

Responses to GAVI: Malawi HPV Demonstration Program Feedback

Clarification 1: Partners to provide financial support for the Training and for the Community Sensitization and Mobilization components of the program

The reviewers note that funds allocation for training and community sensitization and mobilization is very small compared to the planned activities dimension and scope. The funding gap in these components will be met by country level partners. Most of these partners were already part of the proposal development process e.g. CHAI, MCHIP, WHO, UNICEF & CDC.

The specific components to be supported are as shown in the budget table below. For some partners the actual amounts will be known as they finalize their budget processes especially for Year 2. However, they have all committed to supporting the implementation process as they have done in previous vaccine introduction activities. The amounts already committed/specified and those to be committed later after budget finalizations will be sufficient to fully support the demonstration program activities.

In addition to the monetary contributions, partners will be making in kind contributions of technical assistance, staff time, vehicles, and other elements to the overall project.

Budget table for Training and Community sensitization & mobilization components

Cost Category	Funding Source	Estimated cost per annum in USD		COMMENT
		Year 1	Year 2	
Training	GAVI	4,443	1,443	
	CHAI	6,000		CHAI has already committed 6000USD in yr 1; the others are committed, but yet to specify amounts
	<u>Other partners:</u> MCHIP, CDC		9,000	
Community Sensitization & mobilization	GAVI	2,323	1,130	
	CHAI	4,000		CHAI and WHO have specified amounts for year 1, and WHO has specified for year 2; the others are
	WHO	2,000	1,000	
	<u>Others partners</u>	1,000	2,000	

	UNICEF, UNFPA			committed, but yet to specify amounts
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Clarification 2: Plans to expand the involvement of Civil Society Organisations to ensure their participation, particularly in the Community Sensitization and Mobilization efforts

At pre-implementation stage, Civil Society Organizations (CSOs) such as Malawi Health Equity Network (MHEN) and Malawi Interfaith AIDS Association (MIA) will be incorporated into the expanded NTF which will function as a National Coordinating Committee for HPV Introduction.

At district level, local NGOs and CSOs present in the district will be part of the district coordinating committee for implementation of the HPV vaccination program. In Zomba such organizations are World Vision International (WVI), Malawi Red Cross, Millennium Villages Project, Emmanuel International, Wala Project, National Initiative for Civic Education (NICE), Creative Centre for Community Development (CRECCOM) and representatives of Community Based Organizations (CBOs). In Rumphi, NGOs & CSOs will include WVI, YONECO (a youth networking organization), NICE and CBOs.

The CSOs will help to mitigate the issues raised in **page 2, section 5** on gender & equity and religious groups. The MHEN and NICE will specifically assist on the gender issues while MIA will assist in developing strategies to be used in educating the religious groups that are opposed to vaccination. These National Level CSOs will also be involved in development of IEC materials.

Clarification 3: The country’s intention to test the integration of a specific adolescent health intervention(s) within HPV vaccine delivery in Year 2

The Malawi HPV Demonstration Programme will include piloting and assessment of an adolescent health (ADH) intervention. The feasibility assessment for ADH will be conducted alongside the programme evaluation data collection during year 1, and shared with stakeholders at the end of Year 1. At this time, stakeholders will make the final decision whether or not to move ahead with the ADH intervention, and will identify a method for selecting the intervention(s) to pair with HPV vaccine delivery. In year 2, the feasibility of integrating the selected ADH intervention in HPV Vaccine delivery will be assessed, and this assessment will be included in the Year 2 evaluation. Final recommendation by the National Task Force on implementation of the HPV vaccination programme at national level will include the recommendation on integration of the ADH

intervention within the HPV Vaccination program. Please see the attached timeline for precise timing.

Additional points of clarification:

- **Page 1, Section 1:** The reviewers indicate that Malawi has not indicated a first choice vaccine. However, under Question 1, we have indicated that the quadrivalent vaccine (Merck) is first choice, and we have left the “Preferred second presentation” box blank in order to indicate that we will only proceed once the quadrivalent vaccine is available.
- **Page 2, Section 4:** The reviewers note that there does not seem to be inclusion of UNFPA, an essential partner in this overall effort to introduce new RH interventions. However, UNFPA is a key member of the Reproductive Health Technical Working Group which endorsed this proposal and will provide general oversight to the implementation of this program. Additionally, at pre-implementation stage, the NTF will be expanded to incorporate all key stakeholders as a national coordinating committee for HPV introduction. Upon this observation, UNFPA re-echoed their commitment to being part of this important intervention. They are therefore part of partners to assist in meeting funding gaps as indicated in ‘Clarification 1’.
- **Page 3, Section 6:** Although Zomba district is 87% rural, Zomba town has a population of over 88,000, and Zomba is the fourth largest city in Malawi, therefore the project will provide the opportunity to assess delivery of the vaccine in urban areas of Malawi.
- **Page 4, Section 8:** The reviewers note that “The only missing piece (not specifically asked for) is use of an immunisation record, held at home by the girls’ family, as an effective way of keeping track of immunisation status of the target population individuals.” However this has been planned for. As indicated in response to Question 10 on page 11, “All [HPV] doses will be recorded in an updated woman’s health passport that girls will receive free of charge and that will allow them to track HPV vaccination completion along with other important health information.”