



Partnering with The Vaccine Fund

June 2003

Progress Report

to the
Global Alliance for Vaccines and Immunization (GAVI)
and
The Vaccine Fund

by the Government of

| |
|-------------------------|
| COUNTRY: YEMEN Republic |
|-------------------------|

Date of submission: 27/8/2003

Reporting period: 2002 (*Information provided in this report **MUST** refer to the previous calendar year*)

(Tick only one) :

- Inception report
- First annual progress report
- Second annual progress report
- Third annual progress report
- Fourth annual progress report
- Fifth annual progress report

Text boxes supplied in this report are meant only to be used as guides. Please feel free to add text beyond the space provided.

****Unless otherwise specified, documents may be shared with the GAVI partners and collaborators***

1. Report on progress made during the previous calendar year

To be filled in by the country for each type of support received from GAVI/The Vaccine Fund.

1.1 Immunization Services Support (ISS)

1.1.1 Management of ISS Funds

→ Please describe the mechanism for management of ISS funds, including the role of the Inter-Agency Co-ordinating Committee (ICC).
Please report on any problems that have been encountered involving the use of those funds, such as delay in availability for programme use.

*1- An account was opened at the Yemen Central Bank under the name of the Ministry of Finance (according to the government regulation) to receive the financial support from GAVI .
 Another account was opened in the Central Bank under the name of the Ministry of Health & Population to facilitate transfer of funds from the first account for the MOHP use (EPI).
 The EPI manager has access to this account to use for implementation of the planned activities..*

1.1.2 Use of Immunization Services Support

*In the past year, the following major areas of activities have been funded with the GAVI/Vaccine Fund contribution.
 Since the money from the ISS fund was received late September 2002 it was late to implement any activity during the last three months of the year.*

Table 1 : Use of funds during reported calendar year 2002 (N/A)

| Area of Immunization Services Support | Total amount in US \$ | Amount of funds | | | |
|---------------------------------------|-----------------------|-----------------|-----------------------|----------|------------------------|
| | | PUBLIC SECTOR | | | PRIVATE SECTOR & Other |
| | | Central | Region/State/Province | District | |
| Vaccines | | | | | |
| Injection supplies | | | | | |
| Personnel | | | | | |
| Transportation | | | | | |
| Maintenance and overheads | | | | | |
| Training | \$160,000 | ✓ | 3 Governorates | - | - |
| IEC / social mobilization | | | | | |
| Monitoring and evaluation | | | | | |
| Epidemiological surveillance | | | | | |
| Vehicles | | | | | |
| Cold chain equipment | | | | | |
| Other (specify) | | | | | |
| Total: | | \$160,000 | | | |

Please attach the minutes of the ICC meeting(s) when the allocation of funds was discussed.

→ Please report on major activities conducted to strengthen immunization, as well as, problems encountered in relation to your multi-year plan.

The core group of the I.C.C had discussed and agreed to utilize \$160,000 for the activities reported.

1.1.3 Immunization Data Quality Audit (DQA) (If it has been implemented in your country)

→ Has a plan of action to improve the reporting system based on the recommendations from the DQA been prepared?

YES

NO

Not Applicable (successful DQA)

→ If yes, please attach the plan and report on the degree of its implementation.

N/A

Please attach the minutes of the ICC meeting where the plan of action for the DQA was discussed and endorsed by the ICC.

→ Please list studies conducted regarding EPI issues during the last year (for example, coverage surveys, cold chain assessment, EPI review).

N/A

1.2 GAVI/Vaccine Fund New & Under-used Vaccines Support

1.2.1 **Receipt of new and under-used vaccines during the previous calendar year**

→ Please report on receipt of vaccines provided by GAVI/VF, including problems encountered.

No new vaccine was received from this fund in 2002.

1.2.2 **Major activities**

→ Please outline major activities that have been or will be undertaken, in relation to, introduction, phasing-in, service strengthening, etc. and report on problems encountered.

All the old vaccines are purchased by the government own resources (through UNICEF).

The following activities were implemented for the introduction from its new vaccine (Pentavallent)

- Preparation of trainers manual.
- Preparation of the health workers training manual .
- Conducting orientation of the Governorates EPI supervisors , Director General of Governorates health services and the Director of P.H.C.
- Conducting training for the district supervisors (3Governorates).

1.2.3 Use of GAVI/The Vaccine Fund financial support (US\$100,000) for the introduction of the new vaccine

→ Please report on the proportion of 100,000 US\$ used, activities undertaken, and problems encountered such as delay in availability of funds for programme use.

The whole amount (\$100.000) from the vaccine fund was utilized in the preparation for the introduction of the new vaccines. Additional amount of \$60,000 from the Vaccine Fund was also utilized during the course of 2002 for the activities reported above (printing of materials and staff training).

The major problem faced with was the unavailability of Pentavallent vaccine form the producers, which resulted in confusion due to delay in introducing the pentavalent vaccine.

1.3 Injection Safety

1.3.1 Receipt of injection safety support

→ Please report on receipt of injection safety support provided by GAVI/VF, including problems encountered

Supplies of AD syringes & safety boxes were received during December 2002 through UNICEF with value of \$198291.6 from the vaccine safety fund.

1.3.2 Progress of transition plan for safe injections and safe management of sharps waste.

→ Please report on the progress based on the indicators chosen by your country in the proposal for GAVI/VF support.

| Indicators | Targets | Achievements | Constraints | Updated targets |
|--|-------------|--------------|---|-----------------|
| <i>AD syringes available at all vaccination sites.</i> | <i>100%</i> | <i>90%</i> | <i>Late arrival of the supplies for AD syringes & safety boxes from GAVI (UNICEF supplied AdS which closed the gap.</i> | |

1.3.3 Statement on use of GAVI/The Vaccine Fund injection safety support (if received in the form of a cash contribution)

→ The following major areas of activities have been funded (specify the amount) with the GAVI/The Vaccine Fund injection safety support in the past year:

One consignment containing autodestruct syringes with a total values of US\$198,291.60 from the Injection Safety support.

2. Financial sustainability

Inception Report : Outline timetable and major steps taken towards to development of a financial sustainability plan.
First Annual Report : Submit completed financial sustainability plan .
Subsequent reports: Summarize progress on financial sustainability.

→ If applicable, please report on progress toward financial sustainability against country selected indicators.

N/A

3. Request for new and under-used vaccines for year 2005 (indicate forthcoming year)

Section 3 is related to the request for new and under used vaccines and injection safety for the **forthcoming year**.

3.1. Up-dated immunization targets

Confirm/update basic data (= surviving infants, DTP3 targets, New vaccination targets) approved with country application: revised Table 4 of approved application form.

DTP3 reported figures are expected to be consistent with those reported in the WHO/UNICEF Joint Reporting Forms. Any changes and/or discrepancies **MUST** be justified in the space provided (page 10) . Targets for future years **MUST** be provided.

| Table 2 : Baseline and annual targets | | | | | | | | |
|---|----------------------|---------|---------|---------|---------|---------|---------|------|
| Number of | Baseline and targets | | | | | | | |
| | 2000 | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 |
| DENOMINATORS | | | | | | | | |
| Births | 640,500 | 662,620 | 686,245 | 711,480 | 737,835 | 764,785 | 792,680 | |
| Infants' deaths | 48,038 | 49,697 | 51,468 | 53,361 | 55,338 | 57,359 | 59,451 | |
| Surviving infants | 592,436 | 612,924 | 634,777 | 658,119 | 682,497 | 707,426 | 733,229 | |
| Infants vaccinated with DTP3 * | | | | | | | | |
| Infants vaccinated with DTP3: administrative figure reported in the WHO/UNICEF Joint Reporting Form | 431,185 | 444,068 | 414,703 | | | | | |
| NEW VACCINES | | | | | | | | |
| Infants vaccinated with _____ * (use one row per new vaccine) | | | | | | | | |
| Wastage rate of ** (new vaccine) | | | | | | | | |
| INJECTION SAFETY | | | | | | | | |
| Infants vaccinated with TT | 431,185 | 444,068 | 414,703 | | | | | |
| Infants vaccinated with BCG | 263,272 | 428,259 | 442,140 | | | | | |
| Infants vaccinated with Measles | 405,418 | 483,339 | 387,528 | | | | | |

* Indicate actual number of children vaccinated in past years and updated targets

** Indicate actual wastage rate obtained in past years

→ Please provide justification on changes to baseline, targets, wastage rate, vaccine presentation, etc. from the previously approved plan, and on reported figures which differ from those reported in the WHO/UNICEF Joint Reporting Form in the space provided below.

3.2 Confirmed/Revised request for new vaccine (to be shared with UNICEF Supply Division) **for the year 2005** (indicate forthcoming year)

→ Please indicate that UNICEF Supply Division has assured the availability of the new quantity of supply according to new changes.

It was agreed with GAVI that Pentavalent vaccine will be provided during the last quarter of 2004. Accordingly, the use of pentavalent vaccine will start in January 2005.

Table 3: Estimated number of doses of pentavalent vaccine (specify for one presentation only) : (Please repeat this table for any other vaccine presentation requested from GAVI/The Vaccine Fund

| | | Formula | For year 2005 |
|----------|---|------------------------------------|----------------------|
| A | Number of children to receive new vaccine | | * 707,426 |
| B | Percentage of vaccines requested from The Vaccine Fund taking into consideration the Financial Sustainability Plan | <i>%</i> | 100% |
| C | Number of doses per child | | 3 |
| D | Number of doses | $A \times B/100 \times C$ | 2,122,278 |
| E | Estimated wastage factor | <i>(see list in table 3)</i> | 1.11 |
| F | Number of doses (incl. wastage) | $A \times C \times E \times B/100$ | 2,355,728 |
| G | Vaccines buffer stock | $F \times 0.25$ | 588,932 |
| H | Anticipated vaccines in stock at start of year | - | - |
| I | Total vaccine doses requested | $F + G - H$ | 2,944,660 |
| J | Number of doses per vial | | 2 |
| K | Number of AD syringes (+ 10% wastage) | $(D + G - H) \times 1.11$ | 3,009,443 |
| L | Reconstitution syringes (+ 10% wastage) | $I/J \times 1.11$ | 1,634,286 |
| M | Total of safety boxes (+ 10% of extra need) | $(K + L)/100 \times 1.11$ | 515,545 |

Remarks

- **Phasing:** Please adjust estimates of target number of children to receive new vaccines, if a phased introduction is intended. If targets for hep B3 and Hib3 differ from DTP3, explanation of the difference should be provided.

Table 3 : Wastage rates and factors

| | | | | | | | | | | | | |
|---------------------------|------|------|------|------|------|------|------|------|------|------|------|------|
| Vaccine wastage rate | 5% | 10% | 15% | 20% | 25% | 30% | 35% | 40% | 45% | 50% | 55% | 60% |
| Equivalent wastage factor | 1.05 | 1.11 | 1.18 | 1.25 | 1.33 | 1.43 | 1.54 | 1.67 | 1.82 | 2.00 | 2.22 | 2.50 |

**Please report the same figure as in table 1.*

3.3 Confirmed/revised request for injection safety support for the year (indicate forthcoming year) 682,497

Table 4/4: Estimated supplies for safety of vaccination for the next two years with BCG (Use one table for each vaccine BCG, DTP, measles and TT, and number them from 4 to 8)

| | | Formula | For year 2004 | For year 2005 |
|----------|---|------------------------------|---------------|---------------|
| A | Target of children for vaccination (for TT : target of pregnant women)¹ | # | 682,497 | 707,426 |
| B | Number of doses per child (for TT woman) | # | 1 | 1 |
| C | Number of doses | A x B | 682,497 | 707,426 |
| D | AD syringes (+10% wastage) | C x 1.11 | 757572 | 785243 |
| E | AD syringes buffer stock ² | D x 0.25 | 189393 | 196311 |
| F | Total AD syringes | D + E | 946965 | 981554 |
| G | Number of doses per vial | # | 20 | 20 |
| H | Vaccine wastage factor ⁴ | <i>Either 2 or 1.6</i> | 2 | 2 |
| I | Number of reconstitution ³ syringes (+10% wastage) | $C \times H \times 1.11 / G$ | 75757 | 78524 |
| J | Number of safety boxes (+10% of extra need) | $(F + I) \times 1.11 / 100$ | 11352 | 11767 |

¹ GAVI will fund the procurement of AD syringes to deliver 2 doses of TT to pregnant women. If the immunization policy of the country includes all Women of Child Bearing Age (WCBA), GAVI/The Vaccine Fund will contribute to a maximum of 2 doses for Pregnant Women (estimated as total births).

² The buffer stock for vaccines and AD syringes is set at 25%. This is added to the first stock of doses required to introduce the vaccination in any given geographic area. Write zero for other years.

³ Only for lyophilized vaccines. Write zero for other vaccines

⁴ Standard wastage factor will be used for calculation of re-constitution syringes. It will be 2 for BCG, 1.6 for measles and YF.

Table 4/5: Estimated supplies for safety of vaccination for the next two years with DPT (Use one table for each vaccine BCG, DTP, measles and TT, and number them from 4 to 8)

| | | Formula | For year 2004 | For year 2005 |
|----------|---|------------------------------|----------------------|----------------------|
| A | Target of children for vaccination (for TT : target of pregnant women)⁴ | # | 682497 | 707426 |
| B | Number of doses per child (for TT woman) | # | 3 | 3 |
| C | Number of doses | A x B | 2047491 | 2122278 |
| D | AD syringes (+10% wastage) | C x 1.11 | 2272715 | 2355729 |
| E | AD syringes buffer stock ⁵ | D x 0.25 | 568179 | 588932 |
| F | Total AD syringes | D + E | 2840894 | 2944661 |
| G | Number of doses per vial | # | 10 | 10 |
| H | Vaccine wastage factor ⁴ | <i>Either 2 or 1.6</i> | 2 | 2 |
| I | Number of reconstitution ⁶ syringes (+10% wastage) | $C \times H \times 1.11 / G$ | 454543 | 471146 |
| J | Number of safety boxes (+10% of extra need) | $(F + I) \times 1.11 / 100$ | 36579 | 37915 |

⁴ GAVI will fund the procurement of AD syringes to deliver 2 doses of TT to pregnant women. If the immunization policy of the country includes all Women of Child Bearing Age (WCBA), GAVI/The Vaccine Fund will contribute to a maximum of 2 doses for Pregnant Women (estimated as total births).

⁵ The buffer stock for vaccines and AD syringes is set at 25%. This is added to the first stock of doses required to introduce the vaccination in any given geographic area. Write zero for other years.

⁶ Only for lyophilized vaccines. Write zero for other vaccines

⁴ Standard wastage factor will be used for calculation of re-constitution syringes. It will be 2 for BCG, 1.6 for measles and YF.

Table 4/6: Estimated supplies for safety of vaccination for the next two years with MEASLES (Use one table for each vaccine BCG, DTP, measles and TT, and number them from 4 to 8)

| | | Formula | For year 2004 | For year 2005 |
|----------|---|------------------------------|----------------------|----------------------|
| A | Target of children for vaccination (for TT : target of pregnant women)⁷ | # | 682497 | 707426 |
| B | Number of doses per child (for TT woman) | # | 1 | 1 |
| C | Number of doses | A x B | 682497 | 707426 |
| D | AD syringes (+10% wastage) | C x 1.11 | 757572 | 785243 |
| E | AD syringes buffer stock ⁸ | D x 0.25 | 189393 | 196311 |
| F | Total AD syringes | D + E | 946965 | 981554 |
| G | Number of doses per vial | # | 10 | 10 |
| H | Vaccine wastage factor ⁴ | <i>Either 2 or 1.6</i> | 2 | 2 |
| I | Number of reconstitution ⁹ syringes (+10% wastage) | $C \times H \times 1.11 / G$ | 151514 | 157049 |
| J | Number of safety boxes (+10% of extra need) | $(F + I) \times 1.11 / 100$ | 12193 | 12638 |

⁷ GAVI will fund the procurement of AD syringes to deliver 2 doses of TT to pregnant women. If the immunization policy of the country includes all Women of Child Bearing Age (WCBA), GAVI/The Vaccine Fund will contribute to a maximum of 2 doses for Pregnant Women (estimated as total births).

⁸ The buffer stock for vaccines and AD syringes is set at 25%. This is added to the first stock of doses required to introduce the vaccination in any given geographic area. Write zero for other years.

⁹ Only for lyophilized vaccines. Write zero for other vaccines

⁴ Standard wastage factor will be used for calculation of re-constitution syringes. It will be 2 for BCG, 1.6 for measles and YF.

Table 4/7: Estimated supplies for safety of vaccination for the next two years with TT (Use one table for each vaccine BCG, DTP, measles and TT, and number them from 4 to 8)

| | | Formula | For year 2004 | For year 2005 |
|---|--|------------------------------|---------------|---------------|
| A | Target of children for vaccination (for TT : target of pregnant women) ¹⁰ | # | 682497 | 707426 |
| B | Number of doses per child (for TT woman) | # | 3 | 3 |
| C | Number of doses | A x B | 2047491 | 2122278 |
| D | AD syringes (+10% wastage) | C x 1.11 | 2272715 | 2355729 |
| E | AD syringes buffer stock ¹¹ | D x 0.25 | 568179 | 588932 |
| F | Total AD syringes | D + E | 2840894 | 2944661 |
| G | Number of doses per vial | # | 10 | 10 |
| H | Vaccine wastage factor ⁴ | Either 2 or 1.6 | 2 | 2 |
| I | Number of reconstitution ¹² syringes (+10% wastage) | $C \times H \times 1.11 / G$ | 454543 | 471146 |
| J | Number of safety boxes (+10% of extra need) | $(F + I) \times 1.11 / 100$ | 36579 | 37915 |

Table 5: Summary of total supplies for safety of vaccinations with BCG, DTP, TT and measles for the next two years.

| ITEM | | For the year ... | For the year ... | Justification of changes from originally approved supply: |
|----------------------------------|--------------------|------------------|------------------|---|
| Total AD syringes | for BCG | 946965 | 981554 | |
| | for other vaccines | 6628752 | 6870875 | |
| Total of reconstitution syringes | | 7575717 | 7852429 | |
| Total of safety boxes | | 96704 | 100236 | |

→ If quantity of current request differs from the GAVI letter of approval, please present the justification for that difference.

The proposal was submitted to GAVI during 2001 but after that there was local administrative offers were formulated and indicate the number of population in each district ,so we were enforced to take those numbers in our calculation for targeted number of children as presented in the above table and as it is presented in the joint report format.

¹⁰ GAVI will fund the procurement of AD syringes to deliver 2 doses of TT to pregnant women. If the immunization policy of the country includes all Women of Child Bearing Age (WCBA), GAVI/The Vaccine Fund will contribute to a maximum of 2 doses for Pregnant Women (estimated as total births).

¹¹ The buffer stock for vaccines and AD syringes is set at 25%. This is added to the first stock of doses required to introduce the vaccination in any given geographic area. Write zero for other years.

¹² Only for lyophilized vaccines. Write zero for other vaccines

⁴ Standard wastage factor will be used for calculation of re-constitution syringes. It will be 2 for BCG, 1.6 for measles and YF.

4. Please report on progress since submission of the last Progress Report based on the indicators selected by your country in the proposal for GAVI/VF support N/A

| Indicators | Targets | Achievements | Constraints | Updated targets |
|------------|---------|--------------|-------------|-----------------|
| - | - | - | - | - |

5. Checklist

Checklist of completed form:

| Form Requirement: | Completed | Comments |
|---|-----------|----------|
| Date of submission | ✓ | |
| Reporting Period (consistent with previous calendar year) | ✓ | |
| Table 1 filled-in | N/A | |
| DQA reported on | N/A | |
| Reported on use of 100,000 US\$ | ✓ | |
| Injection Safety Reported on | ✓ | |
| FSP Reported on (progress against country FSP indicators) | N/A | |
| Table 2 filled-in | ✓ | |
| New Vaccine Request completed | ✓ | |
| Revised request for injection safety completed (where applicable) | ✓ | |
| ICC minutes attached to the report | ✓ | |
| Government signatures | ✓ | |
| ICC endorsed | ✓ | |

6. Comments

→ *ICC comments:*

The ICC has held three meetings during 2002 and copies of the minutes of the meeting were sends to GAVI secretaries.

Signatures

by Generation of WOMEN REPUBLICS

with *John G. MAE* - *Chairman* - *2019 APR*

THE CENTRAL BANK OF THE
REPUBLICS

The undersigned members of the Inter-Agency Group discuss and approve each of this report. Signature and endorsement of this document is a legal commitment on the part of the partner agency or individual.

These accountability forms are integral part of GAWP for Mexico Fund monitoring of reporting of essential performance. It is based on minimum audit requirements as detailed in the Banking Form. The IAG Members confirm that the funds received have been admitted under the standard government or partner requirements.

| Agency/Institution | Name/Title | Date | Signature | Agency/Organization | Name/Title | Date |
|--------------------|--------------------------|------------------|--------------------|---------------------|------------|------|
| WFP | <i>Maximiliano Lopez</i> | <i>2/14/2019</i> | <i>[Signature]</i> | German Project | | |
| UNICEF | <i>Dr. Annie Lopez</i> | <i>2/14/2019</i> | <i>[Signature]</i> | | | |
| UN Women | <i>María Margarita</i> | <i>2/14/2019</i> | <i>[Signature]</i> | | | |
| World Bank | <i>[Signature]</i> | | | | | |