



Angola

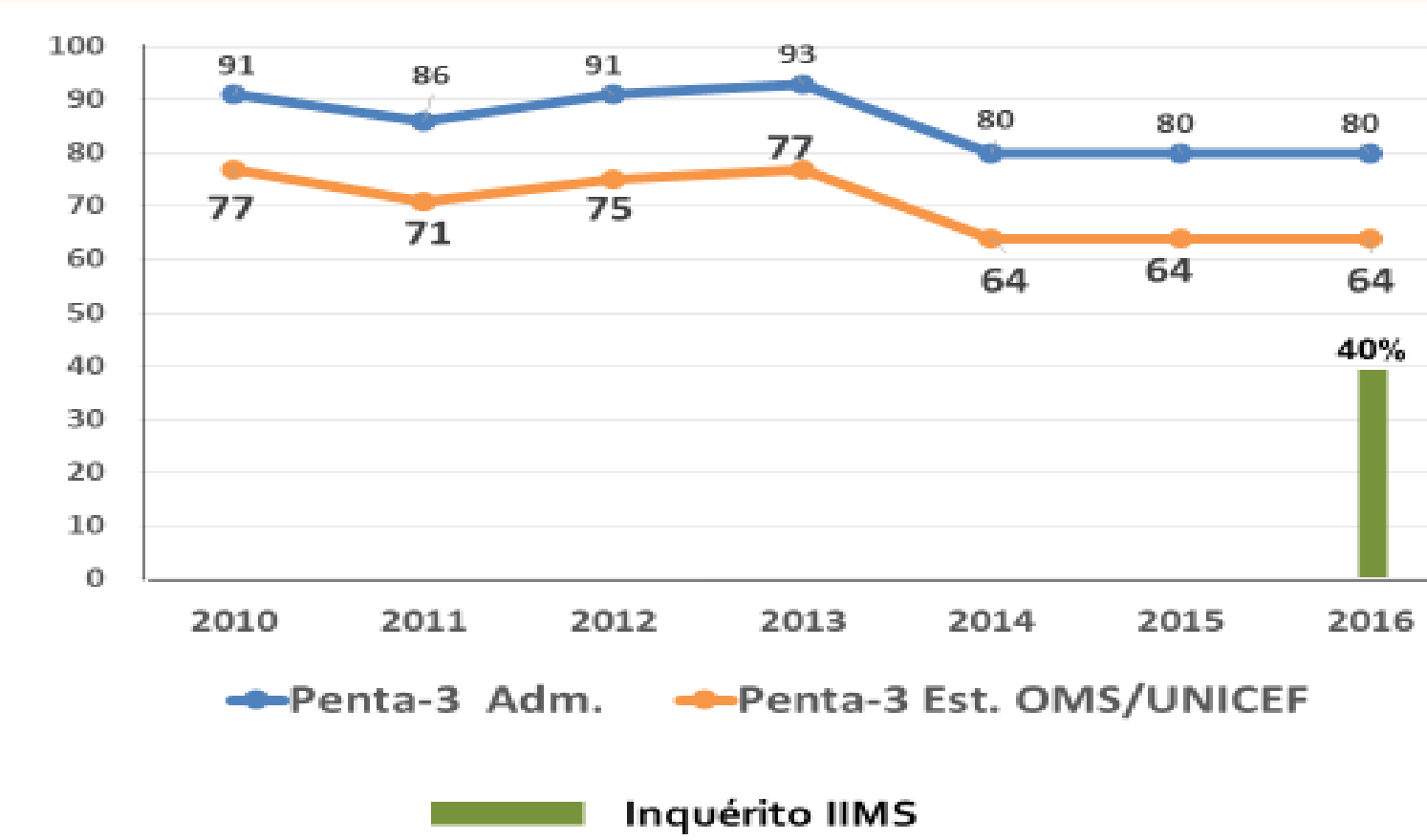
Managing the Transition from Gavi Assistance

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1. Background Information

Tendência da cobertura Penta-3. Angola, 2010-2016



- Angola is in the last year of the transition of Gavi support (2015-2017).
- New vaccine introductions with Gavi support (2006 a 2015)
 - Pentavalent (DPT-HepB-Hib)
 - Conjugate Pneumo 13v (PCV13)
 - Rotavirus
- Plans for HPV introduction in 2020

2. Financing

Vaccine Financing

Angola Government is responsible for financing All traditional vaccines;

- Pentavalent vaccine since 2015 ;
- PCV13 since 2016 ;
- In 2017, 90% of rotavirus vaccine.

By 2018 EPI program and all its vaccines will be fully financed by Angolan Government

- Currently no gavi co-financing debts
- Due to financial crisis in 2015-2017, budget restraint in the health sector
- No lack of funding for vaccines and supplies
- Activities of the advanced and mobile vaccination teams reduced to a minimum

HSS Financing

- HHS Gavi grant of USD 3.97 million
- 2 year period (2017-2018)
- 11 of 18 provinces targetted, and respective 100 municipalities with worst indicators
- Where 62% of national population, and 67% of non-vaccinated children in Angola (390.610) are living

2. Financing cont'd

Five components of HSS funds:

1. Enhance quality vaccination services in the public healthcare system (29% of HHS funds);
2. Expansion of the cold chain capacity, improvement of logistics, and maintenance of cold chain equipment (47% of HHS funds);
3. Reinforcement of health education and communication (7% of HHS funds);
4. Improvement of data quality and use, monitoring and evaluation (10% of HHS funds);
5. Reinforcement of national management capacity and definition of sustainable evidence based immunization policies (2% of HHS funds).

3. Procurement

Until 2015 procurement for traditional vaccines was conducted locally through local vendors that provided WHO pre-qualified vaccines

- Efficient but at a higher cost.

Since 2016, all vaccines are procured through UNICEF.

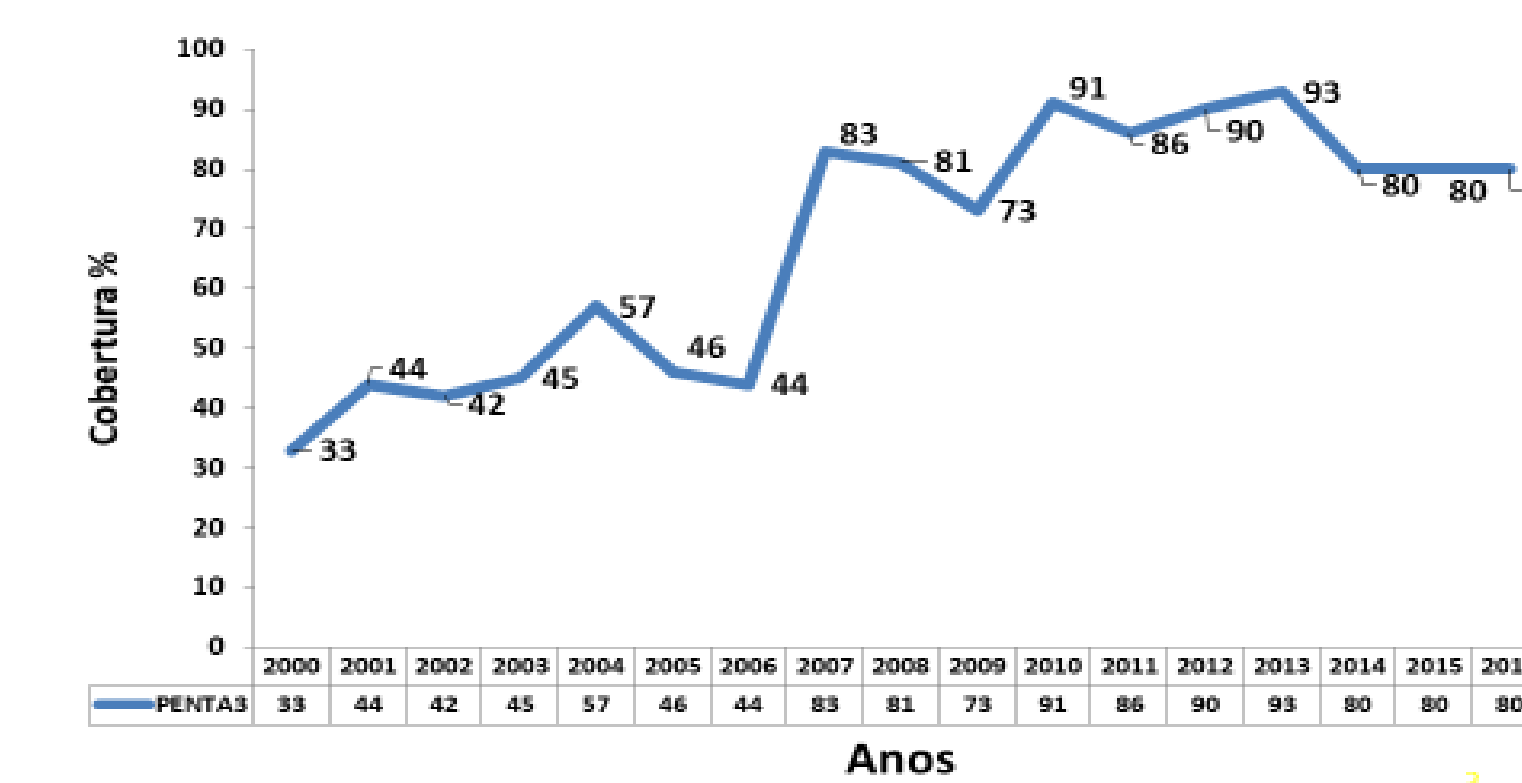
- Direct request to Angolan Presidency cabinet, and anticipated transfer of funds to UNICEF
- Purchase and deliver of vaccines throughout the year as per annual procurement planning
- Between 2012 and 2015 there was a delay in Gavi co-financing payment.
- Debts paid and payments to date in 2016
- In 2017 payment of USD 25,8 million to UNICEF for procurement of vaccines and supplies for 2017 and first trimester of 2018

4. NITAG

- National Immunization Technical Advisory Committee (NITAG) established under a ministerial decree.
- NITAG being established with Gavi support

5. Coverage and Equity

Evolução das coberturas de vacinação de rotina Penta-3. Angola. 2000-2016



Main Challenges

- Insufficient network of healthcare services and high dependence on mobile and advanced teams to cover the whole population
- Cold chain is outdated and insufficient – in the process of renovation and expansion with Gavi support
- Lack of transportation
- Insufficient human resources

6. Transition Plan

As part of the transition plan (2015-2017), Angola received USD 1,008,450 through WHO and UNICEF

Critical areas for strengthening

- Governmental financing of immunization activities at all levels
- Strengthening cold chain, particularly inventory, remote temperature monitoring, capacity building for stock management
- Communication and social mobilization activities
- Improvement of data quality with capacity building of provincial technical team on methods for auditing data quality
- Regulation of vaccines and surveillance of adverse events
- Strengthening human resources at the central and provincial levels
- Training of mid-level EPI managers and revision of the healthcare (medical and nurse) graduate program curricula, as to include immunization

7. Graduation Grant

- Gavi graduation grant of USD 1,008,450
- In its last phase of implementation in Dec 2017
- 40% of the grant managed by Unicef, intended for cold chain and social mobilization
- 60% of the grant managed by WHO, intended for data quality, human resources and surveillance
- 24 activities already implemented
- 4 activities under execution

8. Key Lessons

- Assume full funding of vaccines in the national immunization program is no easy task for a country
- Multiple competing priorities
- Support from international partners for immunization advocacy help in the process of prioritizing vaccines by National Governments
- Assessments of the transition process help realize the additional responsibilities, particularly at the central level management team e.g. Angola has duplicated the number of technical staff at the central level EPI management team
- Actions planned in the transition plan should be initiated within the first year
- Accumulation of actions towards the end of the transition period result in pressure, which together with the bureaucratic processes, are additional challenges.



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