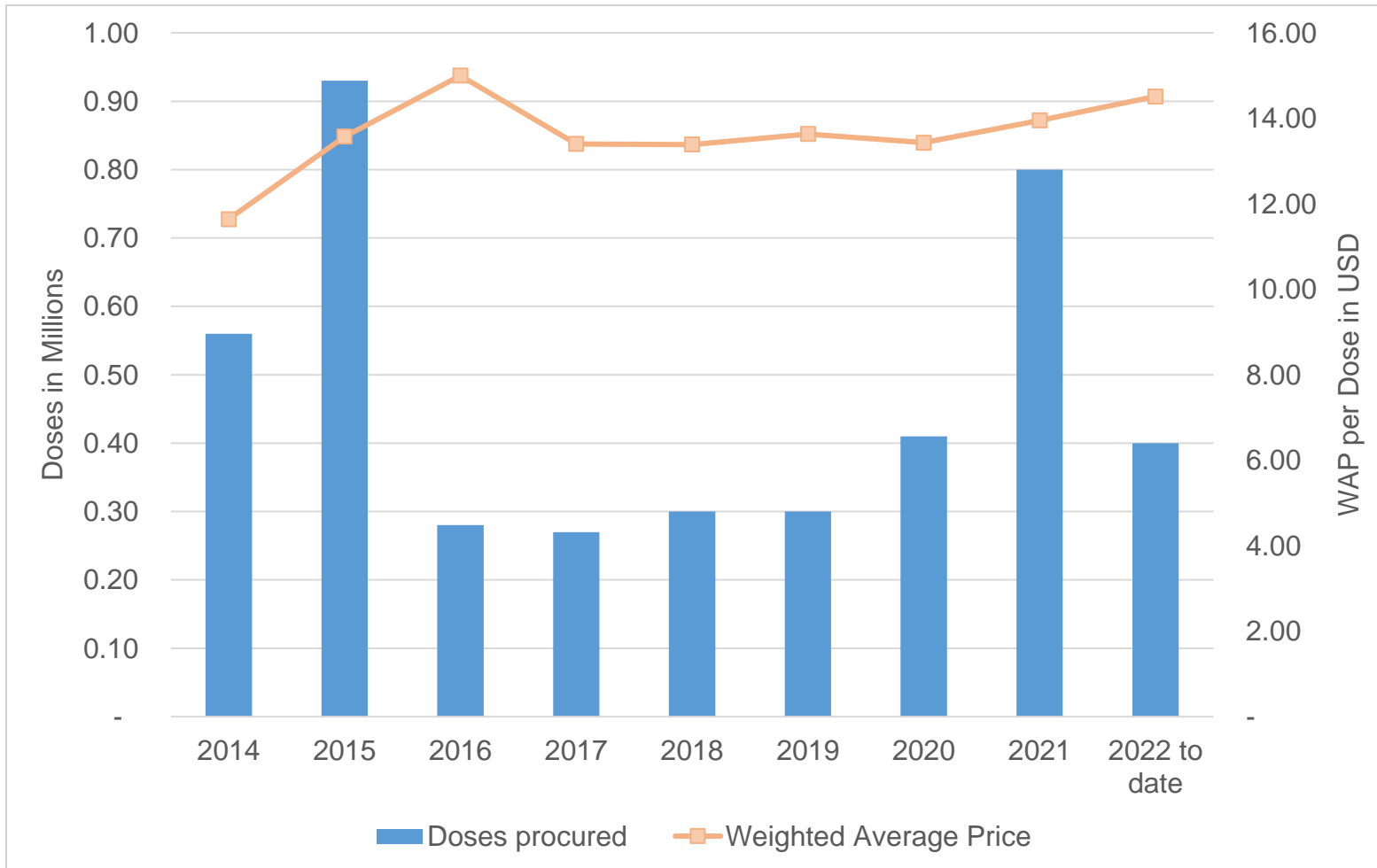


*non-exhaustive list

Market Evolution



MICs Historical Procurement and Supply Outlook



Global supply is improving and anticipated to meet demand depending on product preference.

UNICEF LTAs for MICs

- Merck
- GSK
- LTA with Xiamen Innovax to be established when demand materializes.

Tiered pricing based on manufacturers' pricing policies. Price ranges from \$10.25 to \$26.75 per dose.

Pneumococcal Conjugate Vaccine Market Update



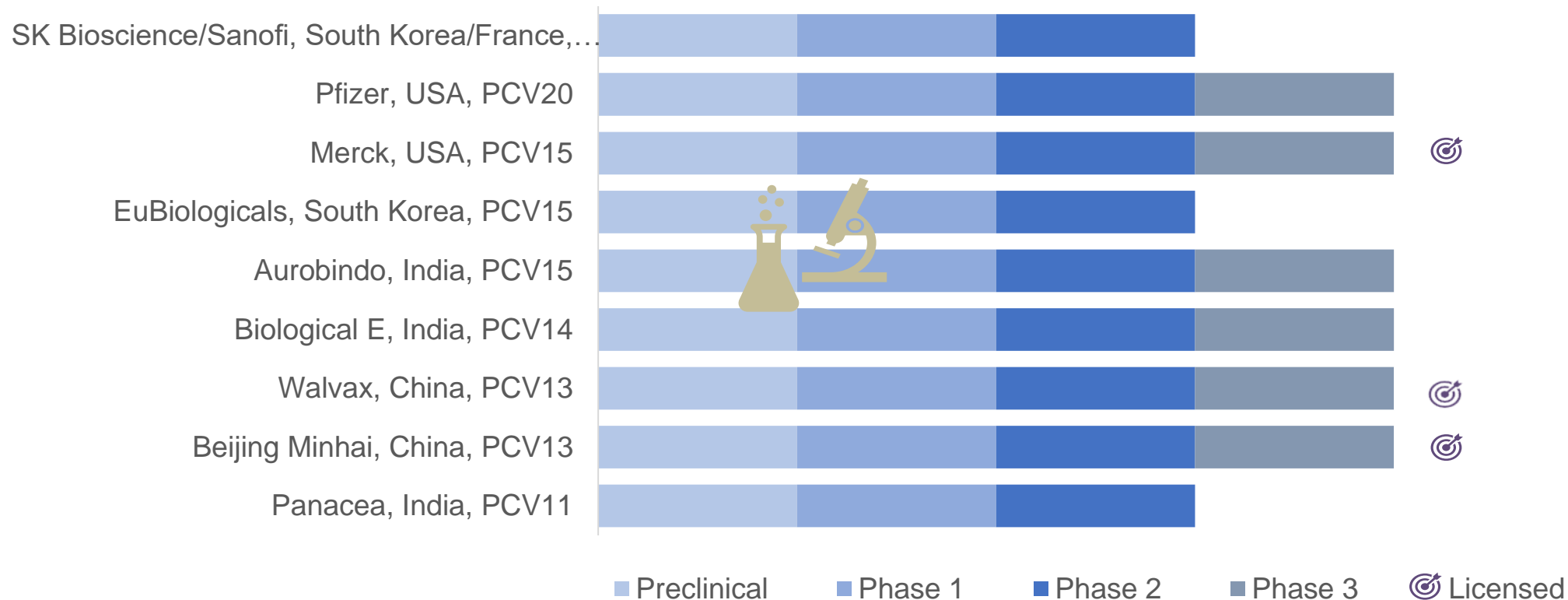
WHO Prequalified Vaccines



Manufacturer	Vaccine Type	Doses / Course	WHO PQ	Presentation	Form.	Shelf life	VVM	Cold Chain Vol / Dose	Storage
GSK (Belgium)	PCV10	3	2009	1-dose vial	Liquid	48 months	30	11.50 cm ³	2-8°C
		3	2010	2-dose vial	Liquid	48 months	30	4.80 cm ³	2-8°C
		3	2017	4-dose vial	Liquid	36 months	30	2.40 cm ³	2-8°C
Pfizer (USA)	PCV13	3	2010	1-dose vial	Liquid	36 months	30	12.00 cm ³	2-8°C
		3	2016	4-dose vial	Liquid	36 months	30	3.50 cm ³	2-8°C
SII (India)	PCV10	3	2019	1-dose vial	Liquid	36 months	30	14.06 cm ³	2-8°C
	PCV10	3	2019	5-dose vial	Liquid	36 months	30	3.51 cm ³	2-8°C

- PCV10 vaccines from GSK and SII have a different serotype
 - GSK PCV10: type 4
 - SII PCV10: type 19A
- GSK PCV10 2-dose presentation was phased out in 2019.
- GSK and Pfizer have prefilled syringe presentations (not WHO prequalified)

Pipeline Status Overview*



Pfizer PCV20 is licensed for administration on adults.

*non-exhaustive list

PCV MICs Market Evolution



2012

- The first MIC's tender issued in 2012 did not yield expected results
- The challenges highlighted by industry included low visibility on long term demand amongst other market complexities

2013-2017

- Following this, ad hoc tenders were done to fulfil country specific PCV supply for MICs on annual basis without long term demand and budget commitments
- UNICEF has been working with MICs to develop long-term demand commitments

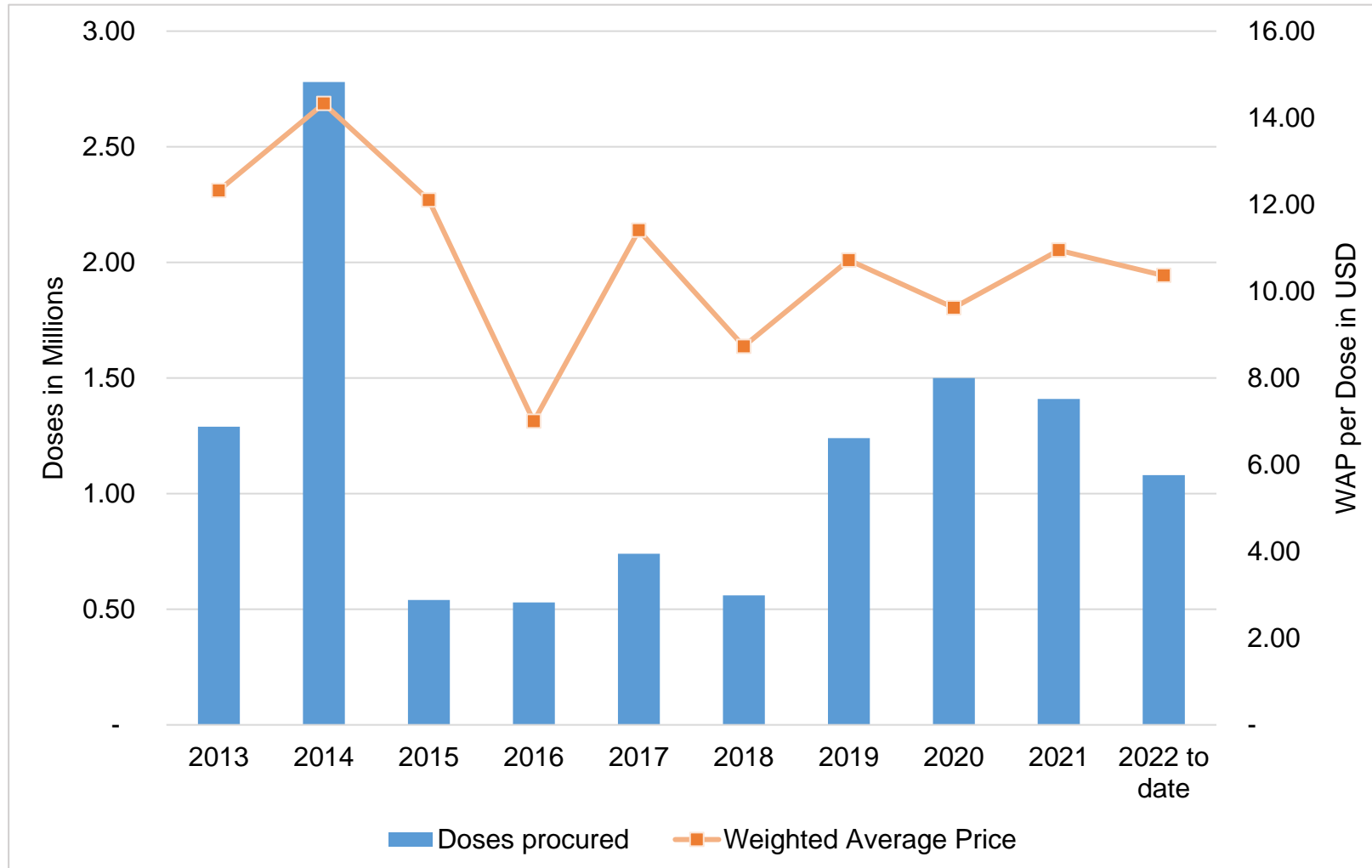
2018

- UNICEF considered several contractual modalities with flexibility to improve and unlock affordable PCV access in MICs.
- The key components included Tiered pricing, Volume commitments, Multi-year demand quantification and Financial backing

2019 to date

- For MICs that had already introduced PCV prior to 2019, UNICEF has established LTA's.
- Contractual frameworks and new financing mechanisms specifically developed for PCV-naïve MICs to facilitate introduction

MICs Historical Procurement and Supply Outlook



Global supply is sufficient to meet demand.

UNICEF LTAs for MICs

- Pfizer
- SII

Tiered pricing based on manufacturers' pricing policies. Price ranges from \$2.90 to \$25.00 per dose.

Rotavirus (RV) Market Update



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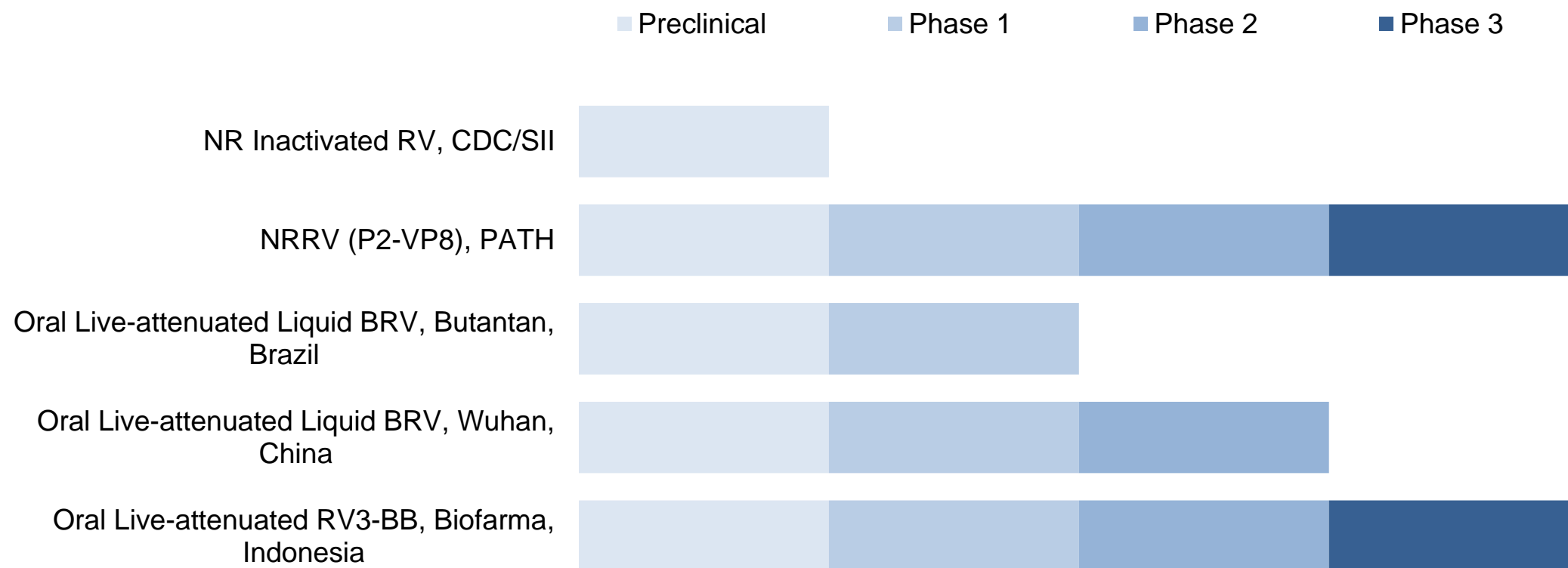
WHO Prequalified Vaccines



Manufacturer	Doses/ Course	WHO PQ	Presentation	Formulation	Shelf life	VVM	Cold Chain Vol / Course	Storage
Bharat Biotech (India)	3	2018	5-dose vial	Liquid-frozen	60 months	2	12.6 cm ³	-20°C
	3	2018	10-dose vial	Liquid-frozen	60 months	2	9.6 cm ³	-20°C
	3	2021	5-dose vial	Liquid	60 months	7	12.6 cm ³	2-8°C
	3	2021	1-dose vial	Liquid	60 months	7	48.0 cm ³	2-8°C
GlaxoSmithKline (Belgium)	2	2009	1-dose tube	Liquid	24 months	7	34.2 cm ³	2-8°C
	2	2009	1-dose applicator	Liquid	24 months	n/a	170.6 cm ³	2-8°C
	2	2019	5 x 1-dose tubes*	Liquid	24 months	7	23.6cm ³	2-8°C
Merck, Sharpe & Dohme (USA)	3	2008	1-dose tube	Liquid	24 months	n/a	138.9 cm ³	2-8°C
Serum Institute of India	3	2018	1-dose vial	Lyophilised	30-months	30	52.71 cm ³	2-8°C
	3	2018	2-dose vial	Lyophilised	30-months	30	31.62 cm ³	2-8°C
	3	2021	1-dose vial	Liquid	24-months	7	60.2 cm ³	2-8°C
	3	2021	2-dose vial	Liquid	24-months	7	42.90cm ³	2-8°C
	3	2000	1-dose vial	Lyophilised	30 months	250+	52.71 cm ³	<25 °C
	3	2000	2-dose vial	Lyophilised	30 months	250+	31.62 cm ³	<25 °C

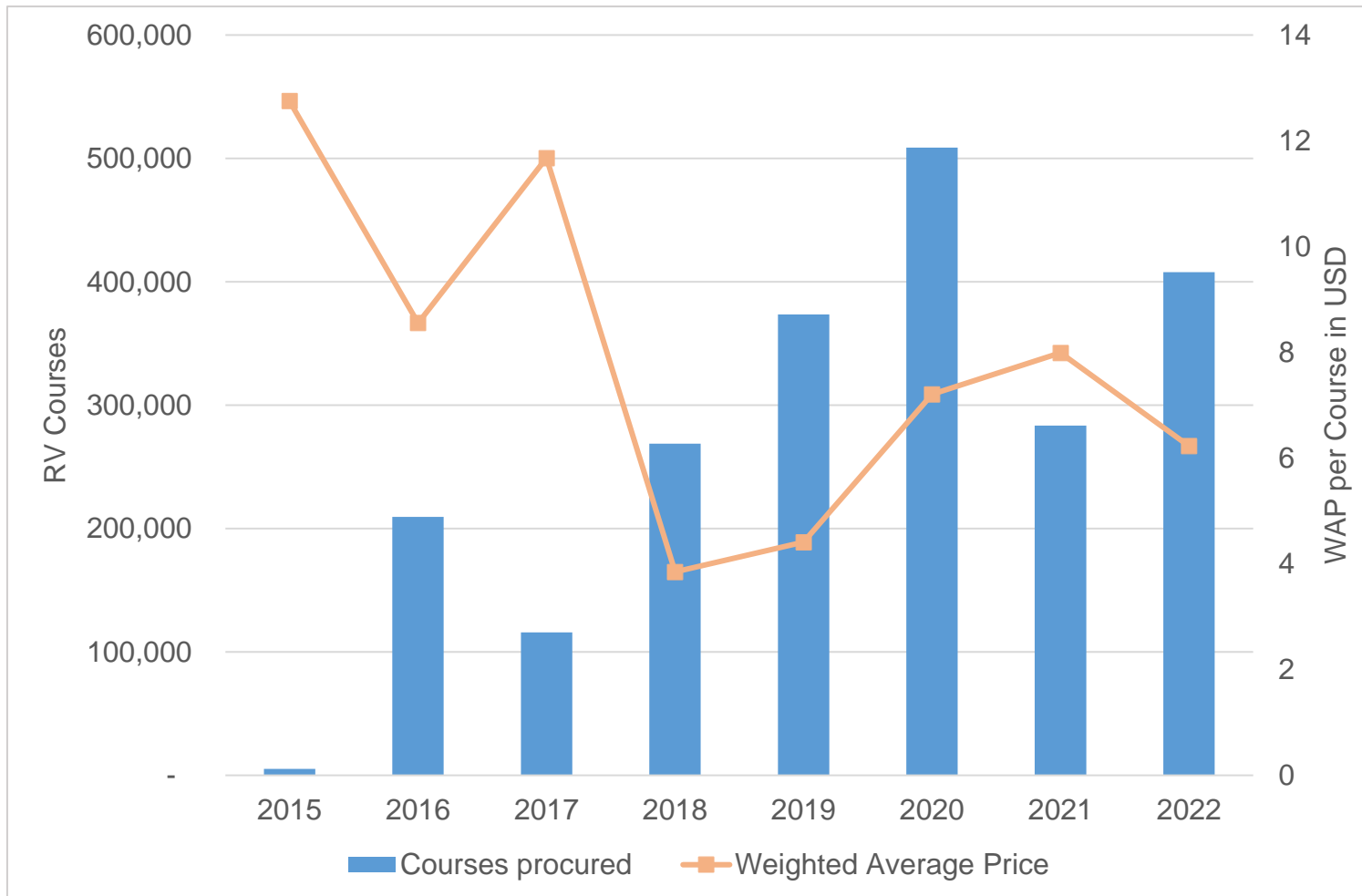
Note *: GSK's blow-fill seal presentation

Pipeline Status Overview*



*non-exhaustive list

MICs Historical Procurement and Supply Outlook



Ongoing supply disruptions due to reduced efficiency and disruptions in production lines.

UNICEF LTAs for MICs

- BBIL
- GSK
- SII
- Tender in process for UMICs

Tiered pricing based on manufacturers' pricing policies. Pricing is also dependent on presentation type and number of doses per course. Price ranges from **\$2.40 to \$18.00 per course**.

SII is committed to **price parity** for countries procuring through UNICEF

Conclusion



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UNICEF's MICs Procurement Strategy



Objectives

Secure **uninterrupted supply** to meet routine demand and enable introductions in MICs

Achieve lower prices that are **affordable** to MICs and increase transparency of prices secured for MICs

Gain information and enable entry of pipeline manufacturers to contribute to the creation of a **healthy market with multiple suppliers**.

Focus Countries

MICs that have not yet adopted new vaccines (HPV, PCV and Rota) in their routine immunization programs and will either self-procure or procure through UNICEF.

MICs that have introduced new vaccines and are procuring the vaccine through UNICEF.

Self-procuring MICs that have introduced new vaccines but have sought UNICEF's support due to concerns regarding the sustainability of their programmes.

Challenges & Steps Forward



Issues and Challenges

- Demand
 - Limited visibility: no long-term forecasts
 - Pooling demand
 - Materialization of demand
- Decision making
- Limited competition

Steps Forward

- Demand generation and pooling
- Multi-year commitments from countries
- MICs Financing Facility

Request to Countries



Country	Income Category (2021)	HPV	PCV	Rota
Algeria	LMIC		✓	
Djibouti	LMIC		✓	✓
Egypt	LMIC			
Iraq	UMIC		✓	✓
Islamic Republic of Iran	LMIC			
Jordan	UMIC			✓
Lebanon	LMIC		✓	✓ (Dec)
Libya	UMIC	✓	✓	✓
Morocco	LMIC	✓	✓	✓
State of Palestine	LMIC		✓	✓
Sudan	LIC		✓	✓
Syrian Arab Republic	LIC			
Tunisia	LMIC		✓	

Decision making for introduction of HPV, PCV and Rota (NITAG recommendations) including product preference.

Target population (HPV – routine/MAC) and demand forecast.

Funding mechanism

Planning/budgeting: ability for country to support multi-year commitments and identify the country's budget cycle.

Procurement modality: UNICEF, self-procurement or other modalities.

Planned introduction date.

Barriers to decision making or concerns for sustainability of existing programmes

Resources



UNICEF Market Notes: <https://www.unicef.org/supply/market-notes-and-updates>

UNICEF Vaccine Pricing Data: <https://www.unicef.org/supply/vaccines-pricing-data>

WHO Global Vaccine Market Studies: <https://www.who.int/teams/immunization-vaccines-and-biologicals/vaccine-access/mi4a/mi4a-market-studies>

QUESTIONS & DISCUSSION

MENA Regional VPPEF
19 & 20 October 2022
Amman, Jordan



MENA Regional VPPEF
19 & 20 October 2022
Amman, Jordan

Leveraging Market Intelligence

Oluwaseun Ayanniyi
Contracts Specialist
UNICEF Supply Division



What is market intelligence?



Market intelligence (MI) is *information about customer demand, competitors' products, etc. in a particular market that a company uses to help it decide what products to sell, what prices to charge, etc.*

- Cambridge Dictionary, 2022

MI for **vaccine procurement** focuses on understanding and analysing **vaccine supply (including product preference)** that is either already existing or under development, **market dynamics**, **global demand perspectives**, as well as specific **country demand**.

MI supports the procurement team in making more **informed**, **optimal** decisions

MI informs overall **procurement** planning

MI supports the overall **financial planning** (ie pricing mechanisms, costs, etc)

MI can be leveraged to access (potentially) **alternative sources**

Market intelligence is not a static exercise, and it should be reviewed and adjusted on a regular basis!



Key outcomes from leveraging market intelligence

Market intelligence greatly enhances the ability of the country to make **strategic, effective** procurement decisions across multiple areas.

Market intelligence informs the following decisions:

- Product selection
- Procurement mechanisms or channels
- Tendering and contracting
- Regulatory harmonization
- Financing and budgeting



Market intelligence & new vaccine introductions

How can market intelligence support new vaccine introductions?



Country demand

Understanding the specific country demand, within the larger global context, are key aspects.



Vaccine pricing

Market intelligence can provide an overview/update on the funding needs for certain vaccines (in some cases).



Vaccine availability

Understanding which vaccines are on the market (new vaccines, changes/improvements, innovations, a new WHO recommendation), including comparing different available products, presentations, etc.



Supplier engagement

Provides information on suppliers (e.g. flexibility for contractual obligations, regional presence, etc), allowing countries to get the right info on the right supplier (when there are options).

MARKET NOTES



Market Notes published in 2020-2022

- Malaria Vaccine (Q&A update) **AUG 2022**
- Rotavirus Vaccine **JAN 2022**
- Japanese Encephalitis **NOV 2021**
- Human Papillomavirus Vaccine **OCT 2020**
- COVID-19 Vaccine (Market landscape) **AUG 2020**
- Pneumococcal conjugate Vaccine **JULY 2020**

Upcoming Market Notes to be published

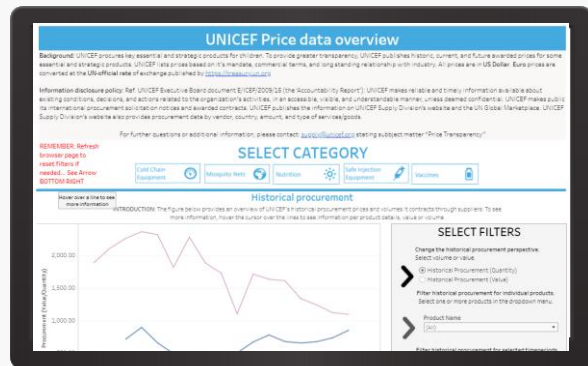
- Bivalent Oral Polio Vaccine
- DTP- containing vaccines
- Ebola Vaccine
- Inactivated Polio Vaccine
- Measles Containing Vaccines
- Oral Cholera Vaccine - *planned*
- Tetanus-Diphtheria vaccine
- Typhoid Conjugate Vaccine
- Yellow Fever Vaccine - *planned*

Available on
[www.unicef.org/supply/
market-notes-and-
updates](http://www.unicef.org/supply/market-notes-and-updates)



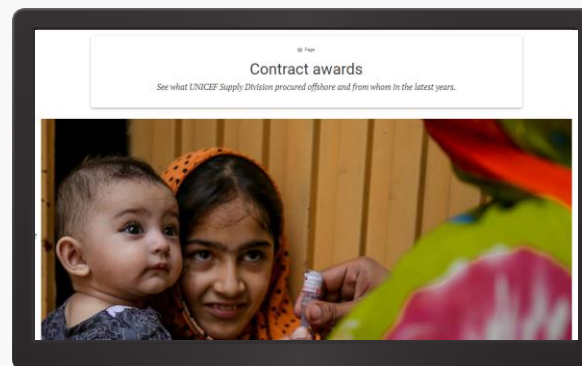
Useful resources

on unicef.org/supply



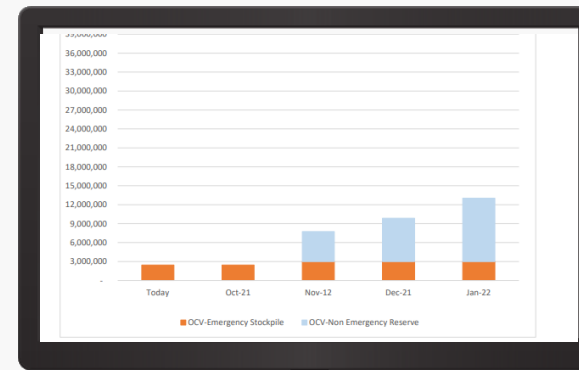
Vaccine Pricing data

[link](#)



Monthly publication of contracts awards

[link](#)



Emergency stockpile availability (OCV/ Meningococcal / YFV / Ebola)

[link](#)

Gavi product Menu

[link](#)

QUESTIONS & DISCUSSION

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19 & 20 October 2022
Amman, Jordan



Marketing Intelligence in Procurement

VPPEF 19-20 October 2022
Amman, Jordan



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2030

EGYPT VISION

Egypt team:

1. Dr. Nevine Douse
2. Dr. Sara Abdel Wahed
3. Dr. Eman Nadeem
4. Dr. Christine Safwat



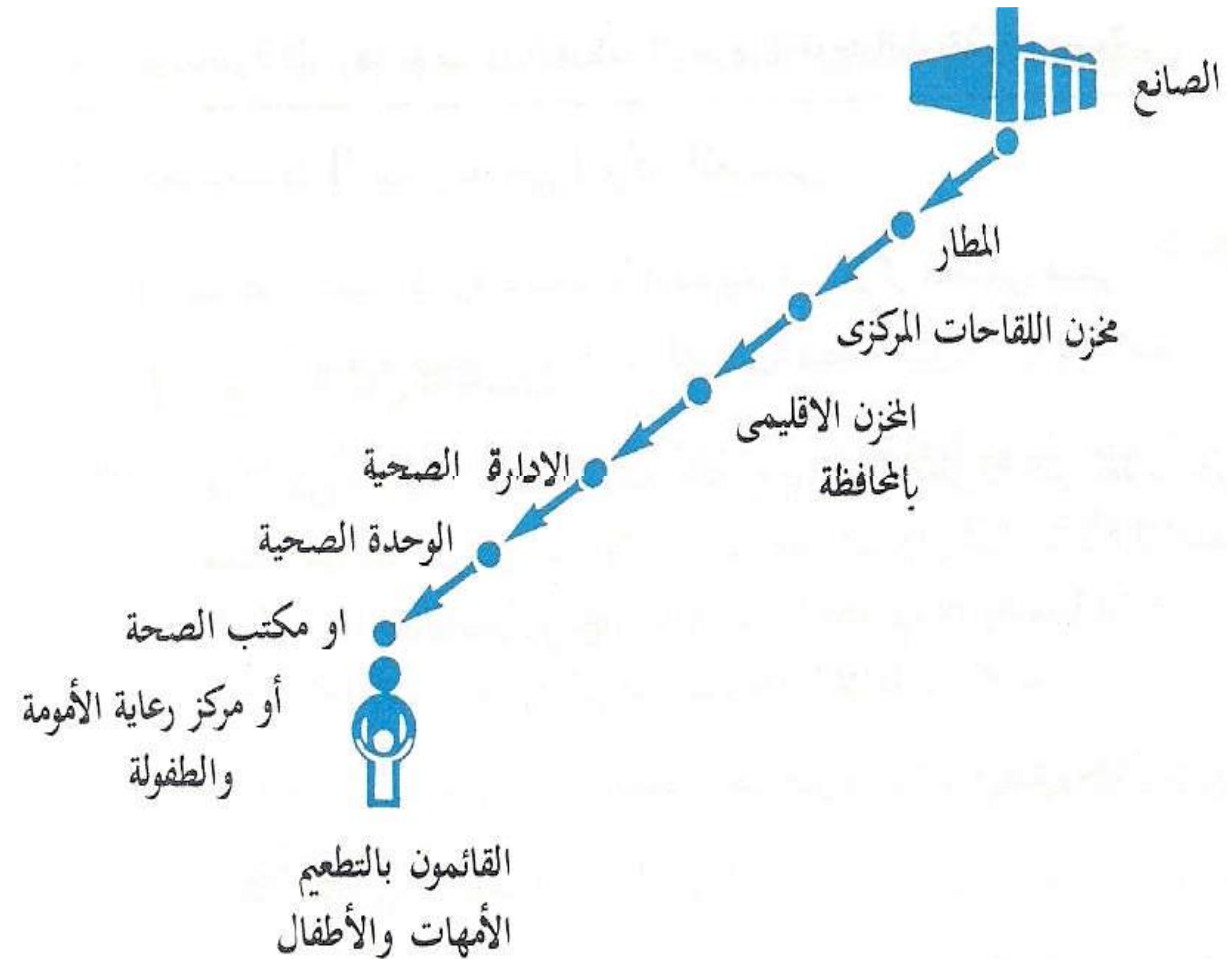
Vaccine Procurement Process

1- Forecasting :

Three stakeholders involved:

- Ministry of Health and Population preventive sector Calculate the vaccine's amounts that the governorates demand
- The UPA (Unified Procurement Authority) is to be informed to initiate procurement operation
- Ministry of Finance approves dedicated budget.

Vaccine importation and logistics chain



VACCINE DISTRIBUTION PROCESS

The national immunization supply chain system consists of the following four levels:

1. The primary (national) level store where the vaccine is received directly from the vaccine manufacturer or an international supplier. Typically, the vaccine is stored in large cold rooms and freezer rooms (vacsera central store – Helwan Central store).

2. The sub-national; 27 Governorates level where the vaccine is received from the primary store, stored for an agreed period, and then distributed to lower levels stores or to health facilities. These stores have a cold room and several vaccine refrigerators and freezers.

3. The lowest delivery level store; 286 districts where the vaccine is received, either from the primary store or from a sub-national store. From this point, it is distributed directly to service delivery points.

Vaccine procurement Decision-making

- MOHP National higher committee first approve new vaccine introduction according to Surveillance data insights.
- EPI/ Vaccine Management Unit define quantities and specifications needed.
- Needs and specifications are reassessed by HTA department at UPA.
- Market and cost effectiveness assessment is performed taking into consideration MOHP needs , dedicated budget and economic factors.
- Once final decision is made to introduce new vaccines and granted final financial approval.
- Vaccine sourcing is done through public bidding, tender or direct order purchase.
- Awarded company is informed and legal agreement specifying delivery scheduling time and other agreed terms.

Vaccine Decision-making Process

Key Technical requirements for the new vaccine procurement:

- Registered to be marketed in Egypt .
- WHO – Prequalified .
- Stringent Regulatory Authorities newly approved vaccine.
- Emergency Use Approved Vaccine .

Challenges.

1-Global Challenges:

- The global crisis of supply chain with delayed shipment and clearance

2-National Challenges:

- Establish precise quantified demand.
- The urgent need to increase the needed quantities after a contract is agreed.
- Limited sources of Vaccine that decrease the power of Negotiation.

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Thank you





PALESTINE

PMD/MOH

DR DIAA HJAIJA

19-20/2022

Marketing intelligence

- ❑ Is the external data collected by a company about a specific market which it wishes to enter, to make decisions. It is the first set of data which the company analyses before making any investment decision.
- ❑ Vaccine Procurement MI based on manual research's such as UNICEF web , Google searches, other labor intensive effort and data collected form different sources then analysis for action or decision making to introduce new vaccine

Introduction of new vaccine in Palestine

- Data collection
- Data analysis
- Disease burden (morbidity and mortality)
- Cost benefit of vaccine introduction
- Palestine follow the update of vaccine, cold chain equipment and drugs manufactures (Country and Agency) .
- Qualified by WHO or not
- Vaccine presentation,
- Storage Temperature
- Cold chain capacity requirement of new vaccine

Conti.....

- Cold chain capacity present
- Cost price
- A viability of fund
- A viability at UNICEF marketing
- Safety data of vaccine use
- EPI + NITAG recommendation
- Decision making
- Request of vaccine from (UNICEF)
- Integration of vaccine in EPI
- Training of HW
- Monitor and evaluation

Country Experience

Vaccine intelligence in Palestine

- Working with UNICEF & WHO to introduce vaccine stock management software this include:
 - ✓ Provide all health facility with computer
 - ✓ Connect at health facility with internet network
 - ✓ Piloting the new software at district & central vaccine store level
 - ✓ Planning for training of health care provider about new software

Country Experience

➤ **Using UNICEF web:**

- ✓ Looking for new vaccine routine and non routine.
- ✓ Looking for Cold chain equipment
- ✓ Search for Drugs

Country Experience

➤ **PCV Vaccine**

- Introduce PCV 10 (Synflorix) IN 2009 funded by Restropovitch company as pilot in 2 small district THEN starting at national level in 2012 funded by Palestinian authority in 2012.
- PCV10(Synoflorix) 2 DOSE TO Pneumocil 5 dose vial presentation

➤ **Rota Vaccine**

- ✓ Introduce of Rota vaccine(Rotarix) in 2016 at national level
- ✓ Switch from Rotarix 1 dose to rotavac 5 dose vial presentation

Cont...Country Experience .

➤ **Shifting :**

✓ from DTP+HIB vaccine to Penta(DTP+H IB+Hep.B) in 2013

➤ **Multi data logger :**

- ❖ Distribution of 14multidata logger in 14 cold room in WB & Gaza connected with smart phone & E-mail , log tag at health facility level
- ❖ Excel sheet used to monitor vaccine stock & distribution.
- ❖ Monthly reporting of vaccine stock & wastage at health facility, district & vaccine store level.
- ❖ Using UNICEF forecasting software to predict the quantity needed for the coming year.

Challenges

- ✓ Financial crisis
- ✓ Identify the burdened of Disease due to lack of information
- ✓ Qualified by WHO .
- ✓ Maintenance of (vaccine, drugs and procurement)
- ✓ Clearance process .
- ✓ Registration of vaccine.

QUESTIONS & DISCUSSION

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Amman, Jordan



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Amman, Jordan

Vaccine Security: How to achieve this?

Krista Hund
Contracts Manager
UNICEF Supply Division





Vaccine Security: The three pillars

Vaccine Security



The sustained, uninterrupted supply of affordable vaccines of assured quality through available funding, accurate forecasting & appropriate contracting.

Available
Funding



A **vaccine security** approach should look to:

- Achieve **value for money** to access vaccines
- Achieve **affordability**, **availability** of products and **programmatic effectiveness**
- Ensure quality **forecasting** that includes the unique requirements of vaccines (e.g. biological products) within the **strategic vaccine procurement approach**
- Maintain **relationships** with suppliers

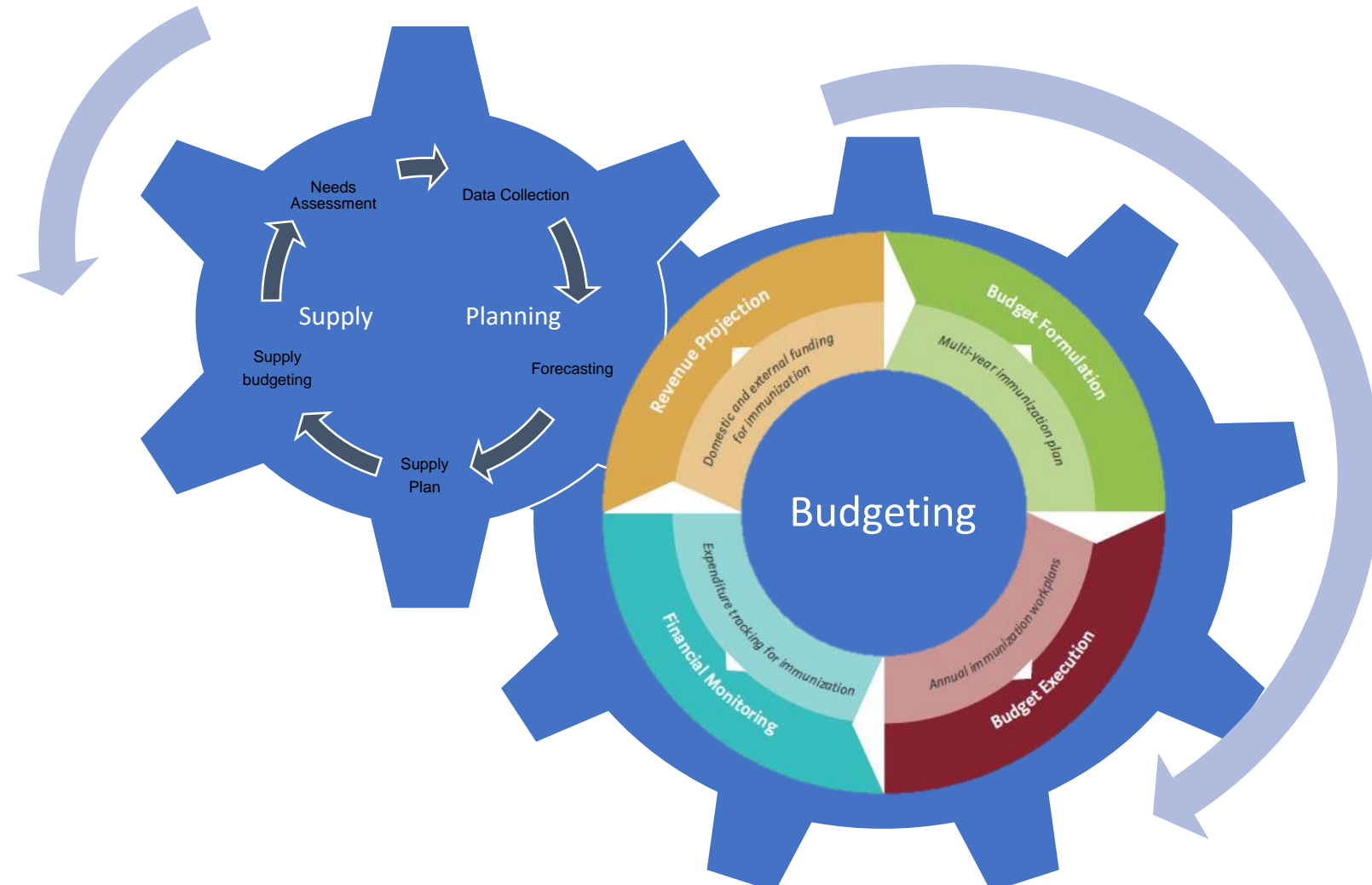
Accurate
Forecasting



Appropriate
Contracting



Supply planning and financing as a part of the broader budgeting process



Standalone supply planning can lead to fragmentation and budgeting problems.

It is therefore important to look at the processes holistically.



Forecasting & Planning: Why is it important?

The forecast process is an integrated part of Immunisation Programmes in country and an essential step for the effective vaccine management. Particularly important is having **long-term forecasts** (multi-year).

Forecasting is the **foundation** for all elements of **Vaccine Security**

- Basis for production at manufacturers
- Basis for funding needs

The **outcome of the forecast** is a key input for a number of processes:

- Aligning annual **country government budgeting and planning** for health sector
- Planning and implementation of **vaccine procurement and delivery activities** on timely manner in coordination with partners
- Accessing **vaccine markets** at affordable prices and securing the availability with industry
- A mechanism to foster on-going **information and knowledge sharing**
- Securing better **pricing and vaccine stock management**

Contracting: How contracting supports access to affordable vaccines



Strategy development

- **Product-specific procurement strategies**, based on analysis and experience
- Informed by **industry and partner consultations** and alignment of objectives
- For Gavi supported vaccines, **Gavi Roadmaps** are critical for procurement strategies

Tender process

- RFPs for strategic products – **flexibility for manufacturers** to shape the offer to highlight how they can bring best value
- Multi-year tender & award period – provides **planning horizon and more certainty** to manufacturers
- **Wide invitee-list**; all manufacturers are invited to participate (including pipeline)

Awards

- LTA – ‘**good faith**’ framework agreements:
 - Based on good will from **accurate forecasts**, but ‘treated’ as **contracts**
 - To achieve exceptional results, exceptional contracts have been awarded (e.g. firm or pre-paid contracts)
- Review with a **Procurement Reference Group** (GAVI-supported vaccines) or other confidential partner consultation (e.g. GPEI)
- **Multiple suppliers** awarded per product
- Pipeline assessed in award recommendation, and informs **award strategy** to incentivize continued **market development**

Vaccine Security Panel:
Morocco
Jordan
Iraq

MENA Regional VPPEF
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Amman, Jordan

UNICEF Procurement Strengthening Activities: VPPEF/N & eCourse

Krista Hund
Contracts Manager
UNICEF Supply Division





Procurement Strengthening Tools

CAPACITY DEVELOPMENT

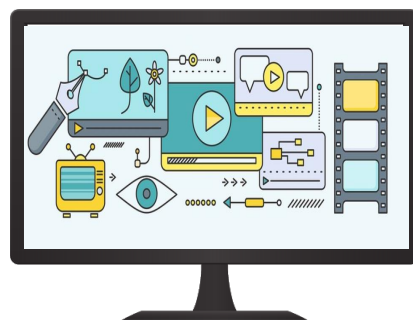
KNOWLEDGE EXCHANGE



Strategic Vaccine Procurement Assessment Toolbox

A standardized methodology for governments to assess their own national vaccine procurement processes

Available at [unicef.org](https://www.unicef.org/) | [UNICEF Supply Division](#)



Strategic Vaccine Procurement e-learning course

e-course to guide users on how to identify & understand the strategic vaccine procurement cycle & processes to ensure sustainable access to affordable vaccines.

Current status: Content with e-vendor for storyboard development



Vaccine Procurement Practitioners Exchange Forum (VPPEF)

Country buyers & Partners Exchange good practices & expertise

9 Forums held since 2015
2020 eVPPEF (online)

Increasing demand from members & partners



Vaccine Procurement Practitioners Network (VPPN)

Online platform
Exchange
>45 countries represented
Knowledge sharing/development - Monthly webinar/ e-discussions

eCourse: Strategic Vaccine Procurement



Collaborative Approach

Content developed with **multiple** partners:

- CHAI, DCVMN, Gates Foundation, Gavi, the Vaccine Alliance, Government partners (Canada, DFID, Estonia, Norway), IFPMA, MSF, PATH, UNICEF SD (CC, HRC, MSDEU, MSFC, VC), WHO

Partners consulted:

- PAHO
- USAID
- World Bank

5 -6 hours learning time

Collaborative approach
(Authors + peer
reviewer process)

7 Modules:
(1) Intro (2) VM (3) MI
(4) Regulatory (5) FP&B
(6) SVP (7) M&E

Estimated completion:
End Q4 2022



VPPN Overview

PURPOSE

To provide inputs and concrete recommendations that will guide on prioritizing efforts and resources as to achieve the goal of the VPPN *“to serve as a platform for continuous exchange of theoretical and practical knowledge, joint learning and collaborative problem solving related to vaccine procurement in MICs & Gavi Transitioning Countries.”*

Announcements



Key messages broadcasted to all members.

Timeline



VPPN's own Facebook page. All the latest postings on the network.

About us



Background information on the VPPN - its history, purpose, values, and partners.

Members



A very important page! Connect with other members – search, chat, email privately.

Discussions



This is a core knowledge sharing area for our community of practice. All previous VPPN Discussions are archived here.

Country Profiles



Information on VPPN country members, data & statistics, related discussions and relevant resources.

Library



All VPPN resources can be searched here (Note: only VPPN resources are available in this search, the TechNet-21 Library menu option is a separated search function.)

Themes



Content searchable by key themes/ topics.

Videos



Catalogue of video presentations, including the Zoom recordings of the 2020 Knowledge Sharing Sessions/ Webinars.

Events



VPPEFs, Workshops, events posted by members.

Albums



Catalogue of photos.

You are not already a member of the VPPN



Invitation

An invitation to join the VPPN (and TechNet) was sent to your email



Registration.

Your email is your username

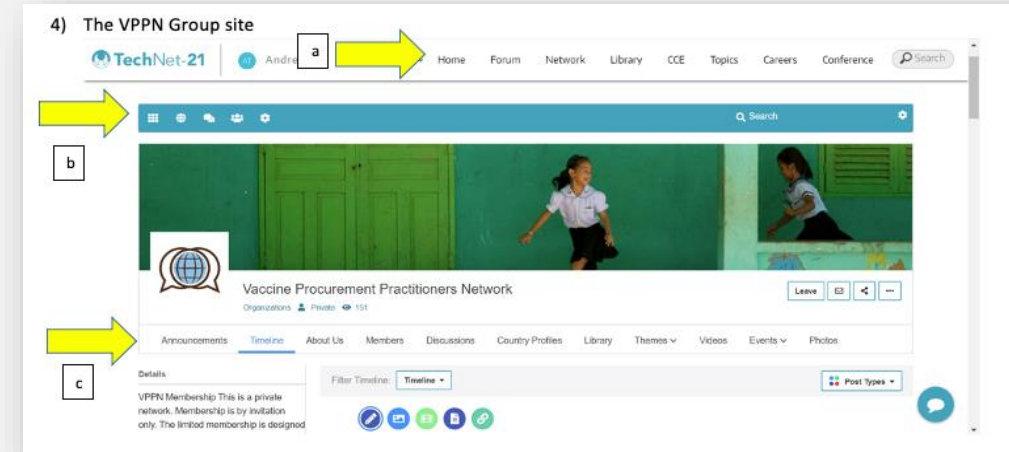
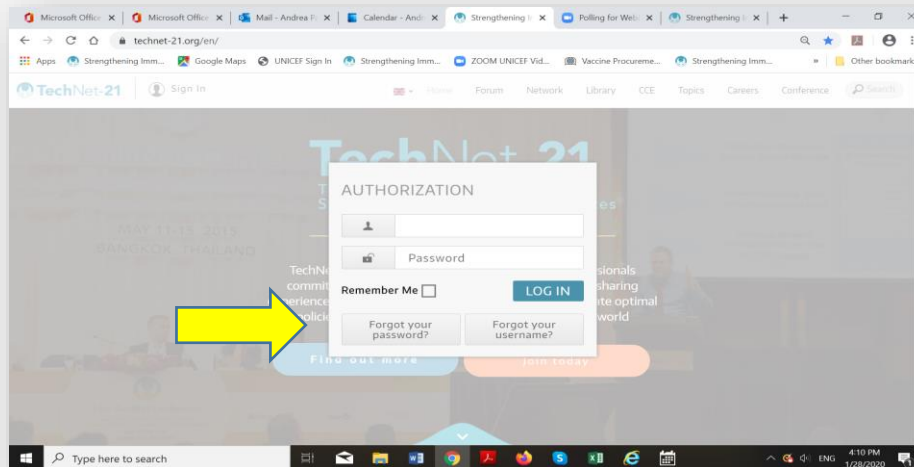
Retrieve credentials

Click on "Forgot your password" to create a new password



Instructions

Please be sure to review the instructions in the two Quick Sheets handouts that will be shared: "How to Register and Manage Alerts" and "How to use the VPPN"



NEXT STEPS & CLOSING

MENA Regional VPPEF
19 & 20 October 2022
Amman, Jordan



THANK YOU!

MERCI!

شكرا

