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Research for Development Conference (R4D), May 2019, Uganda

Research –to- policy and practice: the case of vaccines in Uganda

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Session outline

- Background – context for research

- Methods for research

- Role of independent knowledge managers

Objectives

- Show how the following were used to drive policy and practice on immunization in Uganda
  - Evidence (study findings)
  - Independent think tanks (NITAG)
  - Close collaboration with technical and political policy makers & technocrats (MoH, Parliament and WHO/UNICEF/GAVI)

- The Context: Costs, Systems capacity, Sustainability

Growing number of antigens and more planned – the Uganda EPI ta

Diseases	Vaccine
1. Tuberculosis	➤ BCG
2. Poliomyelitis	➤ bOPV/IPV
3. Whooping cough	➤ Pertussis (DPT-HepB + Hib)
4. Diphtheria	➤ Diphtheria (DPT-HepB + Hib)
5. Tetanus	➤ Tetanus (DPT-HepB + Hib)
6. Measles	➤ Measles
7. Neonatal Tetanus	➤ Tetanus Toxoid (for WCBA)
8. Hepatitis B infection	➤ Hepatitis B(DPT-HepB + Hib)
9. *H. Influenzae* infxns	➤ Hib (DPT-HepB + Hib)
10. Cancer of cervix	➤ HPV vaccine
11. Pneumococcal infxns	➤ pneumococcal vaccine (PCV)
12. Rotavirus,	➤ Rotavirus

New vaccine introductions

April 2013	→ PCV
November 2015	→ HPV
April 2016	→ IPV
January 2017	→ Men A campaign
June 2018	→ Rota
2019	→ Measles-Rubella

The study

- GAVI commissioned studies on immunization in country health systems

- **Goal:** To understand and quantify the barriers to, and the drivers of, immunization program improvement including the contribution of the Gavi Alliance.

- **Approach:** focused, forward-looking, country-driven, and in-depth monitoring and evaluation that complements other activities.

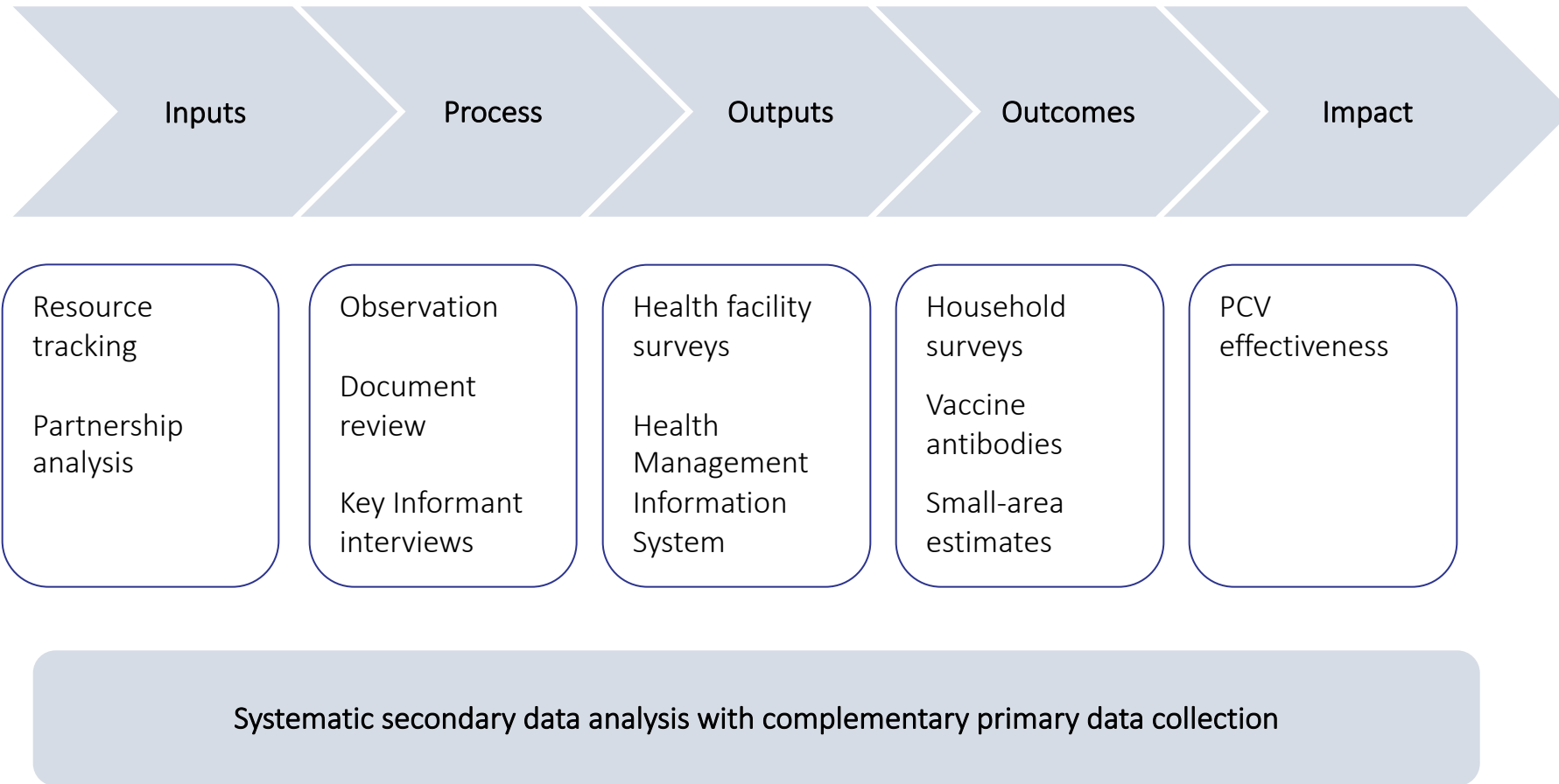- The Gavi Full Country Evaluation (FCE) –IHME, PATH, IDRC and Makerere University

Prospective monitoring & evaluation platform

Inputs	Process	Outputs	Outcomes	Impact
Resource tracking Partnership analysis	Observation Document review Key Informant interviews	Health facility surveys Health Management Information System	Household surveys Vaccine antibodies Small-area estimates	PCV effectiveness

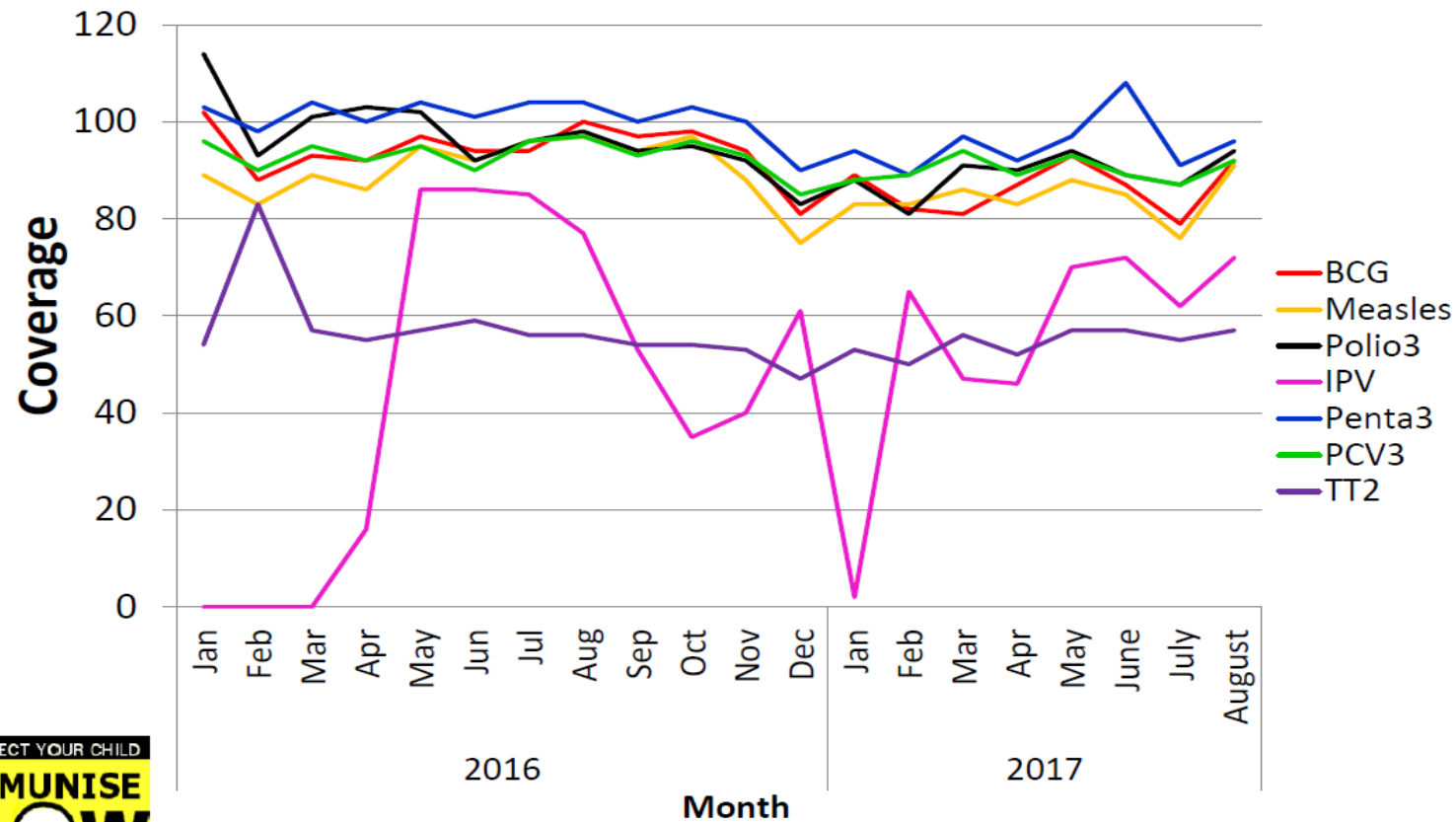Systematic secondary data analysis with complementary primary data collection

- **Findings**

Struggling program performance

EPI Performance between Jan 2016 and August 2017 – Admin data

Annual co-financing obligations in Uganda based on Gavi decision letters (in $US), 2013-2016

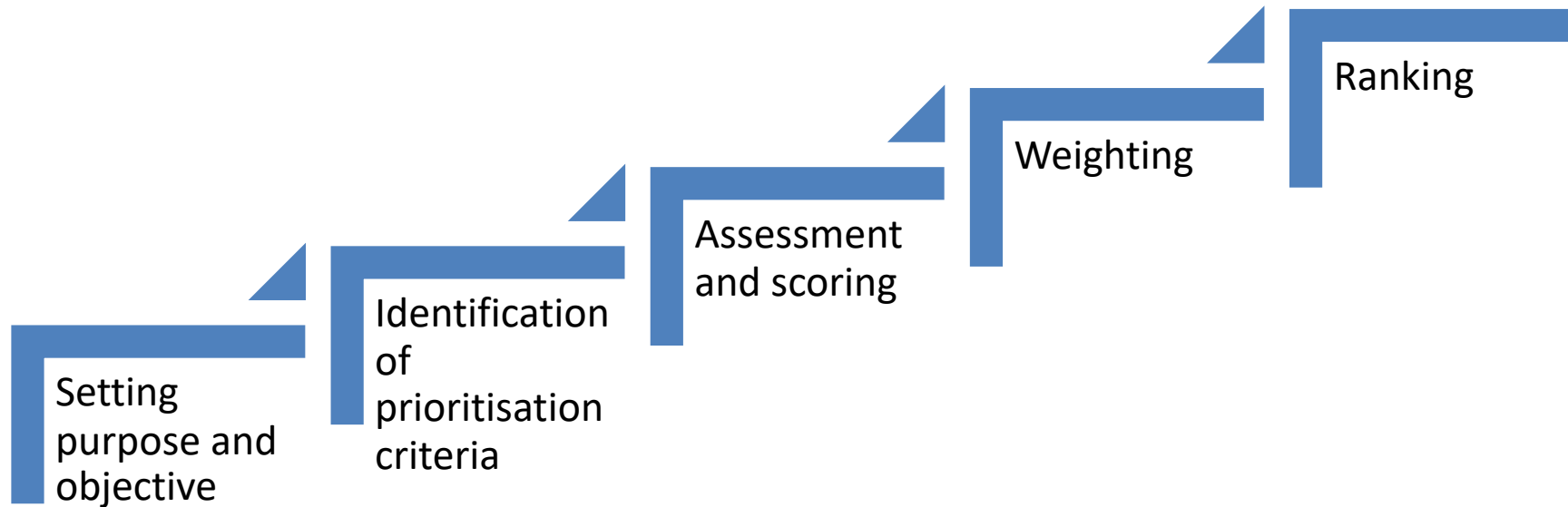**Research for Development Conference (R4D), May 2019, Uganda**

Increased co-financing obligations

Country's response:

- MOH put any new applications for new vaccine introduction on hold in 2016. NITAG was consulted for guidance on prioritizing new vaccine introductions

- Question for NITAG: Which vaccines to prioritise?

- NITAG did more research, engaged MoH and partners including parliament

12

NITAG Steps in the Prioritisation Framework

- Setting purpose and objective
- Identification of prioritisation criteria
- Assessment and scoring
- Weighting
- Ranking

The NITAG recommendations

- 4 of the 5 vaccines eligible for introduction – one not enough evidence of additional value

- Ranked vaccines and recommended conditions for their introduction eg
  - ➢First provide a sustainability plan
  - ➢First strengthen the current EPI program
  - ➢First focus on epidemic prone regions (Men A belt)
  - ➢Invest in a system that generates local evidence, etc

- Presented recommendations and government took almost all (perhaps except investing in research)

Outcomes: Policy and Program response

- Government passed a law to establish an immunisation fund but issues with implementation (also roads, HIV funds etc)

- Rationalisation of vaccine introduction