Regional Prospective of Vaccine Procurement in SEE Countries

SECID – Southeast European Center for Surveillance and Control of Infectious Diseases

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SEE Region, SEEHN and SECID

Southeast European Center for Surveillance and Control of Infectious Diseases

- A Health Network of South East European – SEEHN - countries following Dubrovnik pledge in 2001 to cooperate and strengthen public health systems in Albania, Bosnia and Herzegovina, Bulgaria, Croatia, Macedonia, Montenegro, Moldova, Romania and Serbia.

- Every country leading one of public health regional priorities
SECID – Southeast European Center for Surveillance and Control of Infectious Diseases

- **Albania** - leading communicable surveillance and control in SEE Countries;
- **Regional Role** - From SEEHN network to Regional Development Centers- RDC. RDC – CDC November 2010, SECID;
- **Political Support** - South East European Center of Infectious Diseases Surveillance and Control (Agreements with Ministries of Health of SEE countries).
SECID – Priorities

- Strengthening infectious disease surveillance systems and establish one health cross border surveillance;
- Improving immunization system capacities and introduction of new vaccines;
- Establishing cross border capacities on Early Warning Systems and improve IHR implementation;
- Influenza (surveillance, diagnosis, vaccination, etc, pandemic preparedness);
- Leishmaniasis
Regional Initiative to Ensure Vaccines for every Child in SEE countries

- Meeting of some SEE countries (BiH, Cro, MNE, SRB) in Sarajevo – How to prevent vaccine stockout and organize *regional joint procurement*;
- Discussion at *political level* May 2015 Jahorina, BiH and at Ministerial Level (Belgrade, Serbia) – June 2015;
- *Discussion with WHO* during European Immunization Meeting, Antwerp, September 2015.
Vaccine Procurement and Barriers in SEE countries - Bosnia and Hercegovina...

- 2 entities and DB, a previous GAVI country where vaccines are procured in different ways in each entity either through health insurance or by a centralized budget through MoH;
- Intermittent vaccine stock-outs due to the lengthy and complicated procurement process;
- Paying higher price vaccines (5-20 times higher than UNICEF/Gavi prices);
- Scarcity of financial resources;
- Cold chain equipment and its maintenance and management are deteriorating due to inadequate public funding for maintenance and replacement of ageing cold chain equipment.
Vaccine Procurement and Barriers in SEE countries - Bulgaria, Croatia, Serbia, Montenegro, Macedonia

- Lengthy tender process through MoH;
- Paying higher price vaccines;
- Lack of offers (small market);
- Periodic vaccine stock-outs
- 2015 Bulgaria received a donation from Turkey, not able to finalize tendering procedures
Vaccine Procurement and Challenges in SEE countries ...

- The role of immunization program is limited; lack of communication among different organizations
- Procurement laws related to EU integration (all vaccines must be registered and use in EU countries);
- Legal constraints limiting competition;
- Legal constraints due to EU integration (vaccines only registered in EU countries);
- Lack of information about the vaccine and supply chain prices, high prices;
- Difficult to find appropriate prices for introduction of new vaccines
...Vaccine Procurement and Challenges in SEE countries ...

- Problems in **forecasting** and lack of communication where changes in schedule are not seen in long term;
- Tendering procedures are **not flexible**, which will delay the vaccine arrival;
- **Lack of human capacities** regarding technical specification and procedures for procurement;
- **Poor market knowledge**, evaluation criteria, contract requirements.
Key Aspects for a Sustainable Demand...

**STRENGTHS**

- ✓ **Strong National Immunization Programs** *(high political commitment, high vaccination coverage)*;
- ✓ **Strong WHO EURO and UNICEF technical collaboration and support**;
- ✓ **Regional initiative already established with good account of cross border activities and investments**
WEAKNESSES

- Lack of capacities within the programs;
- Decrease of acceptance of vaccines by populations;
- Staff demotivation (low salary, lack of funding for training etc.);
- Lack of a strategic mechanism that “pools and organizes demand plans” facilitating a continuously and timely access to quality vaccines at lower prices;
- Lack of immediate stocks and lack of access for vaccines countries during outbreaks.
Strategic Regional Approach - SEE

- Discussed in 2003 to use PAHO revolving fund model (Countries did not agree);
- Establish a permanent mechanism of cooperation;
- Strategic regional approach to ensure safe, high quality and WHO prequalified vaccines and overcome barriers related to legislation;
- Ensure timely and continuous supply;
- Ensure better prices by enlarging the market;
- Facilitate financial self sustainability and serve as a “Catalyst” for a sustainable uptake of new vaccines.
Question: Regional agreement approach, or ensuring country approach???

Answer: Feasibility study to explore the joint bulk procurement and how UNICEF can help?
New Ideas???

Thank You!