

Vaccine Investment Strategy

Stakeholder consultations Phase II

October 2013



Vaccine Investment Strategy (VIS)

The VIS enables the GAVI Alliance to shape its future vaccine portfolio through a detailed, evidence-based assessment of the potential impact of new vaccines on different disease areas.

Vaccines are assessed using key considerations such as deaths averted, epidemic potential, impact on the poorest and cost per life saved. The process takes place over two phases with analysis of a 'long list' in phase 1 which is then shortened to enable a 'deep dive' on a small number of vaccines in phase 2.

In June 2013, following the completion of phase 1, the GAVI Board requested further analysis on five vaccines: cholera, influenza for pregnant women, malaria, rabies vaccination (after an animal bite) and further support for yellow fever campaigns.

The GAVI Board will review the evidence gathered during the second phase of analysis to decide in November which new vaccines GAVI will support from 2014. GAVI's support for vaccines already in its portfolio remains unchanged.

VIS Phase I: consultations informed criteria for initial assessment of 15 vaccine options

Stakeholder consultation 1: November - December 2012

- *Objective:* seek guidance on criteria to help evaluate vaccine candidates in phase I of the VIS process
- *Target audience:* GAVI Alliance stakeholders
- *Method:* questionnaire

Stakeholder consultation 2: February - May 2013

- *Objective:* understand current public health and EPI priorities and the possible role of (new) vaccines to address these; and to understand delivery and system considerations
- *Target audience:* EPI managers and technical partners
- *Method:* questionnaire

A summary report of outcomes from consultations in phase I can be found here:

www.gavialliance.org/about/strategy/vaccine-investment-strategy



VIS Phase II: final VIS consultations sought detailed country views on five shortlisted vaccines

Stakeholder consultation: June – August 2013

- *Objective* : seek country views to inform assessments of five shortlisted vaccines (demand, implementation feasibility)
- *Target audience*: EPI managers and other ICC members in all GAVI eligible countries
- *Method*:
 - 1) In-depth interviews with representatives from selected countries using standardized interview guide
 - 2) Public online survey
 - Accessible on GAVI website for total of 6 weeks
 - Link sent to all GAVI countries
 - Further disseminated through different Alliance networks such as WHO, UNICEF, CSO constituency, disease expert groups, TechNet 21

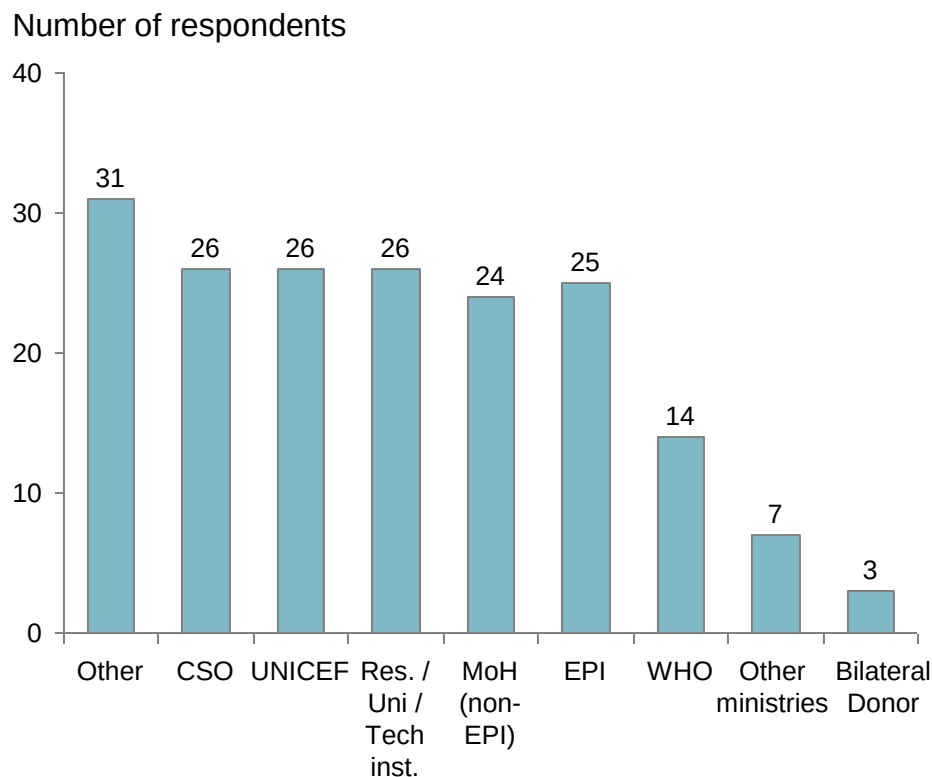
This slide deck summarises the findings from VIS Phase II consultations



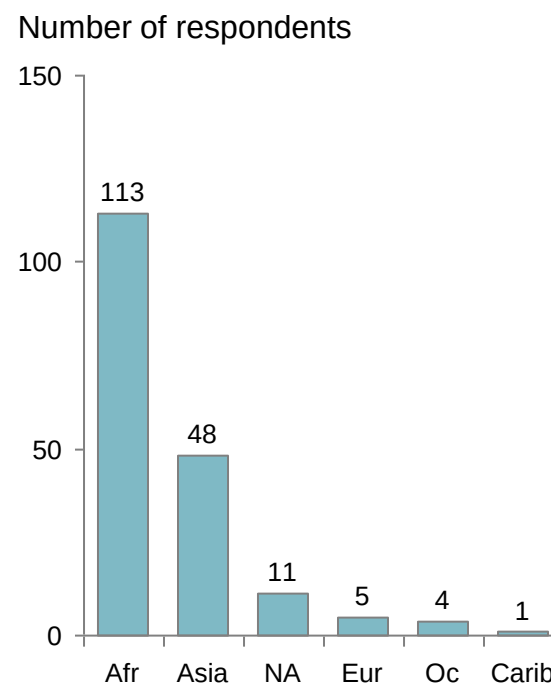
Overall response rate and ranking of vaccines

Survey captured broad cross-section of stakeholders within Africa and Asia (n=182)

Wide variety of stakeholders represented



Most respondents from Africa and Asia



Source: Results of 2013 GAVI country consultation survey, total responses = 182

Vaccine ranking for all 182 respondents

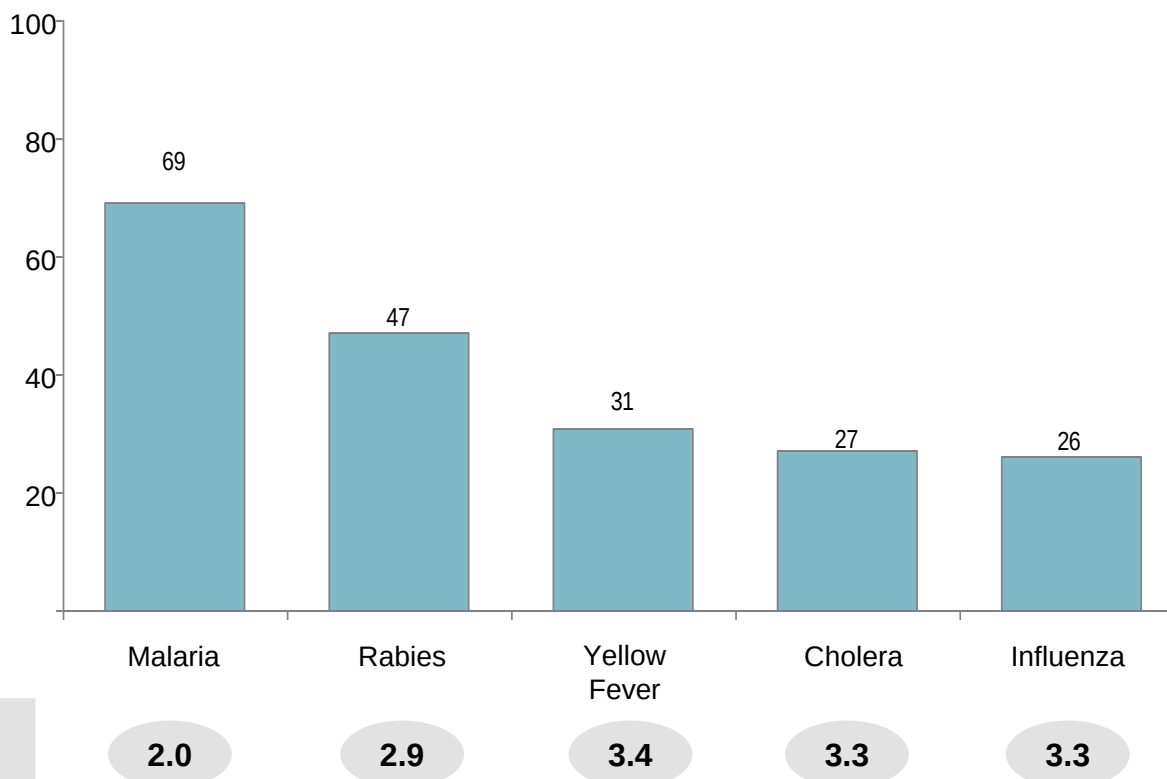
% of respondents ranking disease as priority 1 or 2



Source: Results of 2013 GAVI country consultation survey, total responses = 182
Question: Please rank all of the following vaccines in terms of prioritisation for future introduction in your country

Vaccine ranking for all MoH (EPI and non EPI) respondents

% of respondents ranking disease as priority 1 or 2

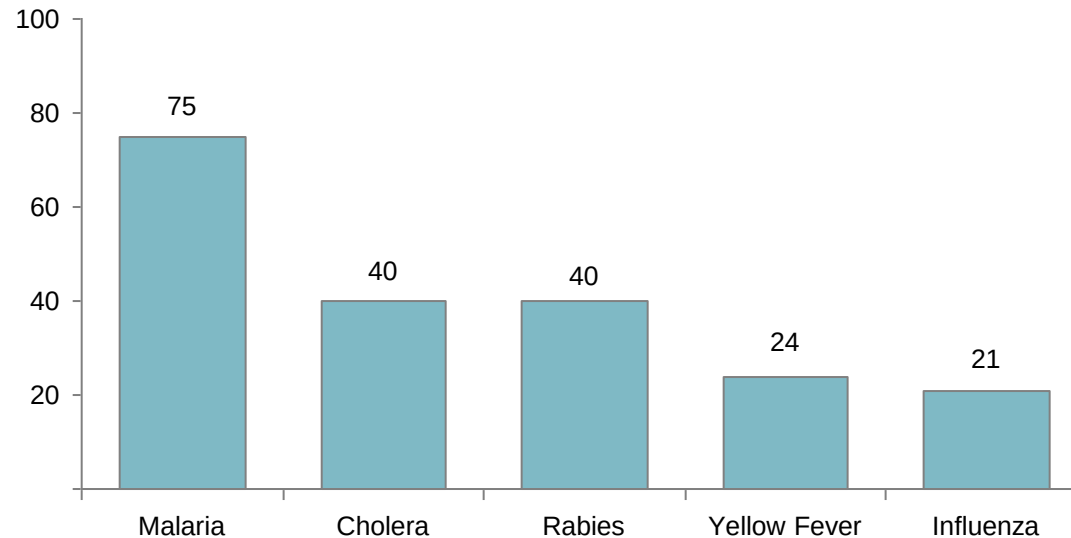


CHOLERA

Cholera is a fairly high priority for respondents from endemic countries

Survey respondents: cholera vaccine ranked as second highest priority for country introductions

% of respondents ranking disease as 1 or 2



Average
priority

1.9

2.8

3.1

3.8

3.4

Quotes from in-depth country interviews

"[Cholera] with political interest in [my country] and public demand, would likely introduce as early as possible"

"We have experience doing campaigns in the <15Y group (measles, rubella, and JE). There should be no issue"

"It would be wise to start strengthening surveillance in [my country] before introducing the vaccine, to be able to identify high risk areas and changing target populations"

Survey question: please rank all of the following vaccines in terms of prioritisation for future introduction in your country

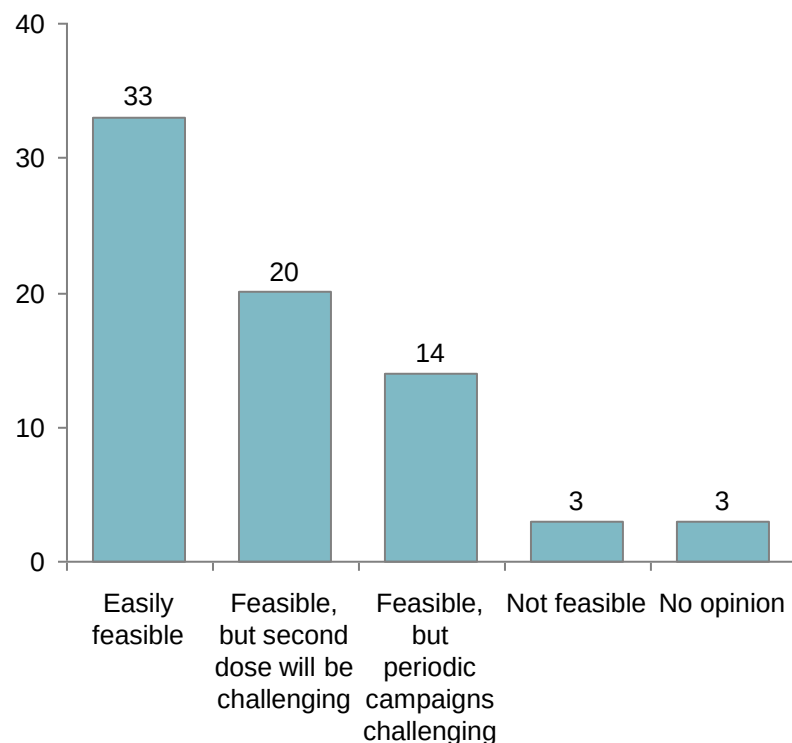
Note: survey focused on planned, preventive campaign scenario (not stockpile)

Source: 2013 GAVI country consultation survey, total responses = 182, 81 from countries in scope for GAVI support of cholera

Most respondents felt targeted, preventive cholera campaigns would be feasible

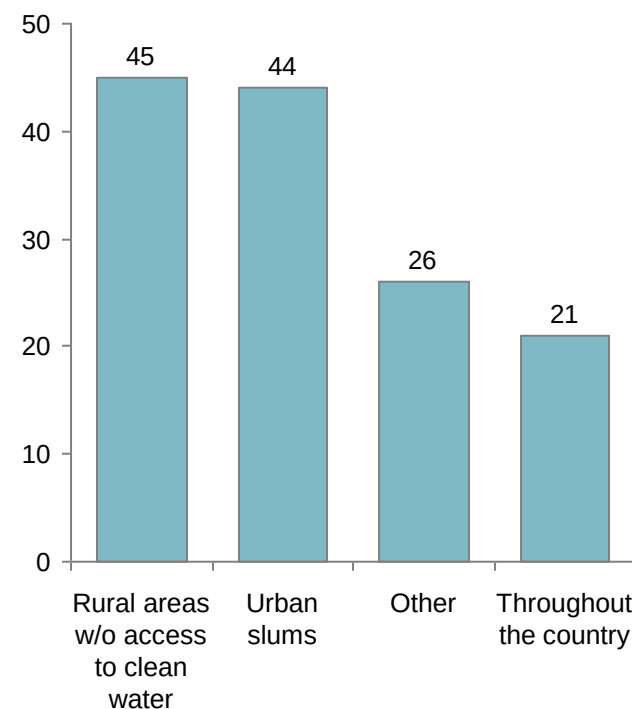
How feasible do you think the proposed periodic campaigns would be in your country?

of responses



Where would you implement cholera vaccine campaigns?

of responses

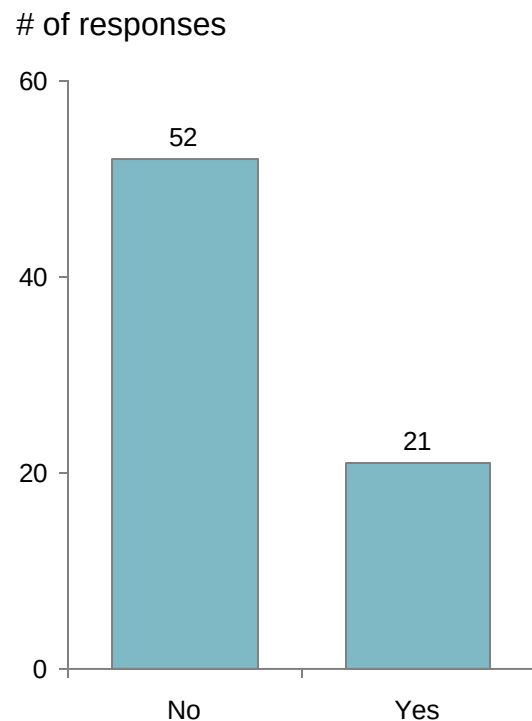


Source: 2013 GAVI Phase II country consultation survey, total n = 182

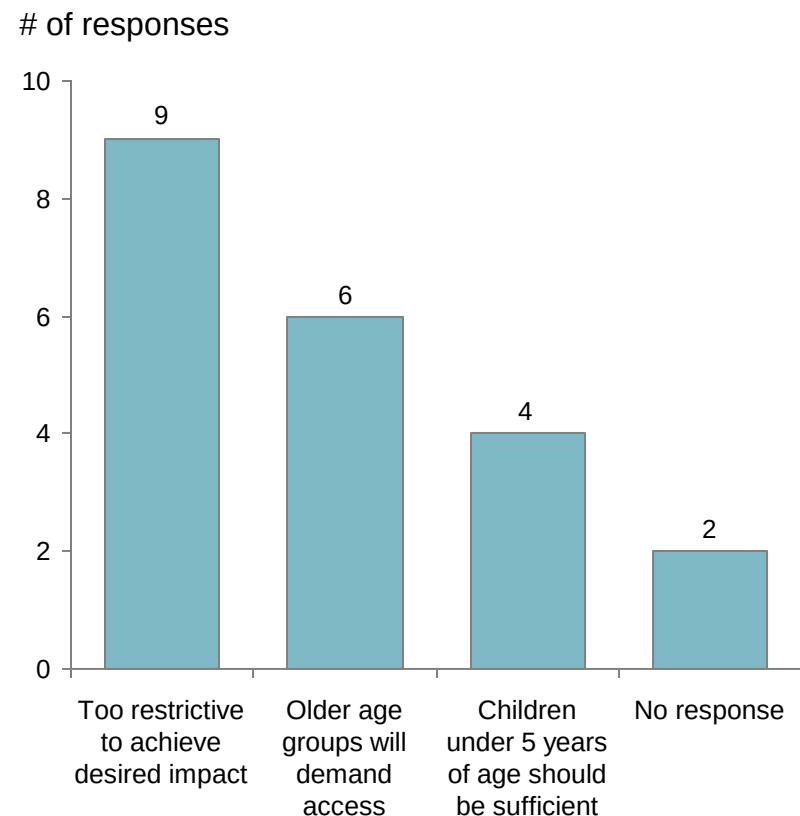
Note: cholera-specific questions asked only to respondents ranking cholera as a first or second priority for introduction

Most respondents not concerned about targeting 1-15Y though some prefer a broader age group

Would you have any concerns about targeting 1-15 years old?



If yes, specify why:



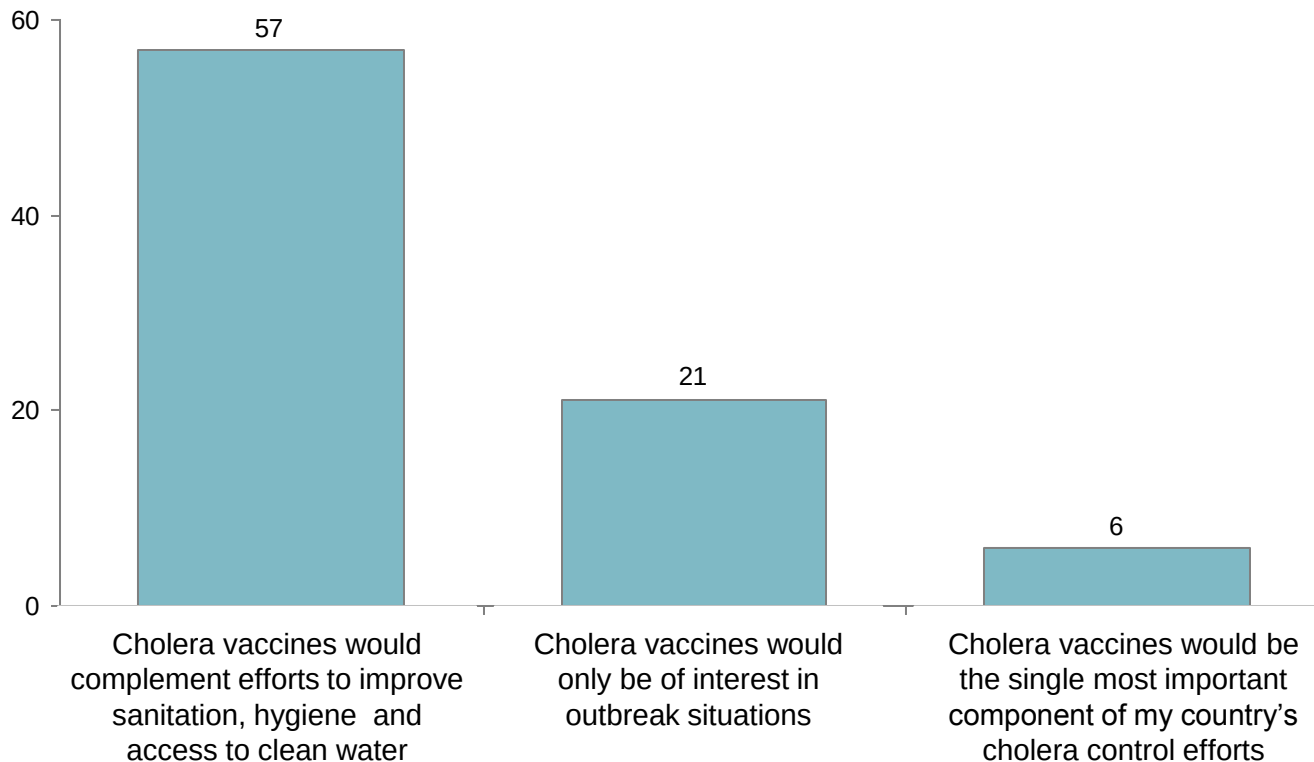
Source: 2013 GAVI Phase II country consultation survey, total n = 182

Note: cholera-specific questions asked only to respondents ranking cholera as a first or second priority for introduction

Most respondents view cholera vaccine as supplementary to WaSH improvements

Please indicate the statement(s) that most closely apply for your country:

of responses

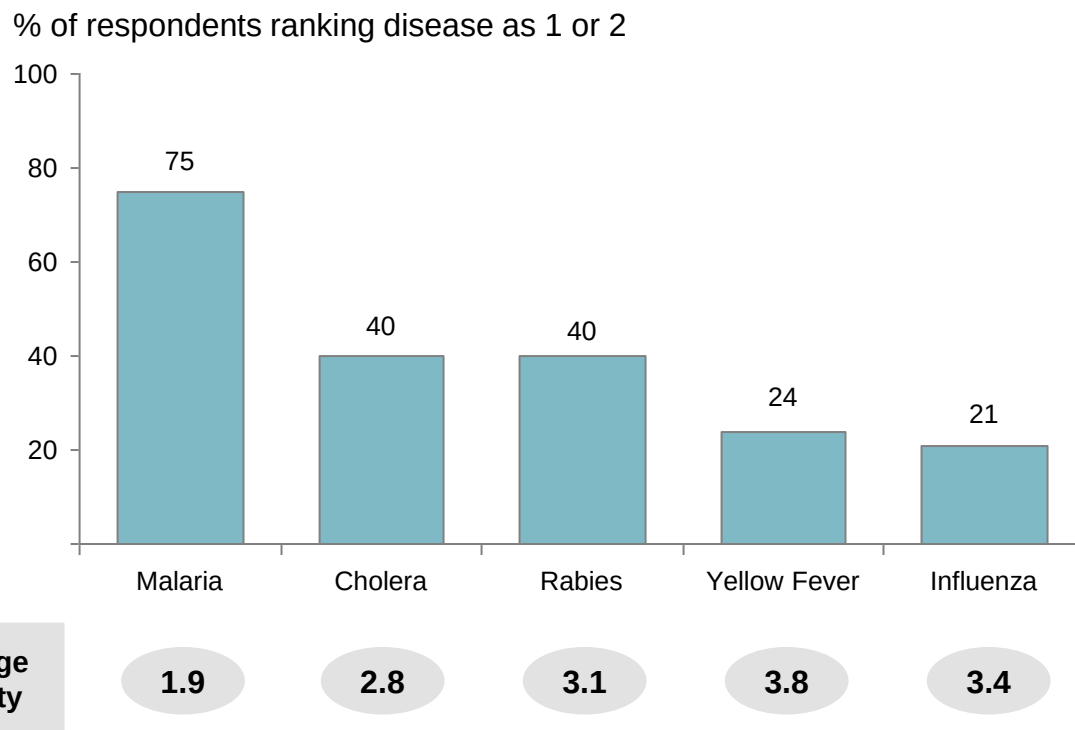


Source: 2013 GAVI Phase II country consultation survey, n=182

MALARIA

A malaria vaccine is highest priority according to country respondents

**Survey respondents:
malaria ranked as highest priority for country introductions**



Source: 2013 GAVI country consultation survey, total responses = 182, 93 from countries in scope for GAVI support of malaria. Question: Please rank all of the following vaccines in terms of prioritisation for future introduction in your country

Quotes from in-depth country interviews

“If there is *anything* available to combat malaria, my country would want it”

“We have high coverage of ITN, IRS, RDT, coartem, environmental work in swamps, but malaria is still a high burden. The arsenal of interventions is not enough.”

“Partial vaccine efficacy is no issue; the same applies to other vaccines. This vaccine is the highest priority – even if efficacy is low.”

“Large rural population, many illiterate. But everybody knows malaria. Malaria vaccine could boost the confidence of the community in the health system overall”

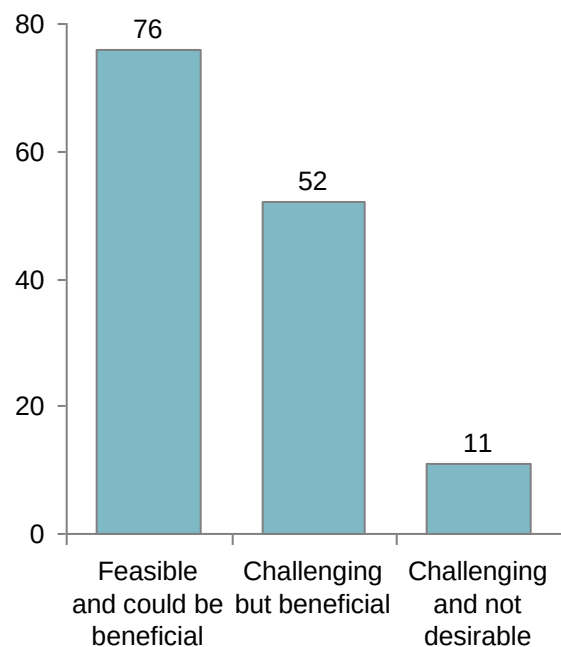
“Malaria is a big problem in the country; I would encourage GAVI to support a vaccine for use outside of Africa”

Country openness to new immunisation visits and awareness that vaccine cannot replace other interventions

Respondents positive on ability to add new visits for 5-17M age group

Question: Please indicate the statement(s) that most closely apply in your country

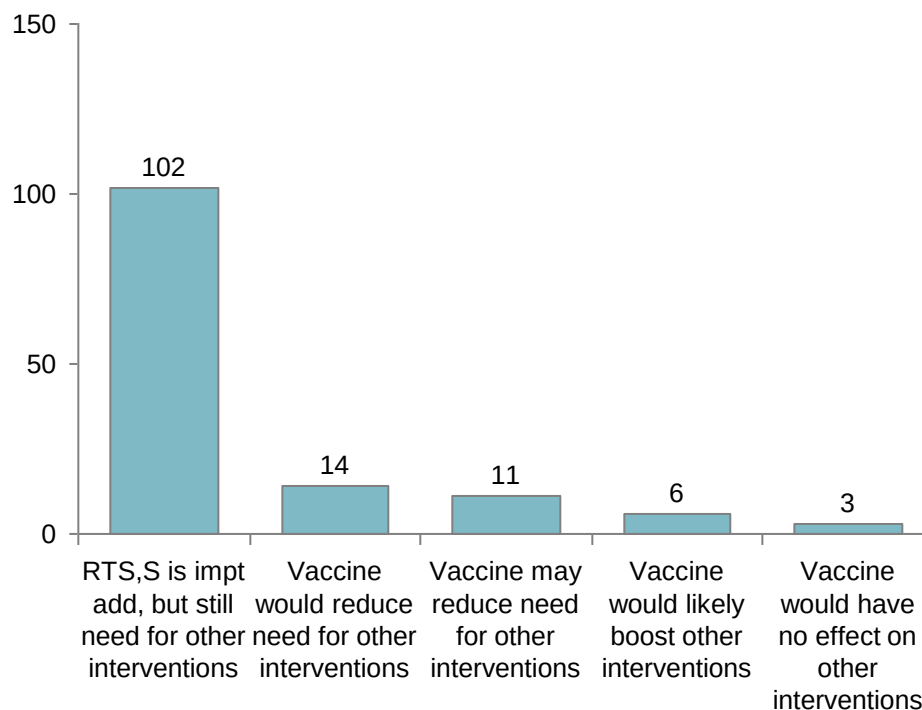
of responses



Respondents emphasized that vaccine could not displace other malaria interventions

Question: Please indicate the statement(s) that most closely apply in your country

of responses



Source: 2013 GAVI Phase II country consultation survey

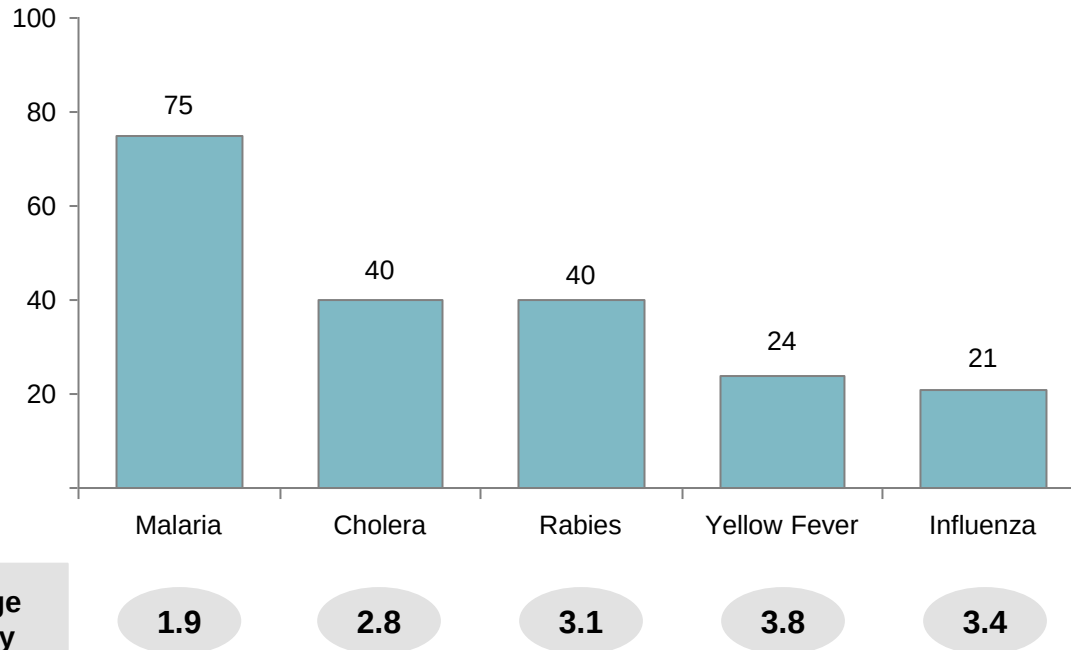
Note: question only posed to 136 respondents ranking malaria as first or second priority for introduction

INFLUENZA (FOR PREGNANT WOMEN)

Influenza vaccine was lowest priority for survey respondents

Survey respondents: influenza vaccine ranked as lowest priority for country introductions

% of respondents ranking disease as 1 or 2



Source: 2013 GAVI country consultation survey, total responses = 182, 87 from countries in scope for GAVI support of influenza. Question: Please rank all of the following vaccines in terms of prioritisation for future introduction in your country

Quotes from in-depth country interviews

"Data is important to convince decision makers. We need to understand the burden... [influenza] is not seen as high mortality and morbidity"

"We have no good flu surveillance in [my country]"

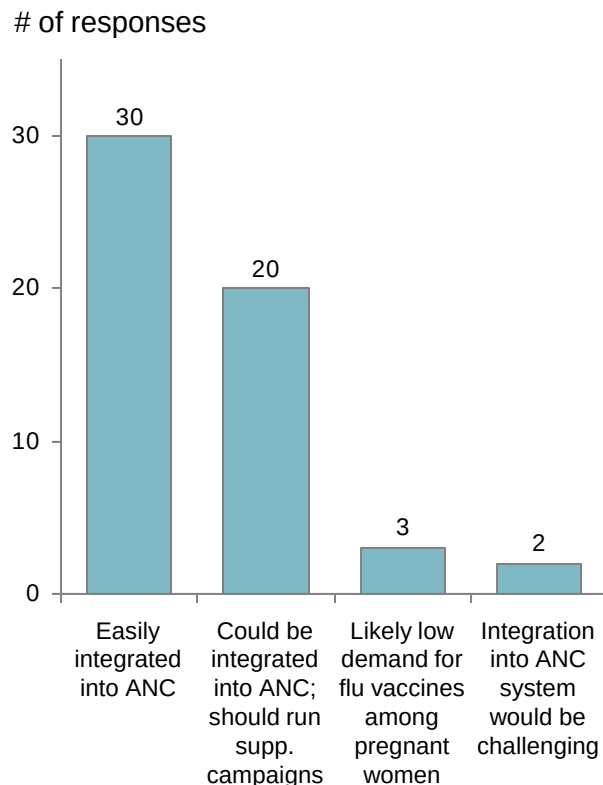
"Concerns about expiry. I recently saw 2011 H1N1 vaccines still sitting in the cold store"

"The challenge would be whether pregnant women are willing to take the vaccine"

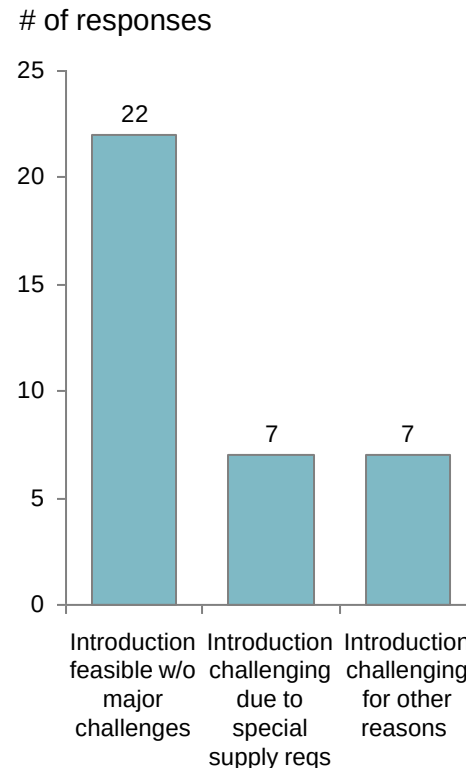
"We have poor coverage of TT vaccine so it could be seen as another liability for the government if they are unable to deliver on influenza vaccine"

Respondents believe possible to integrate vaccine in ANC & overcome seasonal supply challenges

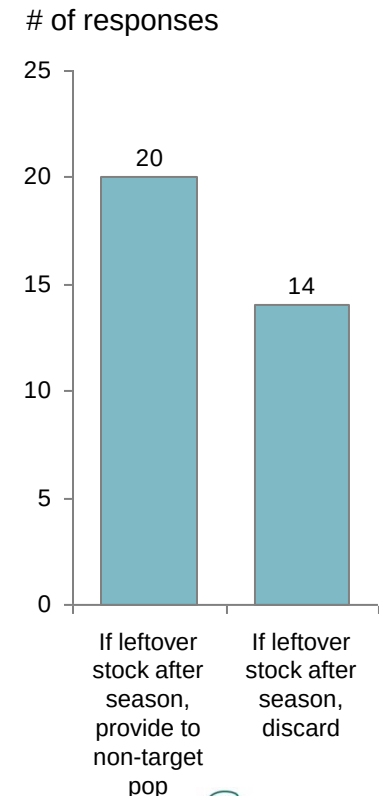
Ease of integration with antenatal care in your country?



Ease of logistical challenges associated with seasonal vaccine?



Use of leftover stock at the end of the season



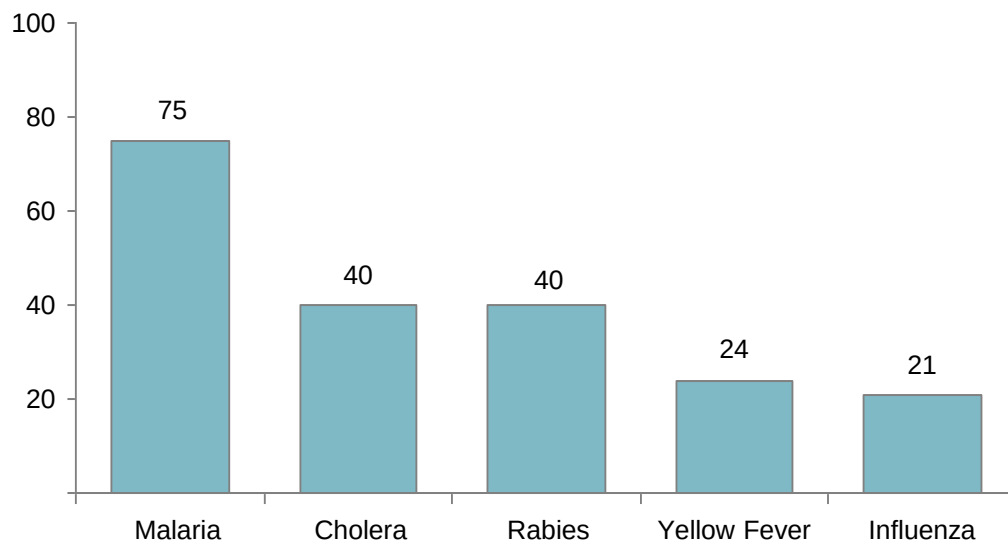
Source: 2013 GAVI Phase II country consultation survey, total n = 182; influenza-specific questions asked only to respondents ranking influenza as a first of second priority for introduction in their countries

RABIES (POST-EXPOSURE)

About half of all country respondents indicated rabies as a priority

Survey respondents: rabies ranked as second highest priority

% of respondents ranking disease as 1 or 2



Average
priority

1.9

2.8

3.1

3.8

3.4

Quotes from in-depth country interviews

“Rabies vaccine is very expensive; high out of pocket expenses.”

“It’s a serious problem in my country. No vaccine availability in rural districts.”

“Availability of vaccine in public sector is a challenge, with most patients resorting to the private sector for vaccine supply”

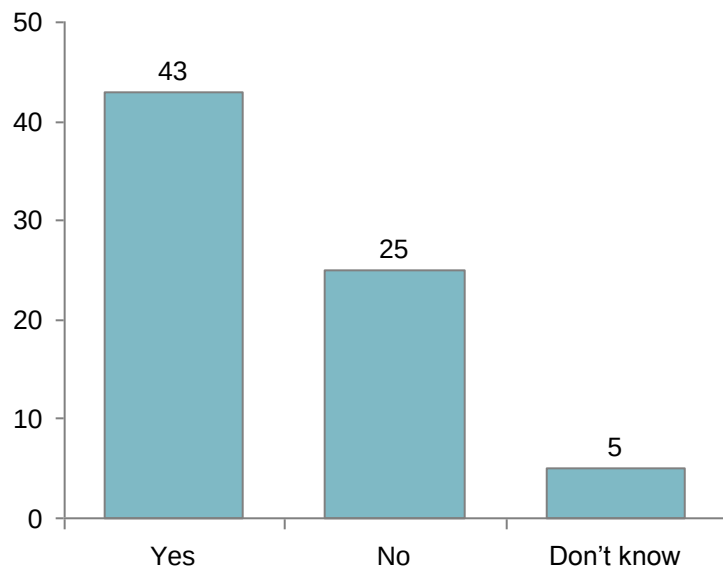
“Bite victims go to the health facility (HF), then they need to go to the veterinary, who needs to write a report, then back to the HF. HF often does not have the vaccine. So they then need to go to hospital, get the vaccine vial, then back to the HF for administration”

Mixed responses may reflect diversity and/or lack of clarity on rabies programme

Majority of respondent countries had rabies control program in place

Question: Is there currently a rabies control program in place in your country?

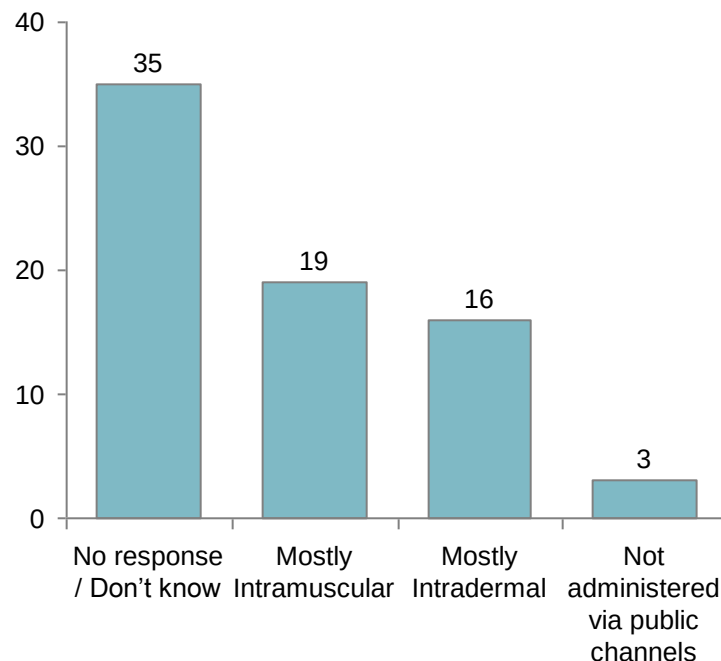
of responses



Respondents split on method of vaccine administration

Question: How is rabies vaccine typically administered via public channels in your country?

of responses

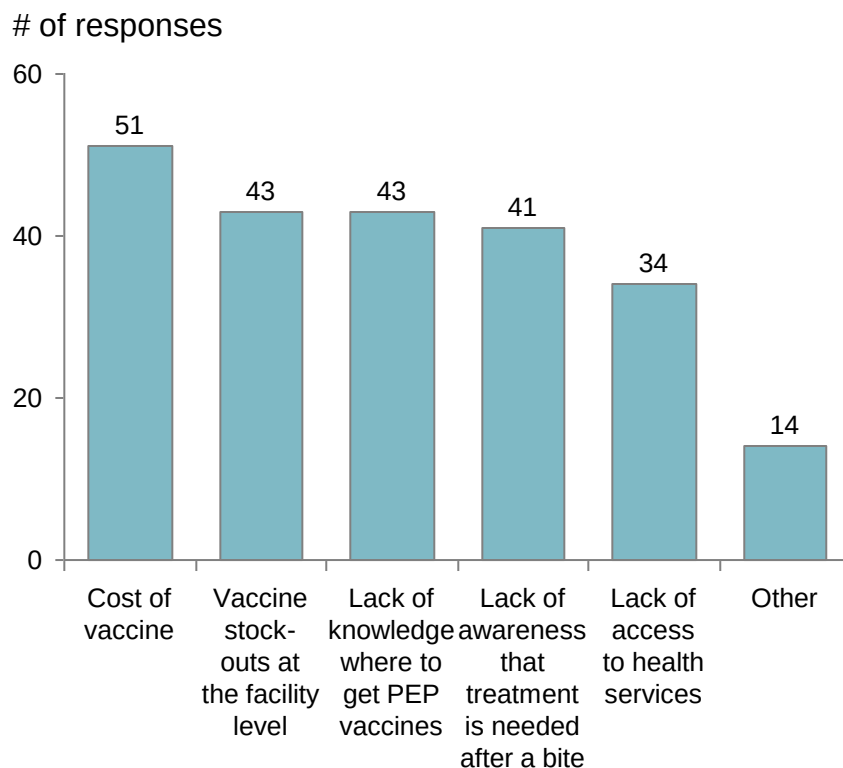


Source: 2013 GAVI Phase II country consultation survey, total n = 182; rabies-specific questions asked only to the respondents ranking rabies as a first or second priority for introduction in their countries

Price is leading barrier to post-exposure prophylaxis vaccination

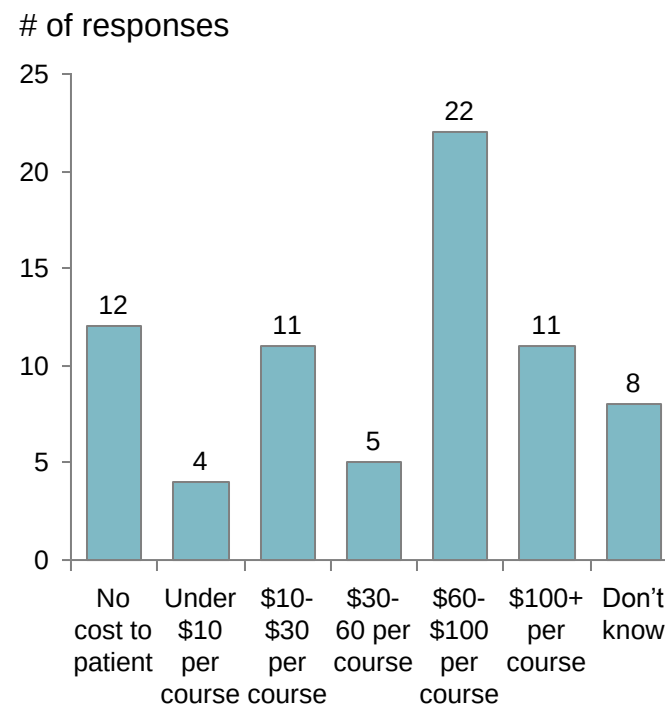
Multiple barriers to getting treatment

Question: What are the key barriers for bite victims to access rabies post-exposure prophylaxis vaccines in your country?



Most common cost to patient is \$60-\$100 per course

Question: What are currently the avg costs to a patient in your country to receive a full treatment with rabies PEP vaccines?



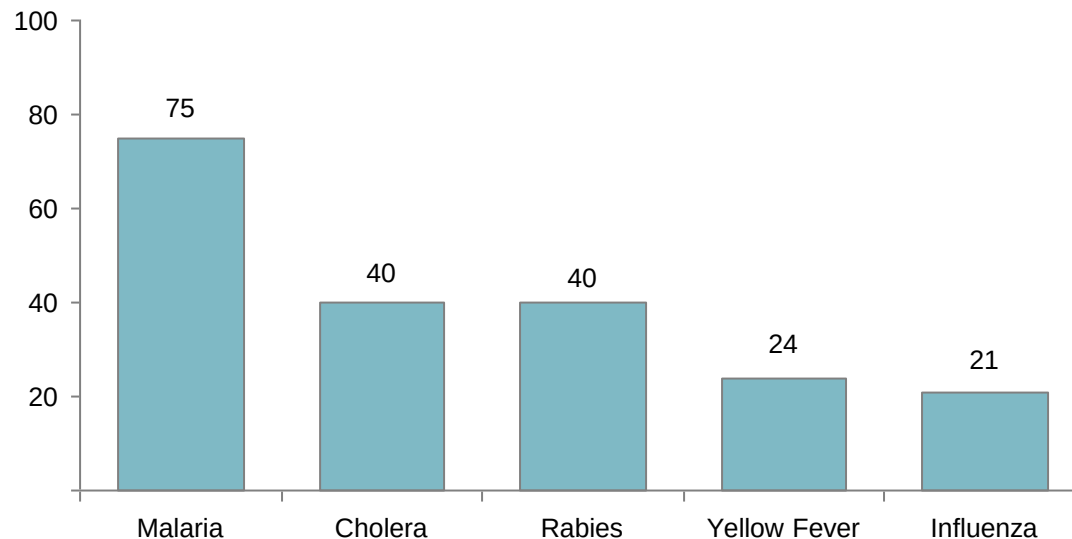
Source: 2013 GAVI Phase II country consultation survey, total n = 182; rabies-specific questions asked only to respondents ranking rabies as a first or second priority for introduction

YELLOW FEVER (ADDITIONAL CAMPAIGNS)

1/4 of respondents rated yellow fever campaigns as a priority

Survey: yellow fever a lower priority in overall sample of respondents

% of respondents ranking disease as 1 or 2



Average
priority

1.9

2.8

3.1

3.8

3.4

Quotes from in-depth country interviews

“Yellow fever mass campaigns are game changers.”

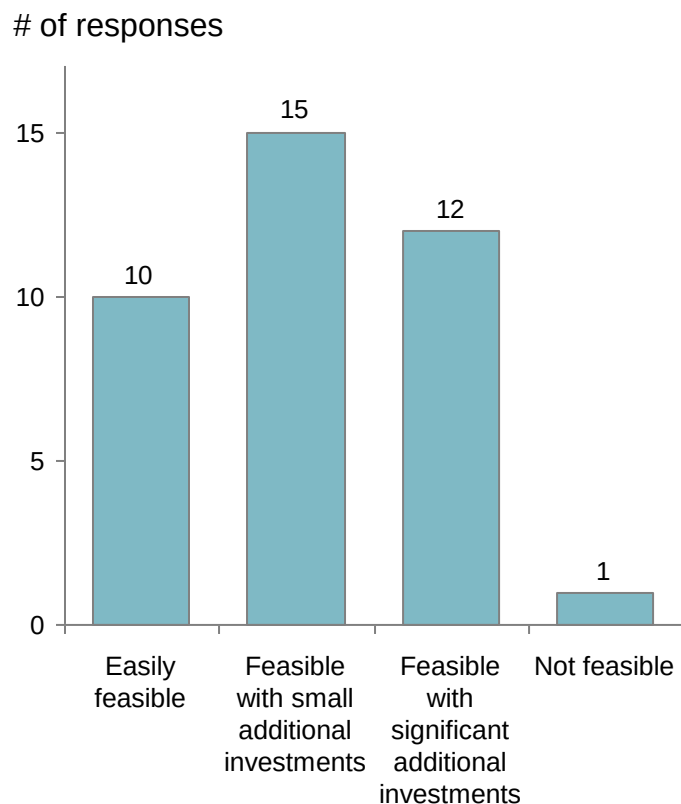
“We tend to underestimate the impact of YF. Once you see an epidemic, you pray not to see another one in your life time!”

“Campaigns are feasible, but they are challenging”

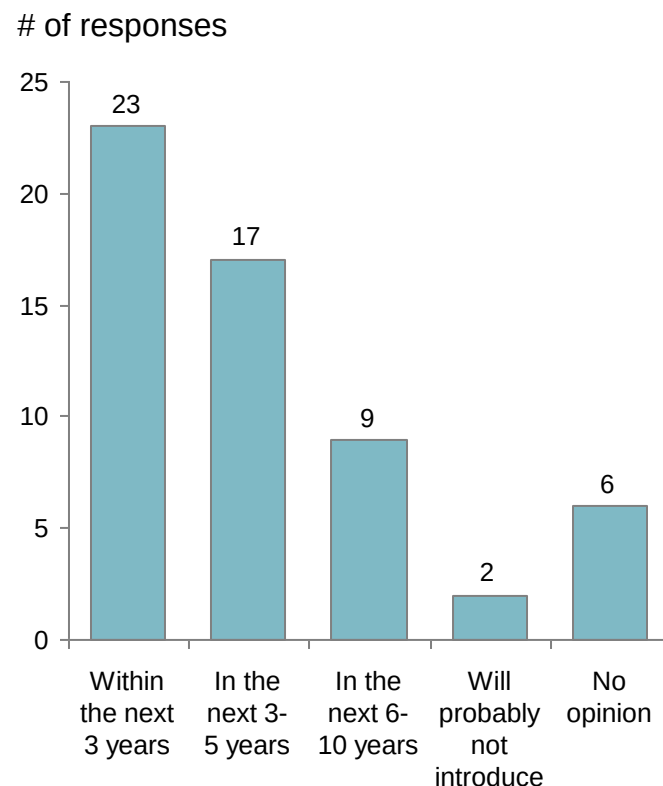
Source: 2013 GAVI country consultation survey, total responses = 182, 57 from countries in scope for yellow fever campaigns (VIS). Question: Please rank all of the following vaccines in terms of prioritisation for future introduction in your country

Majority of respondents see campaigns as feasible and desirable within 3-5 years

How feasible do you think the proposed campaign would be in your country?



When would you want to introduce yellow fever vaccines in your country?



Source: 2013 GAVI Phase II country consultation survey, total n = 182; yellow fever-specific questions asked only to respondents ranking yellow fever as a first or second priority for introduction

VIS Phase II Consultation 2013



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