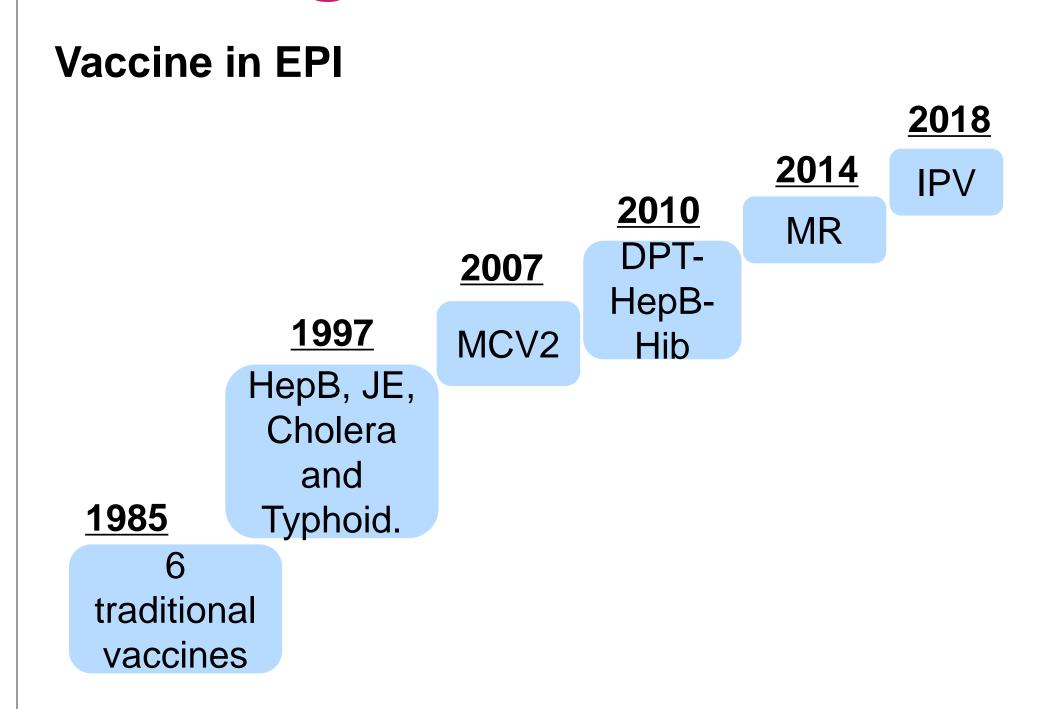


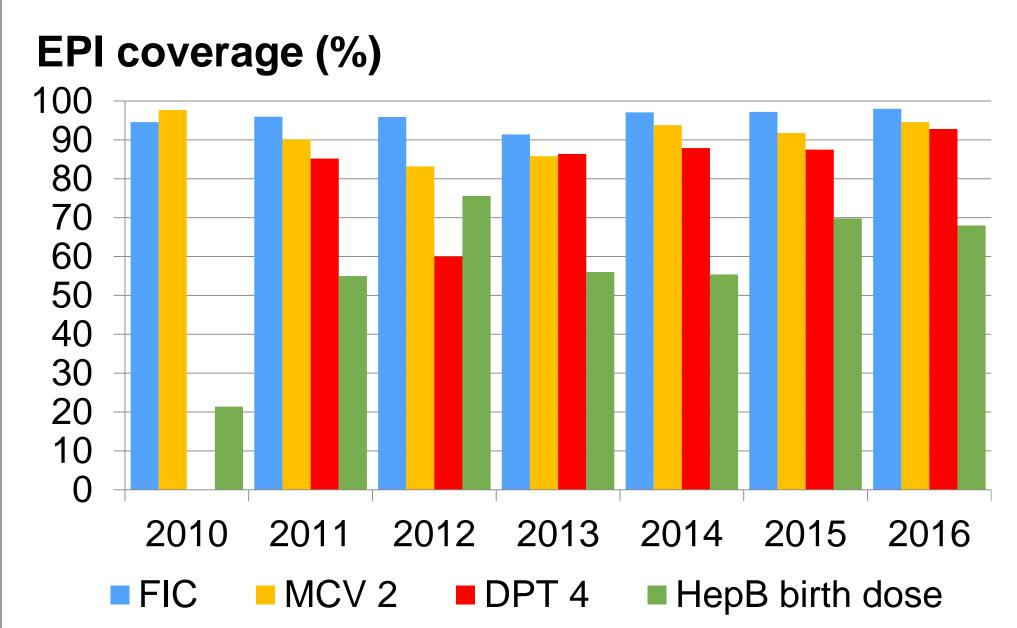
Vietnam

Managing the Transition from Gavi Assistance

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1. Background Information

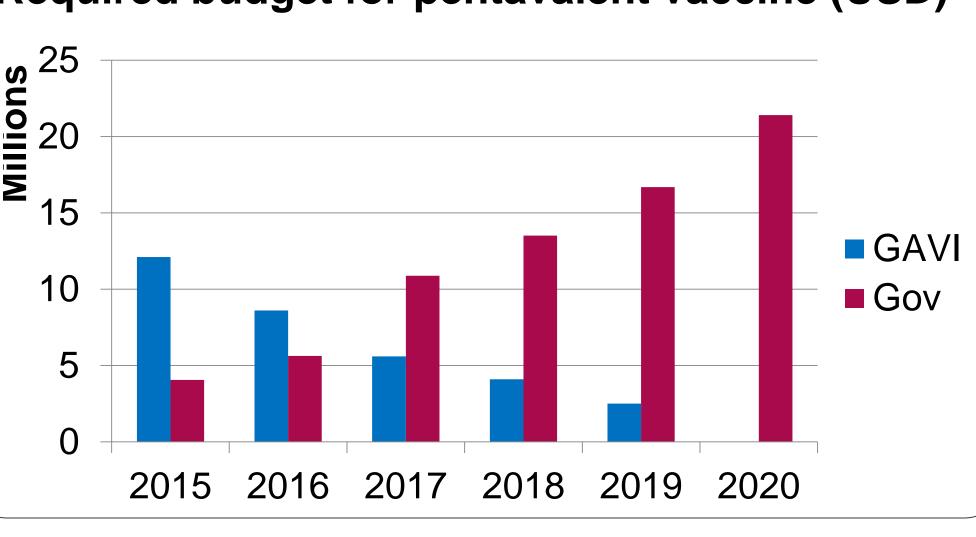




Support from GAVI

Type of funding	Period of implmentation
Hepatitis B vaccine (NVS)	2002 - 2007
Injection Safety Support (INS)	2004 - 2006
Introduction of MCV2 (NVS)	2007 - 2011
Pentavalent (NVS)	2010 - 2019
ISS (phase II)	2007 - 2014
MR (NVS)	2014 - 2015
MR - Operational costs	2014 - 2015
IPV (NVS)	2015 - 2018

Required budget for pentavalent vaccine (USD)

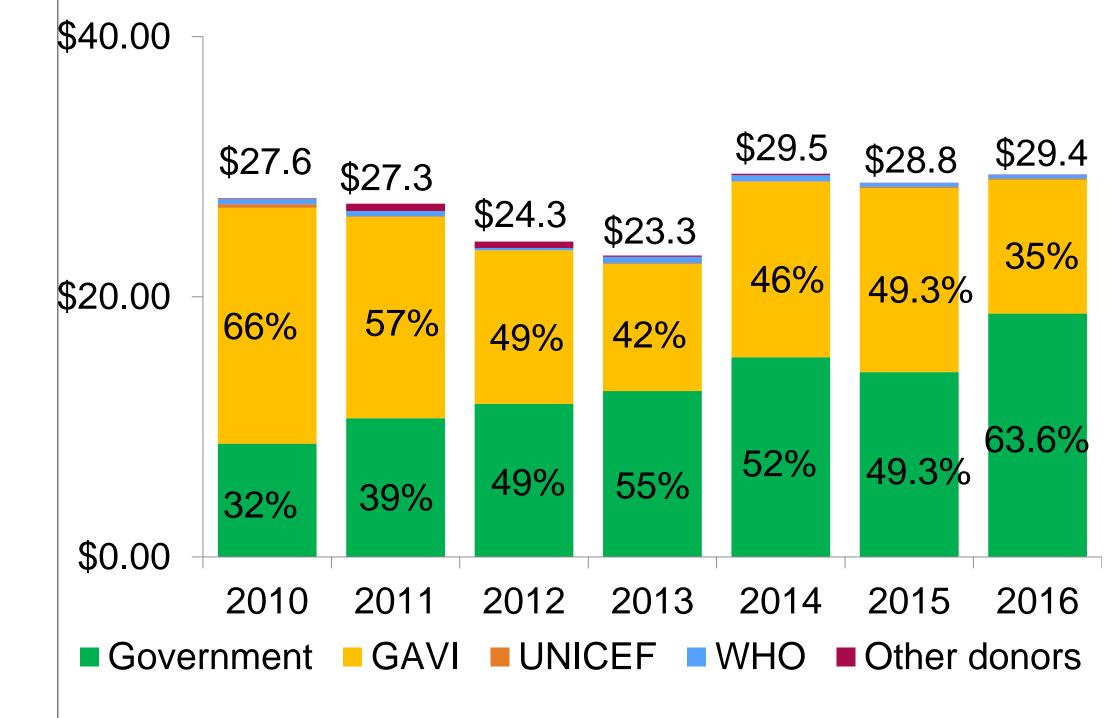


2. Financing

Strong government legislation mention about EPI financing, especially in financing responsibility of each level in investment for immunization activities:

- Law on prevention and control of infectious diseases
- Decision No 1125/QD-TTg of Prime Minister dated 31
 July 2017 on approval of Target program of Health and
 Population in period 2016-2020 have specified criteria
 and budget for EPI.
- Decree on immunization No 104/ND-CP which is promulgated in 2016 have specified the responsibility in ensuring sustainable fund for immunization activities.

Fund for EPI (USD)



Main challenges in EPI financing

- The reduction of investment from international organization due to Vietnam become a low middle income country.
- No commitment of local government on ensuring investment for EPI operation cost.
- Limited support for immunization service in difficult, hard to reach area and mobile population in urban area
- No funding for strengthen quality of cold chain system
- No funding for communication

3. Procurement

For pentavalent vaccine, purchase through UNICEF For other vaccines:

Submit and get approve for vaccine procurement plan (estimate dose with fixed price)

Annually, base on actual number of immunization targeted, order vaccine with manufacture

Sign contract and purchase vaccine

4. NITAG

Vietnam has NITAG with members from related area with immunization:

- Was established by legislative/administrative basis
- Has formal terms of reference
- Has at least five different areas of expertise represented among its core members
- Has meetings usually twice a year, with agenda and background documents circulated in advance
- Has mandatory disclosure (by members) of any conflicts of interest

5. Coverage and Equity

Main challenges in coverage and equity

- Equity in immunization: Hard to reach and difficult communes, ethnic minorities, migrant population
- Vaccine shortage, IPV implementation delayed until 2018, raise concern about protection of polio eradication achievement due to lack of polio immunity type 2.
- Lack of funding for operational cost, vaccine transportation, training that will effect to the immunization coverage.
- The demand to replace and additional supply of cold chain and temperature monitoring equipments at all levels in order to meet the requirement of storage capacity.
- Despite the undisputed public health benefits of immunization, AEFI still remain a concern of community about vaccine safety.
- The rise of anti-vaccine group will have negative impacts to the immunization coverage which means infectious diseases will easily re-emergence and put community at risk of the most dangerous diseases.

Priority activities

- Advocacy to increase government investment for immunization in the situation that Vietnam become a low middle income country and search for other investment for EPI (health insurance)
- Strengthen EPI quality, especially in difficult, hard to reach area
- Maintain immunization coverage and EPI achievements, prioritize for measles and rubella elimination
- Improve HepB birth dose coverage
- Strengthen cold chain system quality
- Introduction new vaccine in EPI: IPV and rota vaccine (local production)
- Communication to raise awareness and confident of the community in vaccine and immunization
- Maintain and enhance AEFI surveillance activities, timely response when AEFI occurs

6. Transition Plan

UNICEF:

- Support for increasing access to immunization services in hard to reach areas
- Immunization communication
- Improve quality of EPI system
- Support to policy on sustainable financing

WHO

- Support in strengthening AEFI surveillance system.
- Develop immunization packages.

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Advocacy to sustain financing for EPI

7. Graduation Grant

- Graduation grant from GAVI is around 3,000,000 USD
- In transition plan, GAVI will support EPI through WHO and UNICEF

8. Key Lessons

- Define priority activities in EPI
- Enhance coordination between GAVI, WHO, UNICEF to support for EPI in transition period.
- EPI need to work closely with WHO, UNICEF to develop plan for each activity to ensure the timeline and effectiveness.

9. Further Thoughts

- As a middle income country, EPI Vietnam and also other health program will face the reduction of international support, so it is important to have the commitment from the government to sustain EPI activities, from central and also local government.
- The requirement to change and update cost norm for EPI activity to meet the need to implement each activity.



