

#### Financial impact of new vaccine introduction in Uganda

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The PHR plus Project is funded by U.S. Agency for International Development and implemented by:

Abt Associates Inc. and partners, Development Associates, Inc.; Emory University Rollins School of Public Health; Philoxenia International Travel, Inc. Program for Appropriate Technology in Health; SAG Corp.; Social Sectors Development Strategies, Inc.; Training Resources Group; Tulane University School of Public Health and Tropical Medicine; University Research Co., LLC.



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#### Introduction

- ▲ USAID/W and USAID/Uganda requested assistance from PHR plus project to support the immunization program in Uganda which received \$ and vaccines from GAVI
- ▲ Global Alliance for Vaccines and Immunizations (GAVI):
  - **▲** Strengthen routine immunizations
  - Accelerate introduction of new vaccines in developing countries



#### Contributions from the Vaccine Fund (GAVI) in Uganda

- Received \$ and vaccines in 2001
- ▲ Injection safety materials: Auto-disable (AD) syringes (\$1,157,000 for 3 years)
- △ Support funds (US\$ 910,000 x 2 years) to strengthen the system and increase coverage
- Addition of two antigens:
  - ▲ Hepatitis B (Hep B)
  - ▲ Haemophilus influenzae type b (hib)
  - ▲ Using "pentavalent" presentation: DTP+Hep B+hib (\$50 million over 5 years)



#### Vaccine Fund support for a limited time period

- ▲ Support for doses available for 5 years
- Financial Sustainability Plan is a tool for countries:
  - ▲ Assesses the cost and financing of immunizations prior to GAVI
  - ▲ Makes projections of costs and financing post-GAVI funding period
  - ▲ Develops a strategy for post-GAVI



### GAVI definition of financial sustainability

"Although self-sufficiency is the ultimate goal, in the nearer term sustainable financing is the ability of a country to mobilize and efficiently use domestic and supplementary external resources on a reliable basis to achieve current and future target levels of immunization performance"

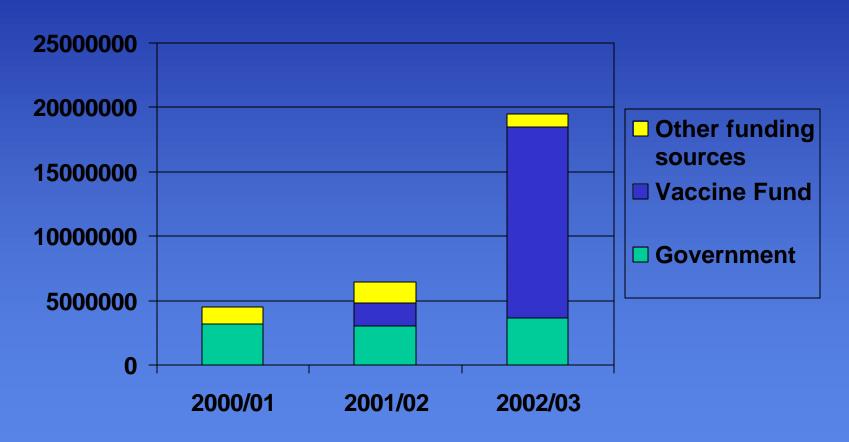


# Cost of routine immunization program prior to introduction of Hepatitis B and Hib vaccines

- ▲ Fiscal year 2000/01, baseline year, no GAVI funding:
  - ▲ Total costs: \$4.5 million
- ▲ Fiscal year 2001/02, first year of GAVI funding (1 month of pentavalent vaccine):
  - ▲ Total costs: \$6.4 million
- ▲ Fiscal year 2002/03, first full year with pentavalent vaccine:
  - ▲ Total costs: \$21.2 million

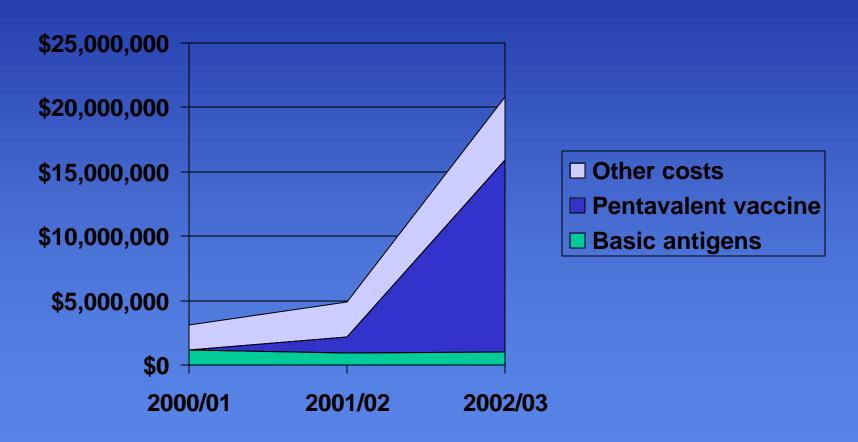


#### Funding sources for immunization program





#### Cost of immunization program



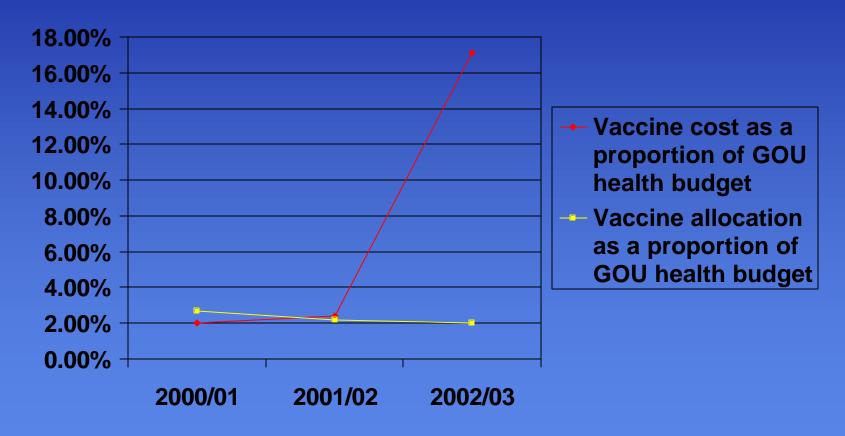


### Why is there a \$15 million funding gap?

- Cost of pentavalent vaccine formulation
  - ▲ DPT: \$0.09/dose
  - ▲ DPT-Hep B: \$1.00/dose
  - ▲ DPT-Hep B-Hib: \$3.45/dose
- △ Population growth
  - **3.4%**
- △ Increase in coverage
  - ▲ 58% in 2000 to 77% in 2003 for DPT3



### Vaccine cost versus gov't vaccine allocation by MOH





# What are the policy implications of the financial impact of the new vaccines in Uganda?

- ▲ What is realistic for financial sustainability in Uganda?
  - **▲** Basic antigens
  - ▲ Injection safety
  - ▲ Hepatitis B, Hib
- ▲ Price of pentavalent formulation
- Reevaluate the disease burden of Hepatitis B and Hib in Uganda
- △ Evidence-based resource allocation





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