Subject: Response to GAVI on Ghana’s HPV Demonstration Programme Application

1. Please clarify funding sources for Training and Community Sensitisation and Mobilisation

With reference to Ghana’s HPV Demo Application - under Section 6 (Q29), it is indicated in the table that budget items; training and Community sensitization and mobilization; will be funded with funds that will be provided by GAVI. The funding allocation was based on previous introduction experience.

1. Given that the evaluations will be conducted by government wings, can you please clarify how the independence of the evaluations will be assured

The Research and Development Division (RDD) of the Ghana Health Service is independent of the Public Health Division under which the EPI Programme falls. The RDD is very credible as it has conducted many research activities of high international repute. The centres working under the RDD; Navrongo Health Research Centre; Kintampo Health Research Centre and Dangme West Health Research Centre are all centres of excellence in health research and programme evaluation. Therefore objectivity in the evaluation is assured and no conflict of interest is anticipated.

1. Country to provide information on the quadrivalent HPV vaccine received in the past, including its implementation

Sixty-four thousand (64 000) doses of Gardasil Human Papilloma Virus (HPV) Quadrivalent vaccine (lot number 1570Z with expiry date April 2013) were donated by an NGO to Ghana about 18 months ago. The vaccines were kept at the National Vaccine Cold Room but was detained by our Regulatory Agency, the Food and Drugs Board (FDB) as the product was not registered in Ghana and the manufacturers (Merck) were still conducting clinical trials in Ghana (copy of FDB letter attached).

The implementation plan was thus suspended. However the detention order has been lifted and approval for deployment of the vaccines was given by the FDB on the 4th October 2012 (copy of letter attached). The Planning Committee has been activated and will be meeting on the 18th of December 2012 to plan the deployment in the early part of 2013, in view of the expiry date.

1. Please clarify how the development/revision of a cervical cancer prevention and control strategy will be achieved

Cancer control strategy in the country is led by the Non Communicable Disease (NCD) Programme of the Ghana Health Service.

There is a National Cervical Cancer Prevention and Control Strategy which is part of the Overall National Strategy for Cancer Control in Ghana, 2012 -2016.

 The milestones towards the development are summarized below:

a. A National Cancer Control Steering Committee was set up by the Ministry of Health and as part of its mandate was to develop the National Strategy for cancer Control in Ghana.

b. The Committee then set up a TAG sub- committees in the areas of the priority cancers to develop the Cancer specific Prevention and Control Strategy.

c. The Cervical Cancer TAG was made up of various stakeholders including the academia, MOH/GHS technical staff, Civil Society Organization, Cervical Cancer Survivor Groups, etc. It was lead by Dr. Sylvia Deganus an Obstetrician Gynaecologist with expertise on Public Health and Cervical cancer. The TAG was also given the power to co-opt individuals with the requisite expertise to help write the document.

d. Based on the members experience this was further sub-divided into various groups based on the cancer continuum, namely:

    - Primary Prevention

    - Screening and Early Detection

    - Treatment

    - Palliative Care

    - Research

e. A core group was mandated to put the document together

 f. Finally there was a validation meeting which brought together a larger stakeholder group with final comments and the document was finalized.

 g. The whole process took about one year.

**NB: Please find attached the National Strategy for Cancer Control, 2012 -2016 (Relevant pages for cervical cancer 20 – 22)**

1. The country plans to start vaccinating girls in March 2013. Please clarify the feasibility of this ambitious timeline

The timeline appears ambitious. We were trying to link up with the donated HPV vaccine. However, we recognize it will not be possible so the two exercises will be undertaken separately. We shall first start the deployment of the donated HPV vaccines and build on the experience we gather for the deployment of the HPV to be donated by GAVI. The GAVI donated HPV will now be deployed in June 2013. The timeline has accordingly been revised and is attached for your perusal.

1. IRC notes that, although ICC minutes from October 2012 endorsing the HPV demonstration project are available, the attached ICC members signatures are from May 2012. The country is requested to submit up to date signatures

The signature of ICC members that was attached to the HPV vaccination application was wrongly dated. The date has therefore been corrected as per attached. The list includes the signature of Dr Ebenezer Appiah-Denkyira, the new Director General of the Ghana Health Service who took office in September 2012. We are sorry for the error.