[V1.15.4]

GAVI Alliance

Annual Progress Report 2014

submitted by

the government of

Djibouti

Reporting year: **2014**
Support application for the year: **2016**
Date of presentation: **14/05/2015**

Deadline for submission: 05/27/2015

Please submit the Annual Progress Report 2014 via the online platformhttps://AppsPortal.gavialliance.org/PDExtranet

Enquiries to: apr@gavi.org or a GAVI Alliance partner representative. Documents may be provided to GAVI partners, their staff, and the general public. The APR and its appendices must be submitted in English, French, Spanish, or Russian.

Note: *Please use previous APRs and approved Proposals for GAVI support as reference documents. Electronic copies of previous annual progress reports and approved requests for support are available at the following address* http://www.gavialliance.org/country/

The GAVI Secretariat is unable to return submitted documents and attachments to the country. Unless otherwise stated, the documents will be made available to the GAVI Alliance partners and the general public.

GAVI ALLIANCE
GRANT TERMS AND CONDITIONS

FUNDING USED SOLELY FOR APPROVED PROGRAMS

The applicant country ("Country") confirms that all funding provided by the GAVI Alliance will be used and applied for the sole purpose of conducting the program(s) described in the Country's application. Any significant change in the approved program(s) must be reviewed and approved in advance by the GAVI Alliance. All funding decisions for the application are made at the discretion of the GAVI Alliance Board and are subject to the Independent Review Committee (IRC) and its processes and the availability of funds.

AMENDMENT TO THIS PROPOSAL

The Country will notify the GAVI Alliance in its Annual Progress Report if it wishes to propose any changes to the program(s) in the current application. The GAVI Alliance will document any changes that it has approved and the Country's application will be amended accordingly.

REIMBURSEMENT OF FUNDS

The Country agrees to reimburse, to the GAVI Alliance, all funding that is not used for the program(s) described in this application. The country's reimbursement must be in US dollars and be provided, unless otherwise decided by the GAVI Alliance, within sixty days after the Country receives the GAVI Alliance's request for a reimbursement. The reimbursed funds will be paid to the account or accounts as directed by the GAVI Alliance.

SUSPENSION/CANCELLATION

The GAVI Alliance may suspend all or part of its funding to the Country if it has reason to suspect that funds have been used for purposes other than for the programs described in this application, or any GAVI Alliance-approved amendment to this application. The GAVI Alliance retains the right to terminate its support to the Country for the programs described in this application if any misuse of GAVI Alliance funds is confirmed.

ANTICORRUPTION

The Country confirms that funds provided by the GAVI Alliance shall not be offered by the Country to any third person, nor will the Country accept any gifts, payments or benefits directly or indirectly related to this application, that could be construed as illegal or corrupt.

AUDITS AND RECORDS

The Country will conduct annual financial audits, and share these with the GAVI Alliance, as requested. The GAVI Alliance reserves the right, on their own or through an agent, to perform audits or other financial management assessments to ensure the accountability of funds disbursed to the Country.

The Country will maintain accurate accounting records documenting how GAVI Alliance funds are used. The Country will keep its accounting records in accordance with its government-approved accounting standards for at least three years after the date of last disbursement of the GAVI Alliance funds. If there are any claims of misuse of funds, the Country shall maintain such records until the audit findings are final. The Country agrees not to assert any documentary privilege against the GAVI Alliance in connection with any audit.

CONFIRMATION OF LEGAL VALIDITY

The Country and the signatories for the Country confirm that this support application is accurate and correct and forms legally binding obligations on the Country, under the Country's law, to conduct the programs described in this application.

CONFIRMATION REGARDING COMPLIANCE WITH THE GAVI ALLIANCE TRANSPARENCY AND ACCOUNTABILITY POLICY

The Country confirms that it is familiar with the GAVI Alliance Transparency and Accountability Policy and complies with the requirements therein.

USE OF COMMERCIAL BANK ACCOUNTS

The Country is responsible for undertaking the necessary due diligence on all commercial banks used to manage GAVI cash-based support. The Country confirms that it will take all the responsibility for replenishing GAVI cash support lost due to bank insolvency, fraud or any other unforeseen event.

ARBITRATION

Any dispute between the Country and the GAVI Alliance arising out of or relating to its application that is not settled amicably within a reasonable period of time will be submitted to arbitration at the request of either the GAVI Alliance or the Country. Arbitration will be conducted in accordance with the UNCITRAL Arbitration Rules in force. The parties agree to be bound by the arbitration award, as the final adjudication of any such dispute. The arbitration will be conducted in Geneva, Switzerland. The arbitration languages will be English or French.

For any dispute for which the amount is US$ 100,000 or less, there will be one arbitrator appointed by the GAVI Alliance. For any dispute for which the amount is greater than US $100,000, there will be three arbitrators appointed as follows: The GAVI Alliance and the Country will each appoint one arbitrator, and the two arbitrators so appointed will jointly appoint a third arbitrator who shall be the chairperson.

The GAVI Alliance will not be liable to the country for any claim or loss relating to the programs described in this application, including without limitation, any financial loss, conflicts of interest, harm to property, or personal injury or death. The country is solely responsible for all aspects of managing and implementing the programs described in this application.

By preparing this APR, the Country will inform GAVI about:

activities conducted using GAVI resources in the past year, significant problems that were

faced and how the country has tried to overcome them

meeting the accountability needs concerning the use of GAVI-disbursed funds and in-country arrangements with development partners for requesting more funds that had been approved in a previous application for ISS/NVS/HSS, but have not yet been released

how GAVI can make the APR more user-friendly while meeting GAVI's accountability and transparency principles

1. Characteristics of the support

Reporting year: **2014**

Support application for the year: **2016**

1.1. NVS AND INS SUPPORT

Type of Support	Current vaccine	Preferred presentation	Active until
New Vaccine Support (routine immunization)	Pneumococcal (PCV13), 1 dose per vial, LIQUID	Pneumococcal (PCV13), 1 dose per vial, LIQUID	2015
New Vaccine Support (routine immunization)	DTP-HepB-Hib, 2 dose(s) per vial, LYOPHILIZED	DTP-HepB-Hib, 2 dose(s) per vial, LYOPHILIZED	2015
New Vaccine Support (routine immunization)	Rotavirus, 2 dose schedule	Rotavirus, 2 dose schedule	2015

DTP-HepB-Hib (Pentavalent) vaccine: based on your country's current preferences, the vaccine is available through UNICEF in liquid form in one or ten dose vials and in the liquid/lyophilized form in two-dose vials to be used in a course of three injections. Other presentations have already been pre-selected by the WHO and the complete list can be viewed on the WHO website, but the availability of each product should be confirmed.

1.2. Extension of the Program

Type of Support	Vaccine	Start Year	End Year
New Vaccine Support (routine immunization)	Pneumococcal (PCV13), 1 dose per vial, LIQUID	2016	2018
New Vaccine Support (routine immunization)	DTP-HepB-Hib, 2 dose(s) per vial, LYOPHILIZED	2016	2018
New Vaccine Support (routine immunization)	Rotavirus, 2 dose schedule	2016	2018

1.3. ISS, HSS, CSO support

Type of Support	Reporting fund utilization in 2014	Request for approval of	Eligible for 2014 ISS reward
VIG	Yes	Not applicable	No

VIG: Allocation for the introduction of a vaccine; COS: Operational support for a campaign

1.4. Previous IRC Report

No IRC report was produced for Djibouti for the previous year.

2. Signatures

2.1. Government Signatures Page for all GAVI Support (ISS, INS, NVS, HSS, CSO)

By signing this page, the Government of Djibouti hereby attests the validity of the information provided in the report, including all attachments, annexes, financial statements and/or audit reports. The Government further confirms that vaccines, supplies, and funds were used in accordance with the GAVI Alliance Standard Grant Terms and Conditions as stated in this Annual Progress Report (APR).

For the government of Djibouti

Please note that this APR will neither be reviewed or approved by the High-level Review Committee without the signatures of both the Minister of Health & Minister of Finance or their authorized representatives.

Minister of Health (or delegated authority)		Minister of Finance (or delegated authority)	
Name	Dr. KASSIM ISSAK OSMAN	**Name**	Mr. BODEH AHMED ROBLEH
Date		**Date**	
Signature		**Signature**	

This report has been compiled by (these persons can be contacted if the GAVI Secretariat has any queries regarding this document):

Full name	Position	Telephone	E-mail
Mr. Abdallah Ahmed Hadé	EPI Technical Advisor to the Ministry	0025377825900	abdallahhade@yahoo.fr
Dr Moktar Omar Ahmed	UNICEF CSD Specialist	0025377817174	mahmedomar@unicef.org

2.2. ICC Signatures Page

If the country presents a report on the Immunization Services Support (ISS), Injection Safety (INS) and/or New and Under-Used Vaccines (NVS) supports

In some countries, the HSCC and ICC committees are merged into one committee. Please complete each relevant section and upload the signed pages of the attached documents twice, once for HSCC signatures and once for ICC signatures

The GAVI Alliance Transparency and Accountability Policy is an integral part of the GAVI Alliance's monitoring of the country's results. By signing this form the ICC members confirm that the funds received from the GAVI Alliance have been used for purposes stated within the approved application and managed in a transparent manner, in accordance with government rules and regulations for financial management.

2.2.1. ICC report endorsement

We, the undersigned members of the Inter-Agency coordinating Committee (ICC), endorse this report. Signing this document does not imply any financial (or legal) commitment on the part of the partner agency or individual.

Nom/Titre	Institution/Organisation	Signature	Date
Mr Mahad Ibrahim Hassan	Director DSPIC		
Mr Houssein Mohamed Houssein	Director Regional Health Department		
Dr Hassan Moussa	Director of Pharmaceuticals, Medicines and Laboratories		
Mr Abdourahman Houssein	Regional Health Department		
Mr Abdi Ismael	Regional Health Department		
Dr Mohamed Aden	National EPI coordinator		
Ms Deka Abdoubaker Hadi	Director PHD		
Mrs. Neima Moussa	Directorate of Maternal and Child Health		
Mr Abdallah Ahmed Hadé	EPI Advisor to the Minister		

Dr Meritxell Relano	UNICEF Representative		
Dr Konate Abdoulaye	WHO Technical officer		
Dr Moktar Omar Ahmed	UNICEF CSD Specialist		
Abdourahmana Ali	DSPIC		

The ICC may wish to send informal comments to: apr@gavi.org. All comments will be treated confidentially. Partners' observations:

Observations of the Regional Working Group:

2.3. HSCC Signatures Page

Djibouti is not submitting a report on the use of funds for Health System Strengthening (HSS) in 2014

2.4. Signatures Page for GAVI (Types A & B) support to CSOs

Djibouti is not submitting any report on the use of CSO funds (Type A and B) in 2015

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4. Baseline data and annual targets

Countries are requested to make a realistic evaluation of vaccine wastage, supported by an analysis of data collected at the national level. In the absence of specific data, the country can use the maximum wastage rates given for illustrative purposes in the **Wastage rate Table** appendix of the support request guidelines. Please note the reference wastage rate for the Pentavalent vaccine is available in ten-dose vials.

Please also note that if the country applies the WHO multi-dose vial policy for IPV, the maximum indicative wastage rates are 5%, 15% and 20% for the 1-dose, 5-dose and 10-dose presentations respectively.

Number	Preparation of joint report from the WHO/UNICEF		Targets (Preferred presentation format)							
	2014		2015		2016		2017		2018	
	Original approved target in accordance with the Decision Letter	Reported	Original approved target in accordance with the Decision Letter	Current estimates	Previous estimates in 2014	Current estimates	Previous estimates in 2014	Current estimates	Previous estimates in 2014	Current estimates
Total number of births	29,467	29,467	30,351	30,351		31,262		32,200		33,166
Total number of infant deaths	1,975	1,975	2,034	2,034		1,868		1,924		1,982
Total number of surviving infants	27,492	27,492	28,317	28,317		29,394		30,276		31,184
Total number of pregnant women	29,467	29,467	30,351	30,351		31,262		32,200		33,166
Number of infants who received (should receive) BCG vaccine	26,520	27,699	28,226	29,137		30,324		31,556		32,834
BCG coverage*[1]*	90%	94%	93%	96%	0%	97%	0%	98%	0%	99%
Number of infants who received (should receive) OPV3 vaccine	23,644	23,094	25,485	24,353		25,867		27,854		29,625
OPV3 coverage*[2]*	86%	84%	90%	86%	0%	88%	0%	92%	0%	95%
Number of infants who received (should receive) DTP1 vaccine*[3]*	24,742	24,744	26,052	25,202		27,043		28,459		30,249
Number of infants who received (should receive) the DTP3 vaccine *[3][4]*	23,644	23,094	25,485	24,353		25,867		27,854		29,625
DTP3 coverage*[2]*	86%	84%	90%	86%	0%	88%	0%	92%	0%	95%
Wastage *[5]* rate during the reference year and anticipated thereafter (%) for the DTP vaccine	15	12	15	10		10		10		10
Wastage *[5]* factor during the reference year and anticipated thereafter for the DTP vaccine	1.18	1.14	1.18	1.11	1.00	1.11	1.00	1.11	1.00	1.11
Number of infants who received (should receive) the 1st dose of DTP-HepB-Hib vaccine	25,568	24,744	26,052	25,202		27,043		28,459		30,249
Number of infants who received (should receive) the 3rd dose of DTP-HepB-Hib vaccine	24,433	23,094	25,485	24,353		25,867		27,854		29,625
DTP-HepB-Hib coverage *[2]*	89%	84%	90%	86%	0%	88%	0%	92%	0%	95%
Wastage *[5]* rate in the base-year and planned thereafter (%)	10	10	10	10		10		10		10

Number	Preparation of joint report from the WHO/UNICEF		Targets (Preferred presentation format)							
	2014		2015		2016		2017		2018	
	Original approved target in accordance with the Decision Letter	Reported	Original approved target in accordance with the Decision Letter	Current estimates	Previous estimates in 2014	Current estimates	Previous estimates in 2014	Current estimates	Previous estimates in 2014	Current estimates
Wastage *[5]* factor in the base-year and planned thereafter (%)	1.11	1.11	1.11	1.11	1	1.11	1	1.11	1	1.11
Maximum wastage rate for the DTP-HepB-Hib vaccine, 2 dose(s) per vial, LYPHILIZED	0%	10%	0%	10%	0%	10%	0%	10%	0%	10%
Number of infants who received (should receive) the 1st dose of Pneumococcal (PCV13) vaccine	25,568	24,744	26,052	25,202		27,043		28,459		30,249
Number of infants who received (should receive) the 3rd dose(s) of Pneumococcal (PCV13) vaccine	24,433	23,094	25,485	24,353		25,867		27,854		29,625
Pneumococcal (PCV13) coverage*[2]*	89%	84%	90%	86%	0%	88%	0%	92%	0%	95%
Wastage *[5]* rate in the base-year and planned thereafter (%)	5	5	5	5		5		5		5
Wastage *[5]* factor in the base-year and planned thereafter (%)	1.05	1.05	1.05	1.05	1	1.05	1	1.05	1	1.05
Maximum wastage rate for Pneumococcal (PCV13) vaccine, 1 dose(s) per vial, LIQUID	0%	5%	0%	5%	0%	5%	0%	5%	0%	5%
Number of infants who received (should receive)1st dose(s) of Rotavirusvaccine	45,532	0	26,052	25,202		27,043		28,459		30,249
Number of infants who received (yet to receive) 2nd dose(s) of Rotavirus vaccine	22,595	0	25,485	24,636		26,455		28,157		29,937
Rotavirus coverage*[2]*	82%	0%	90%	87%	0%	90%	0%	93%	0%	96%
Wastage *[5]* rate in the base-year and planned thereafter (%)	5	0	5	5		5		5		5
Wastage *[5]* factor in the base-year and planned thereafter (%)	1.05	1	1.05	1.05	1	1.05	1	1.05	1	1.05
Maximum wastage rate for Rotavirus vaccine, 2-dose schedule	0%	5%	0%	5%	0%	5%	0%	5%	0%	5%
Number of infants who received (should receive) the 1st dose of Measles Vaccine	23,094	21,445	25,202	23,220		25,279		27,248		29,313
Measles coverage *[2]*	84%	78%	89%	82%	0%	86%	0%	90%	0%	94%
Pregnant women immunized with TT+	23,279	17,680	25,495	20,032		23,134		25,116		27,196
TT+ coverage*[7]*	79%	60%	84%	66%	0%	74%	0%	78%	0%	82%

Number	Preparation of joint report from the WHO/UNICEF		Targets (Preferred presentation format)							
	2014		2015		2016		2017		2018	
	Original approved target in accordance with the Decision Letter	Reported	Original approved target in accordance with the Decision Letter	Current estimates	Previous estimates in 2014	Current estimates	Previous estimates in 2014	Current estimates	Previous estimates in 2014	Current estimates
Vit A supplement to mothers within 6 weeks of the delivery	0	0	0	0		0		0		0
Vit A supplement to infants older than 6 months	24,743	15,121	25,485	19,822	N/A	22,046	N/A	24,826	N/A	27,442
Annual DTP Drop out rate [(DTP1–DTP3)/DTP1] x100	4%	7%	2%	3%	0%	4%	0%	2%	0%	2%

[1] Number of infants vaccinated out of the total births Number of infants vaccinated out of the total number of surviving infants

[2] Indicate total number of children vaccinated with either the DTP vaccine alone or combined with others

[3] Please ensure that the DTP3 cells are correctly filled in

[4] The formula for calculating a vaccine wastage rate (as a percentage): [(A - B)/A] x 100, whereby: A = the number of doses distributed for use according to the supply records with correction for stock balance at the end of the supply period; B = the number of vaccinations with the same vaccine in the same period.

[7] Number of pregnant women vaccinated with TT+ out of the total number of pregnant women

5. General Program Management Component

5.1. Updated Baseline and Annual Targets

Note: Please fill in the table in section 4 “Baseline and Annual Targets” before you continue

The numbers for 2014 must be consistent with those that the country reported in the **WHO/UNICEF Joint Reporting Form (JRF) for immunization programs for 2014.** The figures for 2015 - 2015 in Table 4 Baseline and Annual Targets should be consistent with those that the country provided to GAVI in the previous APR or in the new application for GAVI support or in the CMYP.

In the space below, please provide an explanation of the figures in this APR that are different from those in the reference documents.

- Justification for any changes in the **number of births**

  The birth figures have been taken from the cMYP for 2011-2015. In 2015 the country will produce its cMYP for 2016-2020. Some of these figures could change. The figure for the number of surviving infants may show a decrease due to the reduction of infant mortality in Djibouti.

- Justification for any changes in **surviving infants**:

  The figure for the number of surviving infants may show a decrease due to the reduction of infant mortality in Djibouti.

- Explanation of changes in targets, per vaccine. **Please note that for targets of more than 10%, the results from previous years must be justified.** For the IPV, explanation should also be provided as attachment(s) to the APR for EACH change in target population.

  No has been no significant change in the vaccine targets.

- Justification for any changes in **Wastage by vaccine**

  No change recorded

5.2. Monitoring the implementation of the GAVI gender policy

5.2.1. Has sex-disaggregated data on the coverage of DTP3 from administrative sources and/or surveys been available in your country over the past five years? **No, not available**

If yes, please provide us with the latest data available and indicate the year in which this data was collected.

Data Source	Reference Year for Estimates	DTP3 coverage estimate	
		Boys	Girls

5.2.2. How have you been using the above data to address gender-related barriers to access to immunization?

All children are immunized and cared for in the same way. There is no gender preference.

5.2.3. If no sex-disaggregated data is available at the moment, do you plan in the future to collect sex-disaggregated data in routine immunization reports? **Not selected**

5.2.4. How were the potential gender-related barriers to the access and implementation of immunization services (for example, mothers having no access to the services, the gender of service provider, etc.) resolved from the program point of view? (For more information on these gender-related barriers, refer to the GAVI "Gender and Immunization" sheet at http://www.gavialliance.org/fr/librairie/)

The countries are genuinely committed to resolving this issue and this is demonstrated by the various measures that have been taken by the Government. In fact, women are well represented in the National Assembly and other decision-making bodies (there are more women leaders in government and in public departments).

For basic education boys and girls are treated equally.

5.3. Overall Expenditure and Financing for Immunization

The purpose of **Table 5.3a** is to guide GAVI understanding of the broad trends in the immunization program expenditure and financial flow. Please complete the table using US$.

Exchange rate used	1 US$ = 177

Only enter the exchange rate; do not enter the name of the local currency

Table 5.3a: Overall Expenditure and Financing for Immunization from all sources (Government and donors) in US$.

Expenditure by Category	Expenditure Year 2014	Funding source						
		Country	GAVI	UNICEF	WHO	JICA	USAID	WB
Traditional vaccines*	55,000	0	0	55,000	0	0	0	0
New and Under-used Vaccines (NVS)**	286,512	49,032	237,480	0	0	0	0	0
Injection material (AD syringes and others)	22,300	0	11,000	11,300	0	0	0	0
Cold Chain equipment	177,260	72,198	0	105,062	0	0	0	0
Staff	335,641	335,641	0	0	0	0	0	0
Other routine recurrent costs	1,354,560	1,219,535	0	119,090	15,935	0	0	0
Other Capital Costs	58,978	38,978	0	20,000	0	0	0	0
Campaigns costs	263,081	0	0	74,305	188,776	0	0	0
NONE		0	0	0	0	0	0	0
Total Expenditures for Immunization	2,553,332							
Total Government Health expenditures		1,715,384	248,480	384,757	204,711	0	0	0

Traditional vaccines: BCG, DTP, OPV, 1st of measles vaccine (or the combined MR, MMR), TT. Some countries will also include Herb and Hib vaccines in this row, if these vaccines were introduced without GAVI support.

5.4. Inter-Agency Coordination Committee (ICC)

How many times did the ICC meet in 2014? **5**

Please attach the minutes **(Document No. 4)** from the ICC 2015 meeting that endorsed this report.

List the principal concerns or recommendations, if any, made by the ICC on sections 5.1 Reference data and annual targets carried out to 5.3 Overall Immunization Expenditure and Funding

Are any Civil Society Organizations members of the ICC? **Yes**
If yes, which ones?

List CSO members of the ICC:
National Union of Djiboutian Women (UNFD)
ASSOCIATION BENDER DJEDID
The Djibouti Red Cross

5.5. Priority actions in 2015 to 2016

What are the country's main objectives and priority activities for its EPI program from 2015 to 2016?

- Prepare the cMYP 2016-2020
- Organize Supplementary Immunization Activities (SIAs) for children not vaccinated, or only partially vaccinated, in remote areas.
- Organize active searches of those lost-to-view to the EPI in suburban areas of Djibouti City, with the help of the community.
- Set up vaccination posts at the entry points
- Organize Child Health days
- Organize a World Immunization Week
- Organize National Polio and Measles Immunization Days
- Improve the active monitoring of EPI target diseases, especially PFA, at all levels.
- Train health workers on the use of managements tools , the monitoring of EPI activities and monitoring of vaccination coverage
- Ensure regular maintenance of the solar-powered cold chain in the healthcare regions
- Equip the new health posts with solar power to provide sufficient vaccine storage
- Carry out regular supervisory training
- Set up a reporting system (alerts) to catch any adverse vaccination reactions or incidents in the healthcare facilities
- Implement the annual communication and mobilization plans for routine and supplementary immunization activities
- Update the communication strategy to promote vaccination programs
- Introduce the IPV vaccine, in accordance with the introduction plan
- Conduct a risk analysis for neonatal tetanus
- Conduct a post-introduction evaluation of the two new vaccines (PCV13 and Rotarix)
- Train the officials responsible for EPI and depots in the best practice of management for monitoring vaccines, consumables and the cold-chain at all levels
- Improve the AEFI management system

5.6. Progress of transition plan for injection safety

All countries are required to report on the progress of the transition plan for Injection Safety. Please report what types of syringes are being used and the sources of funding for Injection Safety equipment in 2014

Vaccine	Types of syringes used in the 2014 routine EPI	Funding sources in 2014
FR BCG	AD syringes 0.05 ml	UNICEF
FR Measles	AD syringes 0.5 ml	UNICEF
FR TT	AD syringes 0.5 ml	UNICEF
FR DTP-containing vaccine	AD syringes 0.5 ml	UNICEF
IPV	not yet introduced	
DTP-HepB-Hib	AD syringes 0.5 ml	GAVI/Government
Pneumococcal (PCV13)	AD syringes 0.5 ml	GAVI/Government

Does the country have an injection safety policy/plan? **Yes**

If Yes: Have you encountered any obstacles during the implementation of this injection safety policy/plan?

If No: When will the country develop the injection safety policy? (Please report in the box below)

With regard to injection safety, all healthcare facilities have adequate quantities of Auto-Disable syringes and safety boxes. The service providers are regularly trained and re-trained on injection safety. In the Health regions each center has an incinerator of its own. However, in the capital medical waste has to be collected and transported to incineration units. A new incinerator will be purchased and installed in the capital.

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Please explain how sharps have been eliminated in 2014, what were the problems faced, etc.

All used syringes and needles are put in the safety boxes, which are then incinerated.

Other waste materials are collected in garbage bags and destroyed in the same way. In Djibouti city, a hygiene service unit is responsible for the collection and destruction of sharps and syringes. All healthcare facilities have an adequate number of safety boxes.

6. Immunization Services Support (ISS)

6.1. Report on the use of ISS funds in 2014

Djibouti is not reporting on the use of Immunization Services Support (ISS) funds for 2014

6.2. Detailed expenditure of ISS funds during the calendar year

Djibouti is not reporting on the use of Immunization Services Support (ISS) funds for 2014

6.3. Request for ISS reward

The request for expected ISS reward is not applicable does not apply to Djibouti for 2014.

7. Support for New and Under-used Vaccines (NVS)

7.1. Receipt of new & under-used vaccines for the 2014 immunization program

7.1.1. Did you receive the approved amount of vaccine doses for the immunization program in 2014 that GAVI specified in their Decision Letter? Please fill the table below

Table 7.1: Vaccines actually received in 2014 compared to the quantity approved for 2014.

Please also include any deliveries from the previous year received against this same Decision Letter.

	[A]	[B]	[C]	
Vaccine Type	**Total doses for 2014 in the Decision Letter**	**The number of total doses received by December 31, 2014**	**Total doses postponed from previous years and received in 2014**	**Has the country experienced a stock-out at any level in 2014?**
Pneumococcal (PCV13)	21,600	18,000	18,000	No
DTP-HepB-Hib	71,800	64,300	64,300	No
Rotavirus	58,500	52,500	52,500	No

If numbers [A] and [B] are different, specify:

- What were the main problems encountered? (Was the lower than anticipated vaccine utilization due to a delay in the introduction of a new vaccine or lower coverage? Delay in shipments? Stock-outs? Excessive stocks? Problems with the cold chain? Doses discarded because the VVM changed color or because of the expiry date?)

The total amount of doses expected is equal to the doses received with GAVI support and those purchased by the country with co-financing. Therefore, there is no differences between the total number of doses expected and received

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- What actions have you taken to improve vaccine management, e.g. such as amending the schedule for vaccine deliveries? (within the country and with the UNICEF Supply Division)

GAVI would also appreciate feedback from countries on the feasibility and interest of selecting and being sent multiple Pentavalent vaccine presentations (1 dose and 10 dose vials) so as to reduce wastage and cost to a minimum, and maximize coverage.

Around September, the country should estimate the routine and campaign vaccine requirements on the basis of existing stocks. The vaccines are sent to the country through the UNICEF supply chain.

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On arrival the vaccines are immediately sent on to the EPI central depot.

Vaccines are then distributed to the different healthcare centers in Djibouti City and the healthcare regions, in accordance with a detailed plan for vaccine distribution.

In 2014, an assessment of the management of vaccines was carried out and an improvement plan developed, which is currently being implemented. (See section 7.5).

To ensure better conservation of the vaccines, the cold chain at the healthcare stations equipped with solar energy are subject to twice-yearly maintenance.

If **Yes** marked for any vaccine in **Table 7.1,** indicate the duration, reason, and impact of stock-out including stock-out at central, regional, district or a lower level.

7.2. Introduction of a New Vaccine in 2014

7.2.1. If you have been approved by GAVI to introduce a new vaccine in 2014, please refer to the vaccine introduction plan in the proposal approved and report on progress:

Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID		
Nationwide introduction	Yes	06/12/2012
Phased introduction	No	
Was the time and scale of the introduction as planned in the proposal? If No, Why ?	No	See APR 2013

When will the post-introduction evaluation (PIE) be carried out? **September 2016**

Rotavirus, 1 dose(s) per vial, ORAL		
Nationwide introduction	Yes	20/06/2014
Phased introduction	No	
Was the time and scale of the introduction as planned in the proposal? If No, Why ?	No	In the introduction plan the initial date for the introduction of the Rota virus vaccine was scheduled for June 2013 but was postponed. Finally, the new vaccine was introduced in June, with an official launch attended by the country's Prime Minister and government ministers

When will the post-introduction evaluation (PIE) be carried out? **September 2016**

DTP-HepB-Hib, 2 dose(s) per vial, LYOPHILIZED		
Nationwide introduction	Yes	01/08/2007
Phased introduction	No	
Was the time and scale of the introduction as planned in the proposal? If No, Why ?	Yes	

When is it planned to do the Post introduction evaluation (PIE)? **May 2009**

7.2.2. If your country carried out a PIE in the past two years, please attach the relevant reports and provide a summary on the status of the implementation of any recommendations given in the PIE. (Document No.9))

The last post-introduction evaluation was carried out in 2009.

7.2.3. Adverse Events Following Immunization (AEFI)

Is there a national system dedicated to vaccinal pharmacovigilence? **Yes**

Is there a national AEFI expert review committee? **No**

Does the country have an institutional development plan for vaccine safety? **Yes**

Is the country sharing its vaccine safety data with other countries? **No**

Has your country implemented a risk communication strategy, along with national preparedness plans, to deal with possible immunization issues? **No**

7.2.4. Supervision

Has your country set up a sentinel monitoring system for:

a. rotavirus diarrhea? **No**

b. bacterial meningitis or pneumococcal or meningococcal disease in children? **Yes**

Has your country carried out any specific studies on:

a. Rotavirus diarrhea? **No**

b. Bacterial meningitis or pneumococcal or meningococcal disease in children? **No**

If yes, does the National Technical Advisory Group on Immunization (ITAG) or the Interagency Coordinating Committee (ICC) regularly examine the data from national sentinel surveillance systems and from special studies to make recommendations on the quality of data produced and on how to further improve the quality of the data? **No**

Are you planning to use the data from national sentinel surveillance and special studies to monitor and assess the impact of the introduction and use of vaccines?

No

Please describe the results of monitoring/special studies and NITAG/ICC contributions:

There is no specific surveillance system in place for these diseases, but for meningitis, the Pediatric department of the General hospital of Pettier, with the collaboration of the National Institute For Public Health (NIPH), monitors suspected cases and takes samples in order to isolate any meningitis bacterial strains. If there is a significant number of cases, the NITAG committee should be consulted for advice.
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7.3. Lump sum allocation for the introduction of a new vaccine in 2014

7.3.1. Financial Management Report

	Amount in US$	Amount in local currency
Funds received in 2014 (A)	0	0
Balance of funds carried forward from 2013	60,457	10,683,177
Total Available Funds in 2014 (C=A+B)	60,457	10,683,177
Total expenditure in 2014(D)	37,686	6,670,402
Balance carried over to 2015 (E=C-D)	22,771	4,012,775

Detailed expenditure from the New Vaccines Introduction Grant funds during the calendar year 2014

Please attach a detailed financial statement for the use of ISS funds during the calendar year 2014 (Document No. 10, 11). The terms of reference for this financial statement are attached in **Annex 1.** Financial statements should be signed by the Finance Manager of the EPI Program and the EPI Manager, or by the Permanent Secretary of Ministry of Health.

7.3.2. Program Report

Please report on major activities that have been undertaken in relation to the introduction of a new vaccine, using the GAVI New Vaccine Introduction Grant.

- Training for those involved in community awareness, in the rotavirus vaccine against diarrhea <?xml: /1amespace prefix = "o" ns = "urn: /1chemas-microsoftcom: /1ffice: /1ffice" />
- increasing the capacity of the Cold chain in rural areas by the installation of solar panels.
- Production of educational materials (posters, leaflets, training modules , brochures etc.)
- Social mobilization in villages, neighborhoods with local social organizations
- Production of management materials (daily collection sheets, schedules, record books, stock record forms etc).
- Distributions of vaccines and accessories to all organizations involved.
- Training of professionals in the Rota virus for diarrhea at all levels of the health system

Please describe any problem encountered in the implementation of the planned activities.

- There were no serious problems.

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Please describe the activities that will be undertaken with the balance of funds carried forward to 2015

- Surveillance and monitoring of vaccination programs. <?xml: /1amespace prefix = "o" ns = "urn: /1chemas-microsoft-com: /1ffice: /1ffice" />
- Research and investigation of cases of PFA and measles.
- Monitoring immunization coverage, vaccine wastage and the acceptance of the rotavirus vaccine by users.
- Searching for those lost-to-view between doses.
- Improve supervision at all levels by providing supervisors with checklists on injection safety, vaccination best practices and vaccines

7.4. Report on country co-financing in 2014

Table 7.4: Five questions on country co-financing

	Q.1: What were the actual co-financed amounts and doses in 2014?	
Co-Financed Payments	**Total Amount in US$**	**Total Amount in Doses**
Selected vaccine #1: Pneumococcal (PCV13), 1 dose per vial, LIQUID	5,940	1,800
Selected vaccine #2: Rotavirus, 1 dose(s) per vial, ORAL	15,360	6,000
Selected vaccine #3: DTP-HepB-Hib, 2 dose(s) per vial, LYOPHILIZED	14,700	7,000
	Q.2: What were the shares of country co-financing during the reporting year 2014 from the following sources?	
Government	49,032	
Donor		
Others		
	Q.3: Did you procure related injection supplies for the co-financing vaccines? What were the amounts in US$ and in supplies?	
Co-Financed Payments	**Total Amount in US$**	**Total Amount in Doses**
Selected vaccine #1: Pneumococcal (PCV13), 1 dose per vial, LIQUID		1,400
Selected vaccine #2: Rotavirus, 1 dose(s) per vial, ORAL	0	0
Selected vaccine #3: DTP-HepB-Hib, 2 dose(s) per vial, LYOPHILIZED		7,200
	Q.4: When do you intend to transfer funds for co-financing in 2016 and what is the expected source of this funding?	
Schedule of Co-Financing Payments	Proposed Payment Date for 2016	Funding source
Selected vaccine #1: Pneumococcal (PCV13), 1 dose per vial, LIQUID	September	Budget Ministry
Selected vaccine #2: Rotavirus, 1 dose(s) per vial, ORAL	September	Budget Ministry
Selected vaccine #3: DTP-HepB-Hib, 2 dose(s) per vial, LYOPHILIZED	September	Budget Ministry

	Q.5: Please state any Technical Assistance needs for developing financial sustainability strategies, mobilizing funding for immunization, including for co-financing.
	We would like technical assistance to develop mobilization strategies.

***Note:** cofinancing is not mandatory for the IPV

Is GAVI's support, in relation to new or under-used vaccines and supply of injections, reported in the national health sector budget? **No**

7.5. Vaccine Management (EVSM/EVM/VMA)

Please note that Effective Vaccine Store Management (EVSM) and Vaccine Management Assessment (VMA) tools have been replaced by an integrated Effective Vaccine Management (EVM) tool. The information on the EVM tool can be found at
http://www.who.int/immunization/programmes_systems/supply_chain/evm/en/index3.html

It is mandatory for the countries to conduct a EVM prior to an application for the introduction of a new vaccine. This assessment concludes with an Improvement Plan including activities and timelines. The progress of the implementation of this plan is reported in the Annual Progress Report. The EVM assessment is valid for a period of three years.

When was the latest Effective Vaccine Management (EVM) or an alternative assessment (EVSM/VMA) carried out? **August 2014**

Please attach the following documents:

a) the EVM assessment **(Document No 12)**

b) Improvement plan after EVM **(Document No. 13)**

c) Progress report on the activities implemented during the year and the status of implementation of the recommendations from the Improvement Plan **(Document No. 14)**

Progress reports on the EVM/VMA/ EVSM Improvement Plan' is a mandatory requirement

Have there been any changes in the Improvement plan, and why? **Non** If yes, give details

When is the next Effective Vaccine Management (EVM) assessment planned? **October 2017**

7.6. Monitoring GAVI Support for Preventive Campaigns in 2014

Djibouti is not reporting on NVS prevention campaign

7.7. Change in vaccine presentation

Djibouti does not require any changes in the vaccine presentation in the coming years.

7.8. Renewal of multi-year vaccine support for those countries whose current support is ending in 2015

If 2015 is the last year of approved multi-year support for a vaccine and the country wishes to extend the GAVI support, the country must apply for an extension of the co-funding agreement with GAVI for vaccine support commencing from2016 and for the duration of a new comprehensive multi-year plan (cMYP).

The country hereby requests an extension of GAVI support for the years 2016 to 2020 for the following vaccines:

* **Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID**
* **Rotavirus, 2 dose schedule**
* **DTP-HepB-Hib, 2 dose(s) per vial, LYOPHILIZED**

At the same time it commits itself to co-finance the procurement of the following vaccines in accordance with the minimum Gavi co-financing levels as summarised in section 7.11 Calculation of requirements.

* **Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID**
* **Rotavirus, 2 dose schedule**
* **DTP-HepB-Hib, 2 dose(s) per vial, LYOPHILIZED**

The multi-year support extension is in line with the new cMYP for the years 2016 to 2020, which is attached to this APR (Document N°**16**). The new costing tool is also attached (Document No. **17**) for the following vaccines:

* **Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID**
* **Rotavirus, 2 dose schedule**
* **DTP-HepB-Hib, 2 dose(s) per vial, LYOPHILIZED**

The country ICC has endorsed this request for extended support of the following vaccines at the ICC meeting whose minutes are attached to this APR. (Document No. **18**)

* **Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID**
* **Rotavirus, 2 dose schedule**
* **DTP-HepB-Hib, 2 dose(s) per vial, LYOPHILIZED**

7.9. Request for continued support for vaccines for 2016 immunization program

In order to request NVS for vaccination in 2016 do the following:

Confirm here below that your request for 2016 vaccines support is as per table 7.11 Calculation of requirements **Yes**

If you do not confirm, please explain:

7.10. Weighted average prices of supplies and related freight costs

Table 7.10.1: Commodities Cost

The estimated cost of supplies is not disclosed

Table 7.10.2: Freight cost

Vaccine Antigens	Vaccine Type	2007	2008	2009	2010	2011	2012	2013
Pneumococcal (PCV13), 1 dose per vial, LIQUID	Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID							
Rotavirus, 2 dose schedule	Rotavirus, 2 dose schedule							
DTP-HepB-Hib, 2 dose(s) per vial, LYOPHILIZED	DTP-HepB-Hib, 2 dose(s) per vial, LYOPHILIZED							

Vaccine Antigens	Vaccine Type	2014	2015	2016	2017	2018
Pneumococcal (PCV13), 1 dose per vial, LIQUID	Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID	4.40%	4.50%	3.00%	4.50%	4.60%
Rotavirus, 2 dose schedule	Rotavirus, 2 dose schedule	3.90%	4.20%	4.40%	4.40%	4.40%
DTP-HepB-Hib, 2 dose(s) per vial, LYOPHILIZED	DTP-HepB-Hib, 2 dose(s) per vial, LYOPHILIZED	3.40%	3.50%	3.40%	3.60%	3.60%

7.11. Calculation of requirements

Table 7.11.1: Characteristics for DTP-HepB-Hib, 2 dose(s) per vial, LYOPHILIZED

ID		Source		2014	2015	2016	2017	2018	TOTAL
	Number of surviving infants	Parameter	#	27,492	28,317	29,394	30,276	31,184	146,663
	Number of children to be vaccinated with the first dose	Parameter	#	25,568	26,052	27,043	28,459	30,249	137,371
	Number of children to be vaccinated with the third dose	Parameter	#	24,433	25,485	25,867	27,854	29,625	133,264
	Immunization coverage with the third dose	Parameter	%	88.87%	90.00%	88.00%	92.00%	95.00%	
	Number of doses per child	Parameter	#	3	3	3	3	3	
	Estimated vaccine wastage factor	Parameter	#	1.11	1.11	1.11	1.11	1.11	
	Stock in Central Store Dec 31, 2014		#	62,812					

	Stock across second level Dec 31, 2014 (if available)*		#						
	Stock across third level Dec 31, 2014 (if available)*	Parameter	#						
	Number of doses per vial	Parameter	#		2	2	2	2	
	Number of AD syringes required	Parameter	#		Yes	Yes	Yes	Yes	
	Number of reconstitution syringes required	Parameter	#		Yes	Yes	Yes	Yes	
	Number of safety boxes required	Parameter	#		Yes	Yes	Yes	Yes	
cc	**Country co-financing per dose**	Parameter	$		0.30	0.30	0.35	0.40	
ca	**AD syringe price per unit**	Parameter	$		0.0448	0.0448	0.0448	0.0448	
cr	**Reconstitution syringe price per unit**	Parameter	$		0	0	0	0	
cs	**Safety box price per unit**	Parameter	$		0.0054	0.0054	0.0054	0.0054	
fv	**Freight cost as % of vaccines value**	Parameter	%		3.50%	3.40%	3.60%	3.60%	
fd	**Freight cost as % of material value**	Parameter	%						

* Please describe the method used for stock count in the text box below. We assume the closing stock (Dec 31, 2014) is the same as the opening stock (Jan 1, {1}). If there is a difference, please provide details in the text box below.

For Pentavalent vaccines, GAVI applies an indicator of 4.5 months of buffer stock + operational stock. The countries must indicate their needs in terms of buffer stock + operational stock, if they are different from the indicator for up to a maximum of 6 months. If you need help to calculate the levels of buffer and operational stocks, please contact the WHO or UNICEF. By default, the pre-selection provides a buffer stock+ operational stock for 4.5 months. **Not defined**

Cofinancing table for DTP-HepB-Hib, 2 dose(s) per vial, LYOPHILIZED

Co-financing group	Intermediate

	2014	**2015**	**2016**	**2017**	**2018**
Minimum co-financing	0.23	0.26	0.30	0.35	0.40
Recommended co-financing as per			0.30	0.35	0.40
Your co-financing	0.23	0.30	0.30	0.35	0.40

Table 7.11.2: Estimated GAVI support and country co-financing (**GAVI support**)

		2014	2015	2016	2017	2018
Number of vaccine doses	#	64,300	54,900	63,800	105,700	108,800
Number of AD syringes	#	62,500	52,400	62,100	107,800	111,000
Number of reconstitution syringes	#	35,500	30,300	35,100	58,200	59,800
Number of safety boxes	#	1,100	925	725	1,175	1,200
Total value to be co-financed by GAVI	$	144,000	113,000	123,000	204,000	209,500

Table 7.11.3: Estimated GAVI support and country co-financing (**Country support**)

		2014	2015	2016	2017	2018
Number of vaccine doses	#	7,500	9,400	11,900	23,500	28,500
Number of AD syringes	#	7,200	9,000	11,500	24,000	29,100
Number of reconstitution syringes	#	4,100	5,200	6,500	12,900	15,700
Number of safety boxes	#	150	175	150	275	325
Total value of country co-financing*[1]*	$	17,000	19,500	23,000	45,500	55,000

Table 7.11.4 Calculation of requirements for DTP-HepB-Hib, 2 dose(s) per vial, LYOPHILIZED (part 1)

		Formula	2014	2015		
				Total	Government	GAVI
A	Country co-financing	*V*				
B	Number of children to be vaccinated with the first dose	*Table 4*	25,568	26,052		
B 1	Number of children to be vaccinated with the third dose	*Table 4*	24,433	26,052		
C	Number of doses per child	*The immunization schedule*	3	3		
D	Number of doses required	*B + B1 + Target for the 2nd dose ((B -0.41 x (B - B1))*	75,105	77,357		
E	Estimated vaccine wastage factor	*Table 4*	1.11	1.11		
F	Number of doses required taking wastage into account	*D x E*		85,866		
G	Buffer stock of vaccines	***Buffer on doses needed*** *+* ***buffer on doses wasted*** ***Buffer on doses needed*** *= (D - D of previous year original approved) x 0,375* ***Buffer on doses wasted*** *=* • *<u>if(wastage factor of previous year current estimation < wastage factor of previous year original approved):</u> ((F - D) - ((F - D) of previous year original approved - (F - D) of previous year current estimation)) x 0,375* • *<u>else:</u> (F - D - ((F - D) of previous year original approved)) x 0,375 >= 0*				
H	Stock to be deducted	*H1 - (F (2015) current estimation x 0.375)*				
H 1	Initial stock calculated	*H2 (2015) + H3 (2015) - F (2015)*				
H 2	Stock on 1st January	*Table 7.11.1*	57,858	62,812		
H 3	Dispatch schedule	*Approved volume*		64,300		
I	Total vaccine doses required	*Rounding ((F + G - H) / vaccine pack size) x vaccine pack size*		64,300		
J	Number of doses per vial	*Vaccine parameter*				
K	Number of Auto-disable syringes required (+10% wastage)	*(D + G – H) x 1.10*				
L	Number of Reconstitution syringes required (+10% wastage)	*(I / J) x 1.10*				
M	Total number of safety boxes required (10% extra)	*(I / 100) x 1.10*				
N	Cost of the required vaccines	*I x price of vaccine per dose (g)*				
O	Cost of the required AD syringes	*K x AD syringe price per unit (ca)*				
P	Cost of the required reconstitution syringes	*L X Reconstitution syringe price per unit (cr)*				
Q	Cost of the safety boxes required	*M X unit price of safety boxes (cs)*				
R	Freight cost of the required vaccines	*N x Freight cost as % of vaccine value (fv)*				
S	Freight cost of the required material	*(O+P+Q) x Freight cost as % of the value of supplies (fd)*				

Table 7.11.4: Calculation of requirements for DTP-HepB-Hib, 2 dose(s) per vial, LYOPHILIZED

T	**Total funds required**	*(N+O+P+Q+R+S)*				
U	**Total country co-financing**	*I x Country co-financing per dose (cc)*				
V	**Country co-financing % of GAVI supported proportion**	*U / T*				

As the delivery schedule for 2014 is not yet available, the volume approved for 2014 is used as the best estimate of the delivery schedule in 2014. The information will be updated when the delivery schedule is available.

As the delivery schedule for 2014 is not yet available, the volume approved for 2014 is used as the best estimate of the delivery schedule in 2014. The information will be updated when the delivery schedule is available.

Table 7.11.4 Calculation of requirements for DTP-HepB-Hib, 2 dose(s) per vial, LYOPHILIZED (part 2)

		Formula	2016		
			Total	Government	GAVI
A	**Country co-financing**	*V*	15.62%		
B	**Number of children to be vaccinated with the first dose**	*Table 4*	27,043	4,224	22,819
B 1	**Number of children to be vaccinated with the third dose**	*Table 4*	25,867	4,040	21,827
C	**Number of doses per child**	*The immunization schedule*	3		
D	**Number of doses required**	*B + B1 + Target for the 2nd dose ((B -0.41 x (B - B1))*	79,471	12,411	67,060
E	**Estimated vaccine wastage factor**	*Table 4*	1.11		
F	**Number of doses required taking wastage into account**	*D X E*	88,213	13,777	74,436
G	**Buffer stock of vaccines**	***Buffer on doses needed*** *+* ***buffer on doses wasted*** ***Buffer on doses needed*** *= (D - D of previous year original approved) x 0,375* ***Buffer on doses wasted*** *=* • *if(wastage factor of previous year current estimation < wastage factor of previous year original approved): ((F - D) - ((F - D) of previous year original approved - (F - D) of previous year current estimation)) x 0,375* • *else: (F - D - ((F - D) of previous year original approved)) x 0,375 >= 0*	881	138	743
H	**Stock to be deducted**	*H1 - (F (2015) current estimation x 0.375)*	13,547	2,116	11,431
H 1	**Initial stock calculated**	*H2 (2015) + H3 (2015) - F (2015)*	44,519	6,953	37,566
H 2	**Stock on 1st January**	*Table 7.11.1*			
H 3	**Dispatch schedule**	*Approved volume*			
I	**Total vaccine doses required**	*Rounding ((F + G - H) / vaccine pack size) x vaccine pack size*	75,600	11,807	63,793
J	**Number of doses per vial**	*Vaccine parameter*	2		
K	**Number of Auto-disable syringes required (+10% wastage)**	*(D + G – H) x 1.10*	73,486	11,477	62,009
L	**Number of Reconstitution syringes required (+10% wastage)**	*(I / J) x 1.10*	41,580	6,494	35,086
M	**Total number of safety boxes required (10% extra)**	*(I / 100) x 1.10*	832	130	702
N	**Cost of the required vaccines**	*I x price of vaccine per dose (g)*	135,854	21,217	114,637
O	**Cost of the required AD syringes**	*K x AD syringe price per unit (ca)*	3,293	515	2,778
P	**Cost of the required reconstitution syringes**	*L X Reconstitution syringe price per unit (cr)*	1,456	228	1,228
Q	**Cost of the safety boxes required**	*M X unit price of safety boxes (cs)*	5	1	4
R	**Freight cost of the required vaccines**	*N x Freight cost as % of vaccine value (fv)*	4,620	722	3,898

Table 7.11.4: Calculation of requirements for DTP-HepB-Hib, 2 dose(s) per vial, LYOPHILIZED

S	**Freight cost of the required material**	*(O+P+Q) x Freight cost as % of the value of supplies (fd)*	0	0	0
T	**Total funds required**	*(N+O+P+Q+R+S)*	145,228	22,680	122,548
U	**Total country co-financing**	*I x Country co-financing per dose (cc)*	22,680		
V	**Country co-financing % of GAVI supported proportion**	*U / T*	15.62%		

As the delivery schedule for 2014 is not yet available, the volume approved for 2014 is used as the best estimate of the delivery schedule in 2014. The information will be updated when the delivery schedule is available.

Table 7.11.4 Calculation of requirements for DTP-HepB-Hib, 2 dose(s) per vial, LYOPHILIZED (part 3)

		Formula	2017		
			Total	Government	GAVI
A	**Country co-financing**	*V*	18.17%		
B	**Number of children to be vaccinated with the first dose**	*Table 4*	28,459	5,170	23,289
B 1	**Number of children to be vaccinated with the third dose**	*Table 4*	27,854	5,060	22,794
C	**Number of doses per child**	*The immunization schedule*	3		
D	**Number of doses required**	*B + B1 + Target for the 2nd dose ((B -0.41 x (B - B1))*	84,524	15,355	69,169
E	**Estimated vaccine wastage factor**	*Table 4*	1.11		
F	**Number of doses required taking wastage into account**	*D X E*	93,822	17,044	76,778
G	**Buffer stock of vaccines**	***Buffer on doses needed*** *+* ***buffer on doses wasted*** ***Buffer on doses needed*** *= (D - D of previous year original approved) x 0,375* ***Buffer on doses wasted*** *=* • *if(wastage factor of previous year current estimation < wastage factor of previous year original approved): ((F - D) - ((F - D) of previous year original approved - (F - D) of previous year current estimation)) x 0,375* • *else: (F - D - ((F - D) of previous year original approved)) x 0,375 >= 0*	35,184	6,392	28,792
H	**Stock to be deducted**	*H1 - (F (2015) current estimation x 0.375)*			
H 1	**Initial stock calculated**	*H2 (2015) + H3 (2015) - F (2015)*			
H 2	**Stock on 1st January**	*Table 7.11.1*			
H 3	**Dispatch schedule**	*Approved volume*			
I	**Total vaccine doses required**	*Rounding ((F + G - H) / vaccine pack size) x vaccine pack size*	129,100	23,452	105,648
J	**Number of doses per vial**	*Vaccine parameter*	2		
K	**Number of Auto-disable syringes required (+10% wastage)**	*(D + G – H) x 1.10*	131,679	23,921	107,758
L	**Number of Reconstitution syringes required (+10% wastage)**	*(I / J) x 1.10*	71,005	12,899	58,106
M	**Total number of safety boxes required (10% extra)**	*(I / 100) x 1.10*	1,421	259	1,162
N	**Cost of the required vaccines**	*I x price of vaccine per dose (g)*	231,993	42,143	189,850
O	**Cost of the required AD syringes**	*K x AD syringe price per unit (ca)*	5,900	1,072	4,828
P	**Cost of the required reconstitution syringes**	*L X Reconstitution syringe price per unit (cr)*	2,486	452	2,034

As the delivery schedule for 2014 is not yet available, the volume approved for 2014 is used as the best estimate of the delivery schedule in 2014. The information will be updated when the delivery schedule is available.

Q	**Cost of the safety boxes required**	*M X unit price of safety boxes (cs)*	8	2	6
R	**Freight cost of the required vaccines**	*N x Freight cost as % of vaccine value (fv)*	8,352	1,518	6,834
S	**Freight cost of the required material**	*(O+P+Q) x Freight cost as % of the value of supplies (fd)*	0	0	0
T	**Total funds required**	*(N+O+P+Q+R+S)*	248,739	45,185	203,554
U	**Total country co-financing**	*I x Country co-financing per dose (cc)*	45,185		
V	**Country co-financing % of GAVI supported proportion**	*U / T*	18.17%		

Table 7.11.4: Calculation of requirements for DTP-HepB-Hib, 2 dose(s) per vial, LYOPHILIZED (part 4)

		Formula	**2018**		
			Total	**Government**	**GAVI**
A	**Country co-financing**	*V*	20.76%		
B	**Number of children to be vaccinated with the first dose**	*Table 4*	30,249	6,280	23,969
B 1	**Number of children to be vaccinated with the third dose**	*Table 4*	29,625	6,151	23,474
C	**Number of doses per child**	*The immunization schedule*	3		
D	**Number of doses required**	*B + B1 + Target for the 2nd dose ((B -0.41 x (B - B1))*	89,868	18,657	71,211
E	**Estimated vaccine wastage factor**	*Table 4*	1.11		
F	**Number of doses required taking wastage into account**	*D X E*	99,753	20,710	79,043
G	**Buffer stock of vaccines**	***Buffer on doses needed*** + ***buffer on doses wasted*** ***Buffer on doses needed*** = *(D - D of previous year original approved) x 0,375* ***Buffer on doses wasted*** = • *if(wastage factor of previous year current estimation < wastage factor of previous year original approved): ((F - D) - ((F - D) of previous year original approved - (F - D) of previous year current estimation)) x 0,375* • *else: (F - D - ((F - D) of previous year original approved)) x 0,375 >= 0*	37,408	7,767	29,641
H	**Stock to be deducted**	*H1 - (F (2015) current estimation x 0.375)*			
H 1	**Initial stock calculated**	*H2 (2015) + H3 (2015) - F (2015)*			
H 2	**Stock on 1st January**	*Table 7.11.1*			
H 3	**Dispatch schedule**	*Approved volume*			
I	**Total vaccine doses required**	*Rounding ((F + G - H) / vaccine pack size) x vaccine pack size*	137,200	28,484	108,716
J	**Number of doses per vial**	*Vaccine parameter*	2		

As the delivery schedule for 2014 is not yet available, the volume approved for 2014 is used as the best estimate of the delivery schedule in 2014. The information will be updated when the delivery schedule is available.

K	**Number of Auto-disable syringes required (+10% wastage)**	*(D + G – H) x 1.10*	140,004	29,066	110,938
L	**Number of Reconstitution syringes required (+10% wastage)**	*(I / J) x 1.10*	75,460	15,666	59,794
M	**Total number of safety boxes required (10% extra)**	*(I / 100) x 1.10*	1,510	314	1,196
N	**Cost of the required vaccines**	*I x price of vaccine per dose (g)*	246,549	51,185	195,364
O	**Cost of the required AD syringes**	*K x AD syringe price per unit (ca)*	6,273	1,303	4,970
P	**Cost of the required reconstitution syringes**	*L X Reconstitution syringe price per unit (cr)*	2,642	549	2,093
Q	**Cost of the safety boxes required**	*M X unit price of safety boxes (cs)*	9	2	7
R	**Freight cost of the required vaccines**	*N x Freight cost as % of vaccine value (fv)*	8,876	1,843	7,033
S	**Freight cost of the required material**	*(O+P+Q) x Freight cost as % of the value of supplies (fd)*	0	0	0
T	**Total funds required**	*(N+O+P+Q+R+S)*	264,349	54,880	209,469
U	**Total country co-financing**	*I x Country co-financing per dose (cc)*	54,880		
V	**Country co-financing % of GAVI supported proportion**	*U / T*	20.76%		

Table 7.11.1: Characteristics for Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID

ID		Source		2014	2015	2016	2017	2018	TOTAL
	Number of surviving infants	Parameter	#	27,492	28,317	29,394	30,276	31,184	146,663
	Number of children to be vaccinated with the first dose	Parameter	#	25,568	26,052	27,043	28,459	30,249	137,371
	Number of children to be vaccinated with the third dose	Parameter	#	24,433	25,485	25,867	27,854	29,625	133,264
	Immunization coverage with the third dose	Parameter	%	88.87%	90.00%	88.00%	92.00%	95.00%	
	Number of doses per child	Parameter	#	3	3	3	3	3	
	Estimated vaccine wastage factor	Parameter	#	1.05	1.05	1.05	1.05	1.05	
	Stock in Central Store Dec 31, 2014		#	51,973					
	Stock across second level Dec 31, 2014 (if available)*		#						
	Stock across third level Dec 31, 2014 (if available)*	Parameter	#						
	Number of doses per vial	Parameter	#		1	1	1	1	
	Number of AD syringes required	Parameter	#		Yes	Yes	Yes	Yes	
	Number of reconstitution syringes required	Parameter	#		No	No	No	No	
	Number of safety boxes required	Parameter	#		Yes	Yes	Yes	Yes	
cc	**Country co-financing per dose**	Parameter	$		0.30	0.35	0.40	0.46	
ca	**AD syringe price per unit**	Parameter	$		0.0448	0.0448	0.0448	0.0448	
cr	**Reconstitution syringe price per unit**	Parameter	$		0	0	0	0	
cs	**Safety box price per unit**	Parameter	$		0.0054	0.0054	0.0054	0.0054	
fv	**Freight cost as % of vaccines value**	Parameter	%		4.50%	3.00%	4.50%	4.60%	

* Please describe the method used for stock count in the text box below. We assume the closing stock (Dec 31, 2014) is the same as the opening stock (Jan 1, {1}). If there is a difference, please provide details in the text box below.

Co-funding tables for Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID

Co-financing group	Intermediate

	2014	2015	2016	2017	2018
Minimum co-financing	0.26	0.30	0.35	0.40	0.46
Recommended co-financing as per			0.35	0.40	0.46
Your co-financing	0.26	0.30	0.35	0.40	0.46

Table 7.11.4: Calculation of requirements for Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID (part 1)

		Formula	2014	2015		
				Total	Government	GAVI
A	**Country co-financing**	*V*				
B	**Number of children to be vaccinated with the first dose**	*Table 4*	25,568	26,052		
C	**Number of doses per child**	*The immunization schedule*	3	3		
D	**Number of doses required**	*B x C*	76,704	78,156		
E	**Estimated vaccine wastage factor**	*Table 4*	1.05	1.05		
F	**Number of doses required taking wastage into account**	*D x E*		82,064		
G	**Buffer stock of vaccines**	***Buffer on doses needed*** *+* ***buffer on doses wasted*** ***Buffer on doses needed*** *= (D - D of previous year original approved) x 0,25* ***Buffer on doses wasted*** *= (F - D) x [XXX] - ((F - D) of previous year current estimate) x*				
H	**Stock to be deducted**	*H2 of the previous year - 0.25 x F of the previous year*				
H 2	**Stock on 1st January**	*Table 7.11.1*	79,144	51,973		
I	**Total vaccine doses required**	*Rounding ((F + G - H) / vaccine pack size) x vaccine pack size*		82,800		
J	**Number of doses per vial**	*Vaccine parameter*				
K	**Number of Auto-disable syringes required (+10% wastage)**	*(D + G – H) x 1.10*				
L	**Number of Reconstitution syringes required (+10% wastage)**	*(I / J) x 1.10*				
M	**Total number of safety boxes required (10% extra)**	*(I / 100) x 1.10*				
N	**Cost of the required vaccines**	*I x price of vaccine per dose (g)*				
O	**Cost of the required AD syringes**	*K x AD syringe price per unit (ca)*				
P	**Cost of the required reconstitution syringes**	*L X Reconstitution syringe price per unit (cr)*				
Q	**Cost of the safety boxes required**	*M X unit price of safety boxes (cs)*				
R	**Freight cost of the required vaccines**	*N x Freight cost as % of vaccine value (fv)*				
S	**Freight cost of the required material**	*(O+P+Q) x Freight cost as % of the value of supplies (fd)*				
T	**Total funds required**	*(N+O+P+Q+R+S)*				
U	**Total country co-financing**	*I x Country co-financing per dose (cc)*				
V	**Country co-financing % of GAVI supported proportion**	*U / T*				

Table 7.11.4: Calculation of requirements for Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID (part 2)

		Formula	2016		
			Total	Government	GAVI
A	**Country co-financing**	*V*	9.93%		
B	**Number of children to be vaccinated with the first dose**	*Table 4*	27,043	2,686	24,357
C	**Number of doses per child**	*The immunization schedule*	3		
D	**Number of doses required**	*B x C*	81,129	8,056	73,073
E	**Estimated vaccine wastage factor**	*Table 4*	1.05		
F	**Number of doses required taking wastage into account**	*D x E*	85,186	8,459	76,727
G	**Buffer stock of vaccines**	***Buffer on doses needed*** *+* ***buffer on doses wasted*** ***Buffer on doses needed*** *= (D - D of previous year original approved) x 0,25* ***Buffer on doses wasted*** *= (F - D) x [XXX] - ((F - D) of previous year current estimate) x*	1,758	175	1,583
H	**Stock to be deducted**	*H2 of the previous year - 0.25 x F of the previous year*	31,457	3,124	28,333
H 2	**Stock on 1st January**	*Table 7.11.1*			
I	**Total vaccine doses required**	*Rounding ((F + G - H) / vaccine pack size) x vaccine pack size*	55,800	5,541	50,259
J	**Number of doses per vial**	*Vaccine parameter*	1		
K	**Number of Auto-disable syringes required (+10% wastage)**	*(D + G – H) x 1.10*	56,574	5,618	50,956
L	**Number of Reconstitution syringes required (+10% wastage)**	*(I / J) x 1.10*	0	0	0
M	**Total number of safety boxes required (10% extra)**	*(I / 100) x 1.10*	614	61	553
N	**Cost of the required vaccines**	*I x price of vaccine per dose (g)*	188,493	18,717	169,776
O	**Cost of the required AD syringes**	*K x AD syringe price per unit (ca)*	2,535	252	2,283
P	**Cost of the required reconstitution syringes**	*L X Reconstitution syringe price per unit (cr)*	0	0	0
Q	**Cost of the safety boxes required**	*M X unit price of safety boxes (cs)*	4	1	3
R	**Freight cost of the required vaccines**	*N x Freight cost as % of vaccine value (fv)*	5,655	562	5,093
S	**Freight cost of the required material**	*(O+P+Q) x Freight cost as % of the value of supplies (fd)*	0	0	0
T	**Total funds required**	*(N+O+P+Q+R+S)*	196,687	19,530	177,157
U	**Total country co-financing**	*I x Country co-financing per dose (cc)*	19,530		
V	**Country co-financing % of GAVI supported proportion**	*U / T*	9.93%		

Table 7.11.4: Calculation of requirements for Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID (part 3)

		Formula	2017		
			Total	Government	GAVI
A	**Country co-financing**	*V*	11.36%		
B	**Number of children to be vaccinated with the first dose**	*Table 4*	28,459	3,234	25,225
C	**Number of doses per child**	*The immunization schedule*	3		
D	**Number of doses required**	*B x C*	85,377	9,701	75,676
E	**Estimated vaccine wastage factor**	*Table 4*	1.05		
F	**Number of doses required taking wastage into account**	*D x E*	89,646	10,186	79,460
G	**Buffer stock of vaccines**	***Buffer on doses needed*** + ***buffer on doses wasted*** ***Buffer on doses needed*** = *(D - D of previous year original approved) x 0,25* ***Buffer on doses wasted*** = *(F - D) x [XXX] - ((F - D) of previous year current estimate) x*	22,412	2,547	19,865
H	**Stock to be deducted**	*H2 of the previous year - 0.25 x F of the previous year*			
H 2	**Stock on 1st January**	*Table 7.11.1*			
I	**Total vaccine doses required**	*Rounding ((F + G - H) / vaccine pack size) x vaccine pack size*	113,400	12,885	100,515
J	**Number of doses per vial**	*Vaccine parameter*	1		
K	**Number of Auto-disable syringes required (+10% wastage)**	*(D + G – H) x 1.10*	118,568	13,472	105,096
L	**Number of Reconstitution syringes required (+10% wastage)**	*(I / J) x 1.10*	0	0	0
M	**Total number of safety boxes required (10% extra)**	*(I / 100) x 1.10*	1,248	142	1,106
N	**Cost of the required vaccines**	*I x price of vaccine per dose (g)*	376,942	42,829	334,113
O	**Cost of the required AD syringes**	*K x AD syringe price per unit (ca)*	5,312	604	4,708
P	**Cost of the required reconstitution syringes**	*L X Reconstitution syringe price per unit (cr)*	0	0	0
Q	**Cost of the safety boxes required**	*M X unit price of safety boxes (cs)*	7	1	6
R	**Freight cost of the required vaccines**	*N x Freight cost as % of vaccine value (fv)*	16,963	1,928	15,035
S	**Freight cost of the required material**	*(O+P+Q) x Freight cost as % of the value of supplies (fd)*	0	0	0
T	**Total funds required**	*(N+O+P+Q+R+S)*	399,224	45,360	353,864
U	**Total country co-financing**	*I x Country co-financing per dose (cc)*	45,360		
V	**Country co-financing % of GAVI supported proportion**	*U / T*	11.36%		

Table 7.11.4: Calculation of requirements for Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID (part 4)

		Formula	2018		
			Total	Government	GAVI
A	**Country co-financing**	*V*	13.27%		
B	**Number of children to be vaccinated with the first dose**	*Table 4*	30,249	4,014	26,235
C	**Number of doses per child**	*The immunization schedule*	3		
D	**Number of doses required**	*B x C*	90,747	12,040	78,707
E	**Estimated vaccine wastage factor**	*Table 4*	1.05		
F	**Number of doses required taking wastage into account**	*D x E*	95,285	12,642	82,643
G	**Buffer stock of vaccines**	***Buffer on doses needed*** *+* ***buffer on doses wasted*** ***Buffer on doses needed*** *= (D - D of previous year original approved) x 0,25* ***Buffer on doses wasted*** *= (F - D) x [XXX] - ((F - D) of previous year current estimate) x*	23,822	3,161	20,661
H	**Stock to be deducted**	*H2 of the previous year - 0.25 x F of the previous year*			
H 2	**Stock on 1st January**	*Table 7.11.1*			
I	**Total vaccine doses required**	*Rounding ((F + G - H) / vaccine pack size) x vaccine pack size*	120,600	16,000	104,600
J	**Number of doses per vial**	*Vaccine parameter*	1		
K	**Number of Auto-disable syringes required (+10% wastage)**	*(D + G – H) x 1.10*	126,026	16,720	109,306
L	**Number of Reconstitution syringes required (+10% wastage)**	*(I / J) x 1.10*	0	0	0
M	**Total number of safety boxes required (10% extra)**	*(I / 100) x 1.10*	1,327	177	1,150
N	**Cost of the required vaccines**	*I x price of vaccine per dose (g)*	394,362	52,320	342,042
O	**Cost of the required AD syringes**	*K x AD syringe price per unit (ca)*	5,646	750	4,896
P	**Cost of the required reconstitution syringes**	*L X Reconstitution syringe price per unit (cr)*	0	0	0
Q	**Cost of the safety boxes required**	*M X unit price of safety boxes (cs)*	8	2	6
R	**Freight cost of the required vaccines**	*N x Freight cost as % of vaccine value (fv)*	18,141	2,407	15,734
S	**Freight cost of the required material**	*(O+P+Q) x Freight cost as % of the value of supplies (fd)*	0	0	0
T	**Total funds required**	*(N+O+P+Q+R+S)*	418,157	55,476	362,681
U	**Total country co-financing**	*I x Country co-financing per dose (cc)*	55,476		
V	**Country co-financing % of GAVI supported proportion**	*U / T*	13.27%		

	Number of safety boxes required	Parameter	#		No	No	No	No	
cc	**Country co-financing per dose**	Parameter	$		0.23	0.26	0.30	0.35	
ca	**AD syringe price per unit**	Parameter	$		0.0448	0.0448	0.0448	0.0448	
cr	**Reconstitution syringe price per unit**	Parameter	$		0	0	0	0	
cs	**Safety box price per unit**	Parameter	$		0.0054	0.0054	0.0054	0.0054	
fv	**Freight cost as % of vaccines value**	Parameter	%		4.20%	4.40%	4.40%	4.40%	

Table 7.11.1: Characteristics for Rotavirus, 2 dose schedule

ID		Source		2014	2015	2016	2017	2018	TOTAL
	Number of surviving infants	Parameter	#	27,492	28,317	29,394	30,276	31,184	146,663
	Number of children to be vaccinated with the first dose	Parameter	#	45,532	26,052	27,043	28,459	30,249	157,335
	Number of children to be vaccinated with the second dose	Parameter	#	22,595	25,485	26,455	28,157	29,937	132,629
	Immunization coverage with the second dose	Parameter	%	82.19%	90.00%	90.00%	93.00%	96.00%	
	Number of doses per child	Parameter	#	2	2	2	2	2	
	Estimated vaccine wastage factor	Parameter	#	1.05	1.05	1.05	1.05	1.05	
	Stock in Central Store Dec 31, 2014		#	23,434					
	Stock across second level Dec 31, 2014 (if available)*		#						
	Stock across third level Dec 31, 2014 (if available)*	Parameter	#						
	Number of doses per vial	Parameter	#		1	1	1	1	
	Number of AD syringes required	Parameter	#		No	No	No	No	
	Number of reconstitution syringes required	Parameter	#		No	No	No	No	

* Please describe the method used for stock count in the text box below. We assume the closing stock (Dec 31, 2014) is the same as the opening stock (Jan 1, {1}). If there is a difference, please provide details in the text box below.

Co-financing table for Rotavirus, 2 dose schedule

Co-financing group	Intermediate

	2014	2015	2016	2017	2018
Minimum co-financing	0.20	0.23	0.26	0.30	0.35
Recommended co-financing as per			0.26	0.30	0.35
Your co-financing	0.23	0.23	0.26	0.30	0.35

Table 7.11.4: Calculation of requirements for Rotavirus, 2 dose schedule (part 1)

		Formula	2014	2015		
				Total	Government	GAVI
A	**Country co-financing**	*V*				
B	**Number of children to be vaccinated with the first dose**	*Table 4*	45,532	26,052		
C	**Number of doses per child**	*The immunization schedule*	2	2		
D	**Number of doses required**	*B x C*	91,064	52,104		
E	**Estimated vaccine wastage factor**	*Table 4*	1.05	1.05		
F	**Number of doses required taking wastage into account**	*D x E*		54,710		
G	**Buffer stock of vaccines**	***Buffer on doses needed*** *+* ***buffer on doses wasted*** ***Buffer on doses needed*** *= (D - D of previous year original approved) x 0,25* ***Buffer on doses wasted*** *= (F - D) x [XXX] - ((F - D) of previous year current estimate) x 0,25*				
H	**Stock to be deducted**	*H2 of the previous year - 0.25 x F of the previous year*				
H 2	**Stock on 1st January**	*Table 7.11.1*	0	23,434		
I	**Total vaccine doses required**	*Rounding ((F + G - H) / vaccine pack size) x vaccine pack size*		43,500		
J	**Number of doses per vial**	*Vaccine parameter*				
K	**Number of Auto-disable syringes required (+10% wastage)**	*(D + G – H) x 1.10*				
L	**Number of Reconstitution syringes required (+10% wastage)**	*(I / J) x 1.10*				
M	**Total number of safety boxes required (10% extra)**	*(K + L) / 100 x 1.10*				
N	**Cost of the required vaccines**	*I x price of vaccine per dose (g)*				
O	**Cost of the required AD syringes**	*K x AD syringe price per unit (ca)*				
P	**Cost of the required reconstitution syringes**	*L X Reconstitution syringe price per unit (cr)*				
Q	**Cost of the safety boxes required**	*M X unit price of safety boxes (cs)*				
R	**Freight cost of the required vaccines**	*N x Freight cost as % of vaccine value (fv)*				
S	**Freight cost of the required material**	*(O+P+Q) x Freight cost as % of the value of supplies (fd)*				
T	**Total funds required**	*(N+O+P+Q+R+S)*				
U	**Total country co-financing**	*I x Country co-financing per dose (cc)*				
V	**Country co-financing % of GAVI supported proportion**	*U / T*				

Table 7.11.4: Calculation of requirements for Rotavirus, 2 dose schedule (part 2)

		Formula	2016		
			Total	Government	GAVI
A	**Country co-financing**	*V*	11.04%		
B	**Number of children to be vaccinated with the first dose**	*Table 4*	27,043	2,986	24,057
C	**Number of doses per child**	*The immunization schedule*	2		
D	**Number of doses required**	*B x C*	54,086	5,971	48,115
E	**Estimated vaccine wastage factor**	*Table 4*	1.05		
F	**Number of doses required taking wastage into account**	*D x E*	56,791	6,270	50,521
G	**Buffer stock of vaccines**	***Buffer on doses needed*** *+* ***buffer on doses wasted*** ***Buffer on doses needed*** *= (D - D of previous year original approved) x 0,25* ***Buffer on doses wasted*** *= (F - D) x [XXX] - ((F - D) of previous year current estimate) x 0,25*	542	60	482
H	**Stock to be deducted**	*H2 of the previous year - 0.25 x F of the previous year*	9,757	1,078	8,679
H 2	**Stock on 1st January**	*Table 7.11.1*			
I	**Total vaccine doses required**	*Rounding ((F + G - H) / vaccine pack size) x vaccine pack size*	48,000	5,299	42,701
J	**Number of doses per vial**	*Vaccine parameter*	1		
K	**Number of Auto-disable syringes required (+10% wastage)**	*(D + G – H) x 1.10*	0	0	0
L	**Number of Reconstitution syringes required (+10% wastage)**	*(I / J) x 1.10*	0	0	0
M	**Total number of safety boxes required (10% extra)**	*(K + L) / 100 x 1.10*	0	0	0
N	**Cost of the required vaccines**	*I x price of vaccine per dose (g)*	108,288	11,954	96,334
O	**Cost of the required AD syringes**	*K x AD syringe price per unit (ca)*	0	0	0
P	**Cost of the required reconstitution syringes**	*L X Reconstitution syringe price per unit (cr)*	0	0	0
Q	**Cost of the safety boxes required**	*M X unit price of safety boxes (cs)*	0	0	0
R	**Freight cost of the required vaccines**	*N x Freight cost as % of vaccine value (fv)*	4,765	527	4,238
S	**Freight cost of the required material**	*(O+P+Q) x Freight cost as % of the value of supplies (fd)*	0	0	0
T	**Total funds required**	*(N+O+P+Q+R+S)*	113,053	12,480	100,573
U	**Total country co-financing**	*I x Country co-financing per dose (cc)*	12,480		
V	**Country co-financing % of GAVI supported proportion**	*U / T*	11.04%		

Table 7.11.4: Calculation of requirements for Rotavirus, 2 dose schedule (part 3)

		Formula	2017		
			Total	Government	GAVI
A	**Country co-financing**	*V*	12.74%		
B	**Number of children to be vaccinated with the first dose**	*Table 4*	28,459	3,625	24,834
C	**Number of doses per child**	*The immunization schedule*	2		
D	**Number of doses required**	*B x C*	56,918	7,250	49,668
E	**Estimated vaccine wastage factor**	*Table 4*	1.05		
F	**Number of doses required taking wastage into account**	*D x E*	59,764	7,613	52,151
G	**Buffer stock of vaccines**	***Buffer on doses needed*** *+* ***buffer on doses wasted*** ***Buffer on doses needed*** *= (D - D of previous year original approved) x 0,25* ***Buffer on doses wasted*** *= (F - D) x [XXX] - ((F - D) of previous year current estimate) x 0,25*	14,265	1,817	12,448
H	**Stock to be deducted**	*H2 of the previous year - 0.25 x F of the previous year*			
H 2	**Stock on 1st January**	*Table 7.11.1*			
I	**Total vaccine doses required**	*Rounding ((F + G - H) / vaccine pack size) x vaccine pack size*	75,000	9,554	65,446
J	**Number of doses per vial**	*Vaccine parameter*	1		
K	**Number of Auto-disable syringes required (+10% wastage)**	*(D + G – H) x 1.10*	0	0	0
L	**Number of Reconstitution syringes required (+10% wastage)**	*(I / J) x 1.10*	0	0	0
M	**Total number of safety boxes required (10% extra)**	*(K + L) / 100 x 1.10*	0	0	0
N	**Cost of the required vaccines**	*I x price of vaccine per dose (g)*	169,200	21,552	147,648
O	**Cost of the required AD syringes**	*K x AD syringe price per unit (ca)*	0	0	0
P	**Cost of the required reconstitution syringes**	*L X Reconstitution syringe price per unit (cr)*	0	0	0
Q	**Cost of the safety boxes required**	*M X unit price of safety boxes (cs)*	0	0	0
R	**Freight cost of the required vaccines**	*N x Freight cost as % of vaccine value (fv)*	7,445	949	6,496
S	**Freight cost of the required material**	*(O+P+Q) x Freight cost as % of the value of supplies (fd)*	0	0	0
T	**Total funds required**	*(N+O+P+Q+R+S)*	176,645	22,500	154,145
U	**Total country co-financing**	*I x Country co-financing per dose (cc)*	22,500		
V	**Country co-financing % of GAVI supported proportion**	*U / T*	12.74%		

Table 7.11.4: Calculation of requirements for Rotavirus, 2 dose schedule (part 4)

		Formula	2018		
			Total	Government	GAVI
A	**Country co-financing**	*V*	14.86%		
B	**Number of children to be vaccinated with the first dose**	*Table 4*	30,249	4,496	25,753
C	**Number of doses per child**	*The immunization schedule*	2		
D	**Number of doses required**	*B x C*	60,498	8,991	51,507
E	**Estimated vaccine wastage factor**	*Table 4*	1.05		
F	**Number of doses required taking wastage into account**	*D x E*	63,523	9,440	54,083
G	**Buffer stock of vaccines**	***Buffer on doses needed*** *+* ***buffer on doses wasted*** ***Buffer on doses needed*** *= (D - D of previous year original approved) x 0,25* ***Buffer on doses wasted*** *= (F - D) x [XXX] - ((F - D) of previous year current estimate) x 0,25*	15,170	2,255	12,915
H	**Stock to be deducted**	*H2 of the previous year - 0.25 x F of the previous year*			
H 2	**Stock on 1st January**	*Table 7.11.1*			
I	**Total vaccine doses required**	*Rounding ((F + G - H) / vaccine pack size) x vaccine pack size*	79,500	11,814	67,686
J	**Number of doses per vial**	*Vaccine parameter*	1		
K	**Number of Auto-disable syringes required (+10% wastage)**	*(D + G – H) x 1.10*	0	0	0
L	**Number of Reconstitution syringes required (+10% wastage)**	*(I / J) x 1.10*	0	0	0
M	**Total number of safety boxes required (10% extra)**	*(K + L) / 100 x 1.10*	0	0	0
N	**Cost of the required vaccines**	*I x price of vaccine per dose (g)*	179,352	26,653	152,699
O	**Cost of the required AD syringes**	*K x AD syringe price per unit (ca)*	0	0	0
P	**Cost of the required reconstitution syringes**	*L X Reconstitution syringe price per unit (cr)*	0	0	0
Q	**Cost of the safety boxes required**	*M X unit price of safety boxes (cs)*	0	0	0
R	**Freight cost of the required vaccines**	*N x Freight cost as % of vaccine value (fv)*	7,892	1,173	6,719
S	**Freight cost of the required material**	*(O+P+Q) x Freight cost as % of the value of supplies (fd)*	0	0	0
T	**Total funds required**	*(N+O+P+Q+R+S)*	187,244	27,825	159,419
U	**Total country co-financing**	*I x Country co-financing per dose (cc)*	27,825		
V	**Country co-financing % of GAVI supported proportion**	*U / T*	14.86%		

8. Health System Strengthening Support (HSS)

Djibouti is not submitting a report on the use of funds for Health System Strengthening (HSS) in 2015

9. Strengthen the involvement of Civil Society Organizations (CSO): type A and type B

9.1. TYPE A: Support to improve coordination and the representation of CSOs

Djibouti **has NOT received GAVI Type A support to CSOs**

Djibouti is not submitting a report on GAVI Type A support to CSOs for 2014

9.2. TYPE B : Support for CSOs to help implement the GAVI HSS proposal or CMYP

Djibouti **has NOT received GAVI Type B support to CSOs**

Djibouti is not submitting a report on GAVI Type B support to CSOs for 2014

10. Comments from ICC/HSCC Chairs

You can submit observations that you may wish to bring to the attention of the monitoring IRC and any comments or information you may wish to share in relation to the challenges you have faced during the year under review. These are in addition to the approved minutes, which should be included in the attachments.

11. Appendices

11.1. Annex 1 - ISS instructions

INSTRUCTIONS:

FINANCIAL STATEMENTS **FOR THE ALLOCATION OF NEW VACCINE INTRODUCTION** UNDER **IMMUNIZATION SERVICES SUPPORT (ISS)**

I. All countries that have received ISS/ new vaccine introduction grants during the 2014 calendar year, or had balances of funding remaining from previously disbursed ISS/new vaccine introduction grants in 2014, are required to submit financial statements for these programs as part of their Annual Progress Reports.

II. The financial statements are prepared in accordance with the national standards for accounting; as a consequence, GAVI will not provide countries with one single template with pre-determined cost categories.

III. GAVI requires **at least** a simple statement of income and expenditure for activities conducted during the calendar year 2014, containing the points (a) through (f), below. A sample basic statement of income and expenditure is provided on the following page.

a. Funds carried forward from the 2013calendar year (opening balance as of January 1, 2014)

b. Income received from GAVI in 2014

c. Other income received during 2014 (interest, fees, etc.)

d. Total expenditure during the calendar year

e. Closing balance as of December 31, 2014

f. A detailed analysis of expenditures during 2014, based on your government's own system of economic classification. This analysis summarizes the total annual expenditure for the year by your Government's own economic classification system, and relevant cost categories (for example: salaries and wages). The cost categories used shall be based on the economic classification from your Government. Please report on the budget for each category at the beginning of the calendar year, actual expenditure during the calendar year, and the balance remaining for each cost category as of December 31, 2014(referred to as the "variance").

IV. Financial statements should be compiled in local currency, with an indication of the USD exchange rate applied. Countries should provide additional explanation of how and why a particular rate of exchange has been applied, and any supplementary notes that may help the GAVI Alliance in its review of the financial statements.

V. Financial statements need not be audited/certified prior to their submission to GAVI. However, it is understood that these financial statements should be subjected to scrutiny during each country's external audit for the financial year 2014. Audits for ISS funds are to be submitted to the GAVI Secretariat 6 months following the close of the financial year in their respective countries.

11.2. Annex 2 - Example of income & expenditure of ISS

MINIMUM REQUIREMENTS FOR ISS FINANCIAL STATEMENTS AND FOR THE ALLOCATION OF A VACCINE INTRODUCTION 1

An example of income & expenditure statement

Summary Table of income & expenditure – GAVI-ISS		
	Local Currency (CFA)	Value in USD*
Closing balance for 2013 (as of 31 December 2013)	25,392,830	53,000
Summary of income received in 2014		
Income received from GAVI	57,493,200	120,000
Interest based income	7,665,760	16,000
Other incomes (fees)	179,666	375
Total Income	38,987,576	81,375
Total expenditure in 2014	30,592,132	63,852
Closing Balance on 31 December 2014 (Balance carried over to 2015)	60,139,325	125,523

* Enter the exchange rate at the opening on 01.01.2014, the exchange rate at close on 31.12.2014 of the financial year and also indicate the exchange rate used to convert the local currency into USD in these financial statements.

Detailed Analysis of Expenses by economic classification** – GAVI ISS						
	Budget in CFA	Budget in US$	Actual Expenses in CFA	Actual Expenses in USD	Variance in CFA	Variance in USD
Salary expenditure						
Wages and salaries	2,000,000	4,174	0	0	2,000,000	4,174
Payment of daily allowances	9,000,000	18,785	6,150,000	12,836	2,850,000	5,949
Non-Salary expenditure						
Training	13,000,000	27,134	12,650,000	26,403	350,000	731
Fuel	3,000,000	6,262	4,000,000	8,349	-1,000,000	-2,087
Maintenance and overheads	2,500,000	5,218	1,000,000	2,087	1,500,000	3,131
Other expenses						
Vehicles	12,500,000	26,090	6,792,132	14,177	5,707,868	11,913
TOTAL FOR 2014	42,000,000	87,663	30,592,132	63,852	11,407,868	23,811

**The expense categories are indicative and included only as an example Each Government will provide financial statements in compliance with their own economic classification system.

11.3. Annex 3 - Instructions for HSS support

INSTRUCTIONS:

FINANCIAL STATEMENTS FOR **HEALTH SYSTEM STRENGTHENING (HSS)**

I. All countries that have received HSS grants during the 2014 calendar year, or had balances of funding remaining from previously disbursed HSS grants in 2014, are required to submit a financial statement for these programs as part of their Annual Progress Reports.

II. The financial statements are prepared in accordance with the national standards for accounting; as a consequence, GAVI will not provide countries with one single template with pre-determined cost categories.

III. GAVI requires at least a simple statement of income and expenditure for activities carried out during the calendar year 2014, taking into account the points (a) to (f), below. A sample basic statement of income and expenditure is provided on the following page.

a. Funds carried forward from calendar year 2013 (opening balance as of January 1, 2014)

b. Income received from GAVI in 2014

c. Other income received during 2014 (interest, fees, etc.)

d. Total expenditure during the calendar year

e. Closing balance as of December 31, 2014

f. A detailed analysis of expenditures during 2014, based on your government's own system of economic classification. This analysis should summarize total annual expenditure for each HSS objective and activity, as per your government's originally approved HSS proposal, with further breakdown by cost category (for example: salaries and wages). The cost categories used shall be based on the economic classification from your Government. Please report the budget for each objective, activity and cost category at the beginning of the calendar year, the actual expenditure during the calendar year, and the balance remaining for each objective, activity and cost category as of December 31, 2014(referred to as the "variance").

IV. Financial statements should be compiled in local currency, with an indication of the USD exchange rate applied. Countries should provide additional explanation of how and why a particular exchange rate has been applied, and any additional notes that may help the GAVI Alliance in its review of the financial statements.

V. Financial statements need not have been audited/certified prior to their submission to GAVI. However, it is understood that these financial statements shall be subjected to scrutiny during each country's external audit for the 2014 financial year. Audits for HSS funds are to be submitted to the GAVI Secretariat 6 months following the close financial year in respective countries.

11.4. Annex 4 - Example of income & expenditure of HSS

MINIMUM REQUIREMENTS FOR THE HSS-SUPPORT FINANCIAL STATEMENTS:

An example of income & expenditure statement

Summary Table of income & expenditure – GAVI-HSS		
	Local Currency (CFA)	Value in USD*
Closing balance for 2013 (as of 31 December 2013)	25,392,830	53,000
Summary of income received in 2014		
Income received from GAVI	57,493,200	120,000
Interest based income	7,665,760	16,000
Other incomes (fees)	179,666	375
Total Income	38,987,576	81,375
Total expenditure in 2014	30,592,132	63,852
Closing Balance on 31 December 2014 (Balance carried over to 2015)	60,139,325	125,523

* Enter the exchange rate at the opening on 01.01.2014, the exchange rate at close on 31.12.2014 of the financial year and also indicate the exchange rate used to convert the local currency into USD in these financial statements.

Detailed Analysis of Expenses by economic classification ** - GAVI-ISS						
	Budget in CFA	Budget in US$	Actual Expenses in CFA	Actual Expenses in USD	Variance in CFA	Variance in USD
Salary expenditure						
Wages and salaries	2,000,000	4,174	0	0	2,000,000	4,174
Payment of daily allowances	9,000,000	18,785	6,150,000	12,836	2,850,000	5,949
Non-Salary expenditure						
Training	13,000,000	27,134	12,650,000	26,403	350,000	731
Fuel	3,000,000	6,262	4,000,000	8,349	-1,000,000	-2,087
Maintenance and overheads	2,500,000	5,218	1,000,000	2,087	1,500,000	3,131
Other expenses						
Vehicles	12,500,000	26,090	6,792,132	14,177	5,707,868	11,913
TOTAL FOR 2014	42,000,000	87,663	30,592,132	63,852	11,407,868	23,811

** The expense categories are indicative and included only as an example Each Government will provide financial statements in compliance with their own economic classification system.

11.5. Annex 5 - Instructions for CSO support

INSTRUCTIONS:

FINANCIAL STATEMENTS FOR **SUPPORT TO CIVIL SOCIETY ORGANIZATIONS (CSO)** TYPE B

I. All countries that have received CSO - Type B grants during the 2014 calendar year, or had balances of funding remaining from previously disbursed CSO-Type B grants in 2014, are required to submit financial statements for these programs as part of their Annual Progress Report.

II. The financial statements are prepared in accordance with the national standards for accounting; as a consequence, GAVI will not provide countries with one single template with pre-determined cost categories.

III. GAVI requires at least a simple statement of income and expenditure for activities carried out during the calendar year 2014, taking into account the points (a) to (f), below. A sample basic statement of income and expenditure is provided on the following page.

a. Funds carried forward from calendar year 2013 (opening balance as of January 1, 2014)

b. Income received from GAVI in 2014

c. Other income received during 2014 (interest, fees, etc.)

d. Total expenditure during the calendar year

e. Closing balance as of December 31, 2014

f. A detailed analysis of expenditures during 2014, based on your government's own system of economic classification. This analysis should summarize total annual expenditure for each partner of the civil society, per your government's originally approved Type B support to CSOs, with further breakdown by cost category (for example: salaries and wages). The cost categories used shall be based on the economic classification from your Government. Please report the budget for each objective, activity and cost category at the beginning of the calendar year, the actual expenditure during the calendar year, and the balance remaining for each objective, activity and cost category as of December 31, 2014(referred to as the "variance").

IV. Financial statements should be compiled in local currency, with an indication of the USD exchange rate applied. Countries should provide additional explanation of how and why a particular exchange rate has been applied, and any additional notes that may help the GAVI Alliance in its review of the financial statements.

V. Financial statements need not have been audited/certified prior to their submission to GAVI. However, it is understood that these financial statements shall be subjected to scrutiny during each country's external audit for the 2014financial year. Audits for the Type B support to CSOs funds are to be submitted to the GAVI Secretariat 6 months following the close of the financial year in their respective countries.

11.6. Annex 6 - CSO income & expenditure example

MINIMUM REQUIREMENTS FOR FINANCIAL STATEMENTS ON TYPE- B CSO SUPPORT:

An example of income & expenditure statement

Summary Table of income & expenditure – GAVI-CSO		
	Local Currency (CFA)	Value in USD*
Closing balance for 2013 (as of 31 December 2013)	25,392,830	53,000
Summary of income received in 2014		
Income received from GAVI	57,493,200	120,000
Interest based income	7,665,760	16,000
Other incomes (fees)	179,666	375
Total Income	38,987,576	81,375
Total expenditure in 2014	30,592,132	63,852
Closing Balance on 31 December 2014 (Balance carried over to 2015)	60,139,325	125,523

* Enter the exchange rate at the opening on 01.01.2014, the exchange rate at close on 31.12.2014 of the financial year and also indicate the exchange rate used to convert the local currency into USD in these financial statements.

Detailed Analysis of Expenses by economic classification ** - GAVI-CSOs						
	Budget in CFA	Budget in US$	Actual Expenses in CFA	Actual Expenses in USD	Variance in CFA	Variance in USD
Salary expenditure						
Wages and salaries	2,000,000	4,174	0	0	2,000,000	4,174
Payment of daily allowances	9,000,000	18,785	6,150,000	12,836	2,850,000	5,949
Non-Salary expenditure						
Training	13,000,000	27,134	12,650,000	26,403	350,000	731
Fuel	3,000,000	6,262	4,000,000	8,349	-1,000,000	-2,087
Maintenance and overheads	2,500,000	5,218	1,000,000	2,087	1,500,000	3,131
Other expenses						
Vehicles	12,500,000	26,090	6,792,132	14,177	5,707,868	11,913
TOTAL FOR 2014	42,000,000	87,663	30,592,132	63,852	11,407,868	23,811

** The expense categories are indicative and included only as an example Each Government will provide financial statements in compliance with their own economic classification system.

12. Attachments

Document Number	Document	Section	Mandatory	File
1	Signature of the Health Minister (or delegated authority)	2.1	✓	Signatures min santé.pdf **File desc:** **Date/Time:** 14/05/2015 01: /19: /19 **Size:** 343 KB
2	Signature of the Finance Minister (or delegated authority)	2.1	✓	signature min budget.pdf **File desc:** **Date/Time:** 14/05/2015 01: /11: /12 **Size:** 343 KB
3	Signatures of the ICC members	2.2	✓	liste de presence ICC 11 mai 2015.pdf **File desc:** **Date/Time:** 14/05/2015 01: /12: /14 **Size:** 396 KB
4	Minutes of the ICC meeting in 2015 endorsing the Annual Progress Report 2014	5.4	✓	ICC Reunion de validation du RAS GAVI 2014 KA.doc **File desc:** **Date/Time:** 14/05/2015 01: /12: /16 **Size:** 44 KB
5	Signature of the HSCC members	2.3	✗	No file downloaded
6	Minutes of the HSCC meeting in 2015 endorsing the Annual Progress Report 2014	8.9.3	✓	Compte rendu CCSS.docx **File desc:** **Date/Time:** 14/05/2015 01: /14: /16 **Size:** 11 KB
7	Financial statement for the ISS funds (fiscal year 2014) signed by the Chief Accountant or by the Permanent Secretary of the Ministry of Health	6.2.1	✗	No file downloaded
8	External audit report on the allocation of ISS funds (fiscal year 2014)	6.2.3	✗	No file downloaded
9	Post-introduction Evaluation Report	7.2.1	✗	No file downloaded

10	Financial statement for grants for introducing a new vaccine (fiscal year 2014) signed by the Chief Accountant or by the Permanent Secretary of the Ministry of Health	7.3.1	✓	Rapport d'etat financiers sur allocation pour introduction NV.pdf **File desc:** **Date/Time:** 14/05/2015 01: /11: /13 **Size:** 406 KB
11	External audit report for the allocation of funds for the introduction of a new vaccine (fiscal year 2014), if the total expenses in 2014 are greater than US$ 250,000	7.3.1	✓	RAPPORT D'AUDIT EXTERNE.docx **File desc:** **Date/Time:** 14/05/2015 01: /12: /15 **Size:** 11 KB

12	EVSM/EVM/VMA report	7.5	✓	Rapport_GEV__Djibouti_30 08 2014.docx **File desc:** **Date/Time:** 14/05/2015 01: /16: /19 **Size:** 2 MB
13	Latest EVSM/EVM/VMA improvement plan	7.5	✓	Plan d'amélioration GEV.docx **File desc:** **Date/Time:** 14/05/2015 01: /18: /16 **Size:** 18 KB
14	Status of the implementation of EVSM/EVM/VMA improvement plan	7.5	✓	Sttatut des activités du plan d'amélioration de la GEV.docx **File desc:** **Date/Time:** 14/05/2015 01: /10: /11 **Size:** 16 KB
16	The cMYP is valid if the country requests for extension of support	7.8	✓	PPAC.docx **File desc:** **Date/Time:** 14/05/2015 01: /10: /11 **Size:** 11 KB
17	The costing tool for the valid cMYP, if the country is requesting an extension of support	7.8	✓	Outil de calcul des coûts PPAC.docx **File desc:** **Date/Time:** 14/05/2015 01: /18: /17 **Size:** 11 KB
18	Minutes of the ICC meeting approving the extension of vaccine support, if applicable	7.8	✓	ICC Reunion de validation du RAS GAVI 2014 KA.doc **File desc:** **Date/Time:** 14/05/2015 01: /17: /10 **Size:** 44 KB
19	Financial statement for the HSS funds (fiscal year 2014) signed by the Chief Accountant or by the Permanent Secretary of the Ministry of Health	8.1.3	✗	No file downloaded
20	Financial statement for the HSS funds for the period January-April 2015 signed by the Chief Accountant or by the Permanent Secretary of the Ministry of Health	8.1.3	✗	No file downloaded

21	External audit report on the allocation of HSS funds (fiscal year 2014)	8.1.3	✗	No file downloaded
22	Review report of the health sector - HSS	8.9.3	✗	No file downloaded
23	Census report - Type A CSO support	9.1.1	✗	No file downloaded
24	Financial statement for the allocation of Type B support to CSOs (fiscal year 2014)	9.2.4	✗	RAPPORT D'AUDIT EXTERNE.docx **File desc:** **Date/Time:** 14/05/2015 01: /13: /13 **Size:** 11 KB

25	External audit report on the Type B support to CSOs (fiscal year 2014)	9.2.4	✗	No file downloaded
26	Bank statements for each program funded in cash or a cumulative bank statement for all programs funded in cash, if funds are kept in the same bank account, where the opening and closing balance for the year 2014 as of i) January 1, 2014 and ii) as of December 31, 2014 are given	0	✓	RELEV BANC 2014.pdf **File desc:** **Date/Time:** 14/05/2015 01: /19: /15 **Size:** 888 KB
27	minutes_ of_ icc meeting_vaccin_change_presentation	7.7	✗	No file downloaded
28	Explanation for changes in target population	5.1	✗	No file downloaded
	Other documents		✗	No file downloaded