



GAVI Vaccine Investment Strategy Project

Country Consultation Results Summary

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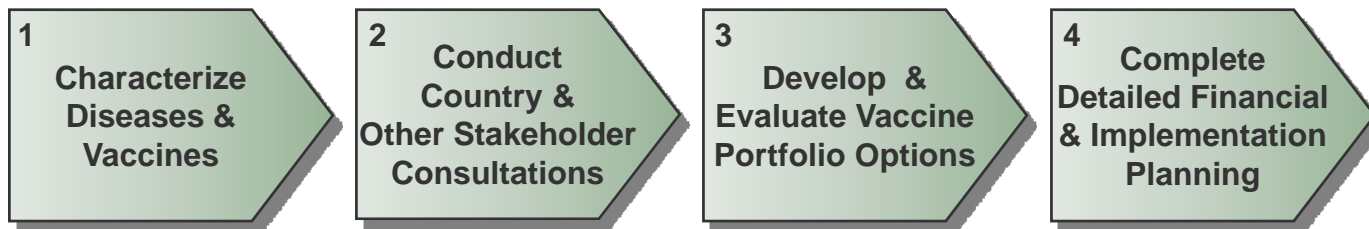
VISP Project Overview

OBJECTIVES & APPROACH

Project Objectives

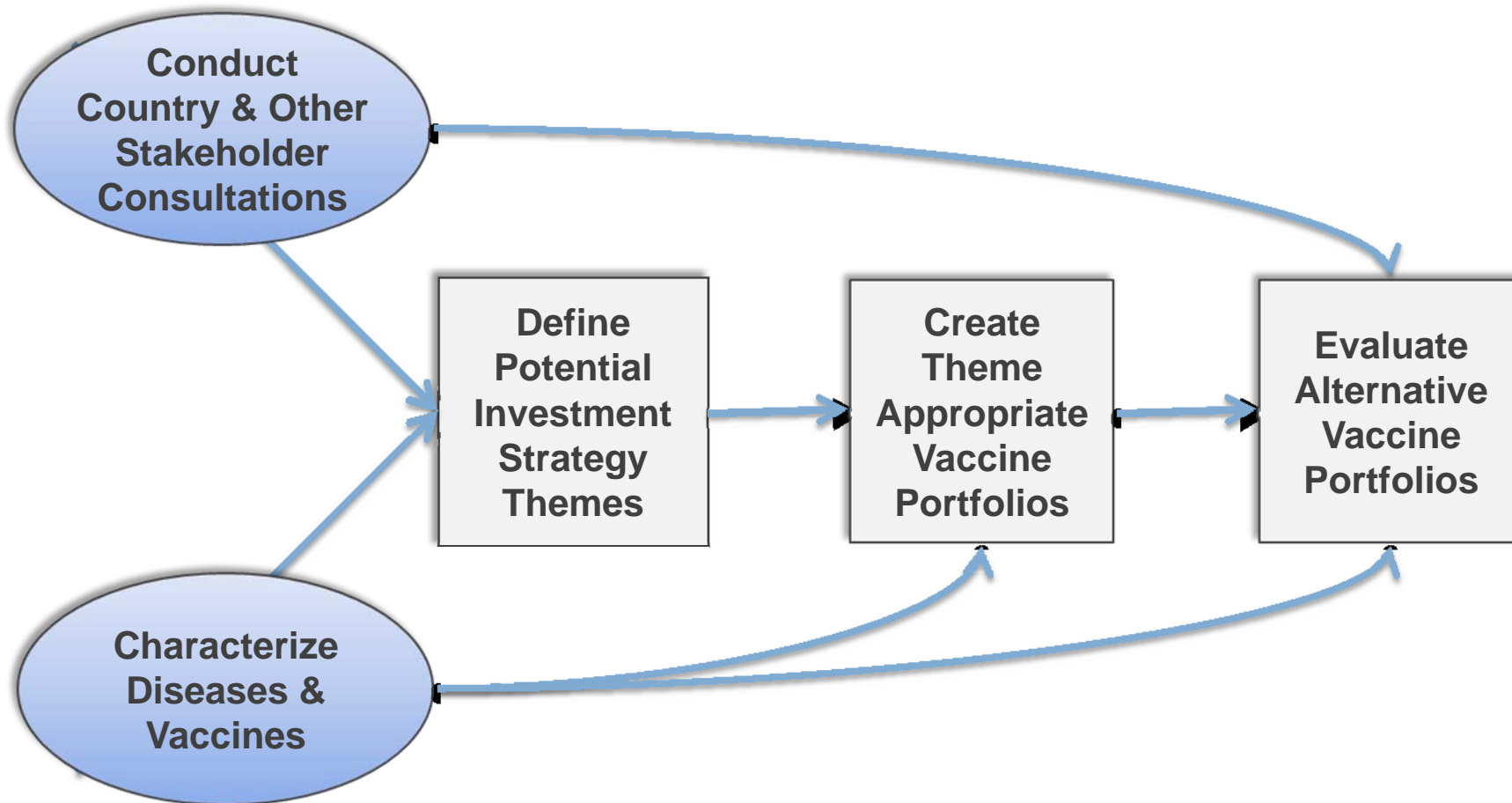
- Define vaccine investment strategy for the 2008-2012 timeframe
- Determine the optimal timing of GAVI's vaccine investments
- Identify associated activities that could benefit from GAVI support

Project Modules



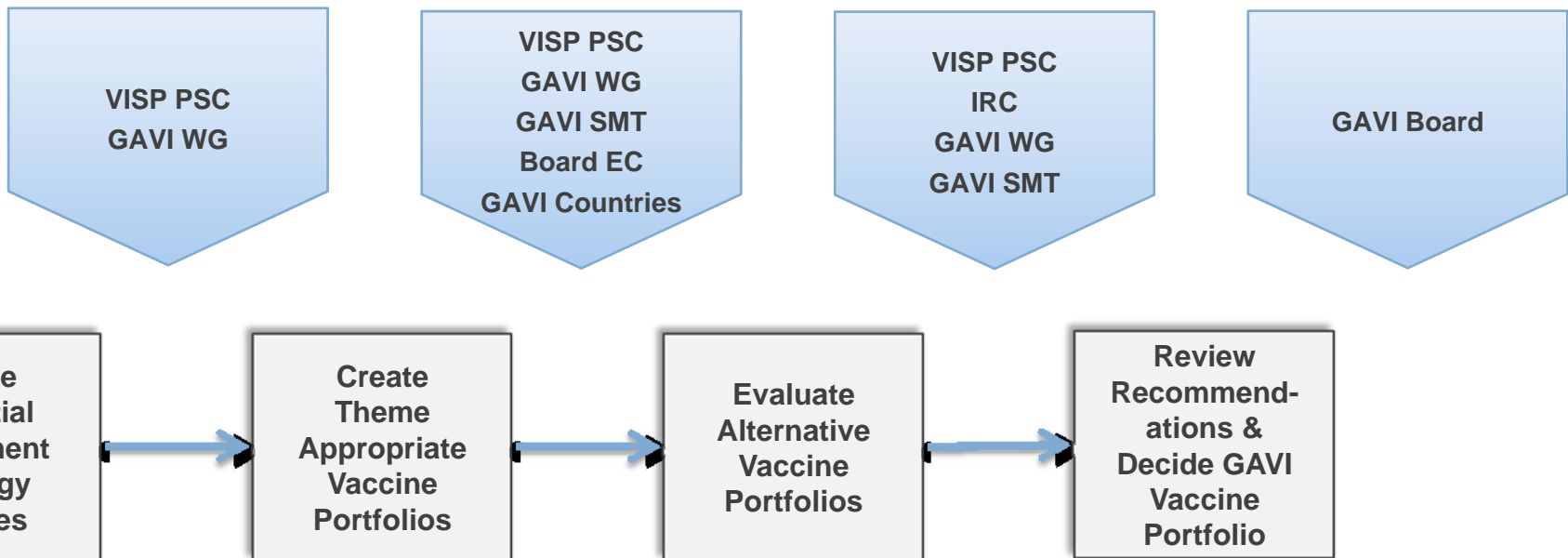
VISP Project Overview

STRATEGY DEVELOPMENT PROCESS



VISP Project Overview

PROJECT REVIEW PROCESS



WG GAVI Working Group
PSC VISP Project Steering Committee
SMT GAVI Senior Management Team
EC Board Executive Committee
IRC VISP Independent Review Committee

VISP Project Overview

COUNTRY CONSULTATION OBJECTIVES

- Solicit country stakeholder input on:
 - Criteria country decision-makers will consider when making new vaccine adoption decisions
 - Factors GAVI should consider when deciding which vaccines to include in its investment portfolio
 - Country prioritization of vaccines under consideration

VISP Project Overview

CONSULTATION QUESTION CATEGORIES

- What are the top healthcare issues facing your country?
- What criteria will your country consider when deciding which vaccines to adopt?
- What criteria should GAVI consider when deciding which vaccines to finance?
- Which vaccines will be the highest priority for your country?

VISP Project Overview

CONTENTS

- ***Country Consultation Scope***
- Top Country Healthcare Issues
- Key Country Decision Criteria
- Key GAVI Decision Criteria
- New Vaccine Familiarity & Priority

Country Consultation Scope

COUNTRY PARTICIPATION BY MODE

- Country consultations now complete
 - 37 countries represented
 - 237 in-country/telephone/video interviews
 - 147 on-line surveys

In-Country (n=7)	Videoconf (n=4)	Telephone (n=2)	Online (n=28)		
<ul style="list-style-type: none"> • Cambodia • Congo • Ghana • Kyrgyzstan • Mozambique • Senegal • Tanzania 	<ul style="list-style-type: none"> • PAHO <ul style="list-style-type: none"> – Bolivia – Haiti – Honduras – Nicaragua 	<ul style="list-style-type: none"> • Pakistan • Uganda 	<ul style="list-style-type: none"> • Afghanistan • Bangladesh • Benin • Bolivia¹ • Cameroon • Chad • Cote d'Ivoire • Cuba • DRC • Ethiopia 	<ul style="list-style-type: none"> • Guinea • Haiti¹ • India • Indonesia • Kenya • Lesotho • Madagascar • Moldova • Mongolia 	<ul style="list-style-type: none"> • Nepal • Nigeria • Pakistan¹ • Rwanda • Ukraine • Uganda¹ • Vietnam • Yemen • Zambia

¹Country also represented in telephone or videoconference consultation

Country Consultation Scope

COUNTRY PARTICIPATION BY REGION

AFRO (19 OF 36)		AMRO (5 OF 6)	EMRO (3 OF 6)	EURO (3 OF 8)	SEARO (4 OF 9)	WPRO (3 OF 7)
<ul style="list-style-type: none"> • Benin • Cameroon • Chad • Congo • Cote d'Ivoire • DRC • Ethiopia • Ghana • Guinea • Kenya 	<ul style="list-style-type: none"> • Lesotho • Madagascar • Mozambique • Nigeria • Rwanda • Senegal • Tanzania • Uganda¹ • Zambia 	<ul style="list-style-type: none"> • Bolivia¹ • Cuba • Haiti¹ • Honduras • Nicaragua 	<ul style="list-style-type: none"> • Afghanistan • Pakistan¹ • Yemen 	<ul style="list-style-type: none"> • Kyrgyzstan • Moldova • Ukraine 	<ul style="list-style-type: none"> • Bangladesh • India • Indonesia • Nepal 	<ul style="list-style-type: none"> • Cambodia • Mongolia • Vietnam
Live: 209	Live: 3	Live: 1	Live: 14	Live: 0	Live: 10	Live: 10
Online: 81	Online: 9	Online: 20	Online: 4	Online: 24	Online: 8	Online: 8

¹Country also represented in telephone or videoconference consultation

Country Consultation Scope

COUNTRY PARTICIPATION BY GAVI TIER

LEAST POOR (5 of 12)	INTERMEDIATE (11 of 16)		POOREST (16 of 31)		FRAGILE (5 of 13)
<ul style="list-style-type: none"> • Bolivia¹ • Cameroon • Honduras • Indonesia • Ukraine 	<ul style="list-style-type: none"> • Cuba • Ghana • India • Kenya • Kyrgyzstan • Moldova 	<ul style="list-style-type: none"> • Mongolia • Nicaragua • Nigeria • Pakistan¹ • Vietnam 	<ul style="list-style-type: none"> • Bangladesh • Benin • Cambodia • Chad • Ethiopia • Guinea • Lesotho • Madagascar 	<ul style="list-style-type: none"> • Mozambique • Nepal • Rwanda • Senegal • Tanzania • Uganda¹ • Yemen • Zambia 	<ul style="list-style-type: none"> • Afghanistan • Congo • Cote d'Ivoire • DRC • Haiti¹
Live: 2 Online: 11	Live: 68 Online: 56		Live: 108 Online: 55		Live: 59 Online: 25

¹Country also represented in telephone or videoconference consultation

Country Consultation Scope

COUNTRY CONSULTATION PARTICIPANTS

CATEGORY	n	AFRO	AMRO	EMRO	EURO	SEARO	WPRO
Ministry of Health	128	96	3	6	10	6	7
Ministry of Finance	12	10	0	1	0	0	1
WHO	31	24	1	1	1	2	2
UNICEF	18	14	0	0	0	0	4
Other Multi- & Bilaterals	37	29	2	1	1	2	2
Health Service Providers	11	8	0	0	1	1	1
Academics/Researchers	24	20	0	1	0	3	0
Medical Associations	16	15	0	0	1	0	0
NGOs	79	47	6	11	3	10	2
Journalists/Press	28	27	0	0	1	0	0
TOTALS	384	290	12	21	18	24	19

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- Country Consultation Scope
- ***Top Country Healthcare Issues***
- Key Country Decision Criteria
- Key GAVI Decision Criteria
- New Vaccine Familiarity & Priority

Top Country Healthcare Issues

QUESTION & ANALYSIS

QUESTION

- What would you say are the biggest health care problems facing your country?

ANALYSIS

- % who say the issue is one of the two biggest health care problems facing their country

Top Country Healthcare Issues

TOP ISSUES

- **Infrastructure:** number and quality of health care facilities; lack of equipment
- **Infectious diseases:** preventing and treating diseases such as malaria, diarrhea and acute respiratory infections
- **Human resources:** lack of qualified health care workers, including doctors; training; low compensation, low retention
- **Cost:** cost of health care or medicine; lack of financing
- **Maternal and Infant Care:** prenatal health care for pregnant women and infant care
- **Public Education:** low level of knowledge about health issues among public

Top Country Healthcare Issues

BY REGION

Priority	AFRO (n=232)	AMRO (n=12)	EMRO (n=20)	EURO (n=18)	SEARO (n=24)	WPRO (n=19)
1 st Tier	<ul style="list-style-type: none"> • Infrastructure • Infectious diseases 	<ul style="list-style-type: none"> • Infectious disease 	<ul style="list-style-type: none"> • Infrastructure • Human resources 	<ul style="list-style-type: none"> • Human resources 	<ul style="list-style-type: none"> • Infrastructure 	<ul style="list-style-type: none"> • Infrastructure • Maternal & infant care • Cost
2 nd Tier	<ul style="list-style-type: none"> • Human resources • Cost 	<ul style="list-style-type: none"> • Infrastructure • Cost 	<ul style="list-style-type: none"> • Maternal & infant care • Infectious diseases 	<ul style="list-style-type: none"> • Cost 	<ul style="list-style-type: none"> • Human resources 	<ul style="list-style-type: none"> • Infectious diseases • Public education
3 rd Tier	<ul style="list-style-type: none"> • AIDS • Public education • Maternal & infant care • Health system 	<ul style="list-style-type: none"> • AIDS • Human resources • Hunger & malnutrition • Diarrhea 	<ul style="list-style-type: none"> • Public education • Cost 	<ul style="list-style-type: none"> • Infectious diseases 	<ul style="list-style-type: none"> • Immunizing children • Maternal & infant care 	<ul style="list-style-type: none"> • Human resources
4 th Tier		<ul style="list-style-type: none"> • Public education 	<ul style="list-style-type: none"> • Water quality 	<ul style="list-style-type: none"> • Infrastructure • Health system • Public education 	<ul style="list-style-type: none"> • Cost • Chronic diseases • Hunger & malnutrition • Infectious diseases • Water quality • Public education 	<ul style="list-style-type: none"> • AIDS • Diarrhea • Chronic diseases

Top Country Healthcare Issues

BY FINANCING TIERS

Priority	Least Poor (n=13)	Intermediate (n=114)	Poorest (n=117)	Fragile (n=81)
1 st Tier	<ul style="list-style-type: none"> • Human resources 	<ul style="list-style-type: none"> • Infrastructure 	<ul style="list-style-type: none"> • Infrastructure • Infectious diseases 	<ul style="list-style-type: none"> • Infectious diseases
2 nd Tier	<ul style="list-style-type: none"> • Infectious diseases • Cost • Infrastructure 	<ul style="list-style-type: none"> • Infectious diseases • Human resources • Cost • Public education 	<ul style="list-style-type: none"> • Human resources • Cost 	<ul style="list-style-type: none"> • Infrastructure
3 rd Tier	<ul style="list-style-type: none"> • AIDS • Public education • Diarrhea 	<ul style="list-style-type: none"> • Maternal & infant care • Chronic diseases • Health system 	<ul style="list-style-type: none"> • Maternal & infant care • AIDS 	<ul style="list-style-type: none"> • Human resources • Cost • Maternal & infant care
4 th Tier	<ul style="list-style-type: none"> • Chronic diseases • Health systems 		<ul style="list-style-type: none"> • Public education • Health system • Diarrhea 	<ul style="list-style-type: none"> • Health system • Public education

Top Country Healthcare Issues

BY ORGANIZATION TYPE

Priority	Government ¹ (n=128)	Multi & Bilaterals ² (n=75)	Other Experts ³ (n=122)
1 st Tier	<ul style="list-style-type: none"> • Infectious diseases 	<ul style="list-style-type: none"> • Infrastructure 	<ul style="list-style-type: none"> • Infrastructure
2 nd Tier	<ul style="list-style-type: none"> • Infrastructure • Cost 	<ul style="list-style-type: none"> • Human resources 	<ul style="list-style-type: none"> • Infectious diseases • Cost
3 rd Tier	<ul style="list-style-type: none"> • Human resources 	<ul style="list-style-type: none"> • Infectious diseases • Cost • Maternal & infant care 	<ul style="list-style-type: none"> • Public education • Human resources
4 th Tier	<ul style="list-style-type: none"> • Public education • Maternal & infant care • AIDS 	<ul style="list-style-type: none"> • AIDS • Public education • Health system 	<ul style="list-style-type: none"> • AIDS • Maternal & infant care • Hunger & nutrition

¹Government = Ministry of Health, Ministry of Finance, other government agencies

²Multi and bilaterals = WHO, UNICEF, other multi and bilateral donors

³Other Experts = health service providers, academics/researchers, medical associations, NGOs, journalists

*Numbers in parentheses = number of people who answered questions

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- Country Consultation Scope
- Top Country Healthcare Issues
- ***Key Country Decision Criteria***
- Key GAVI Decision Criteria
- New Vaccine Familiarity & Priority

Key Country Decision Criteria

QUESTION & ANALYSIS

BACKGROUND

- Participants were asked to assess 12 criteria for importance for new vaccine adoption decision-making

QUESTION

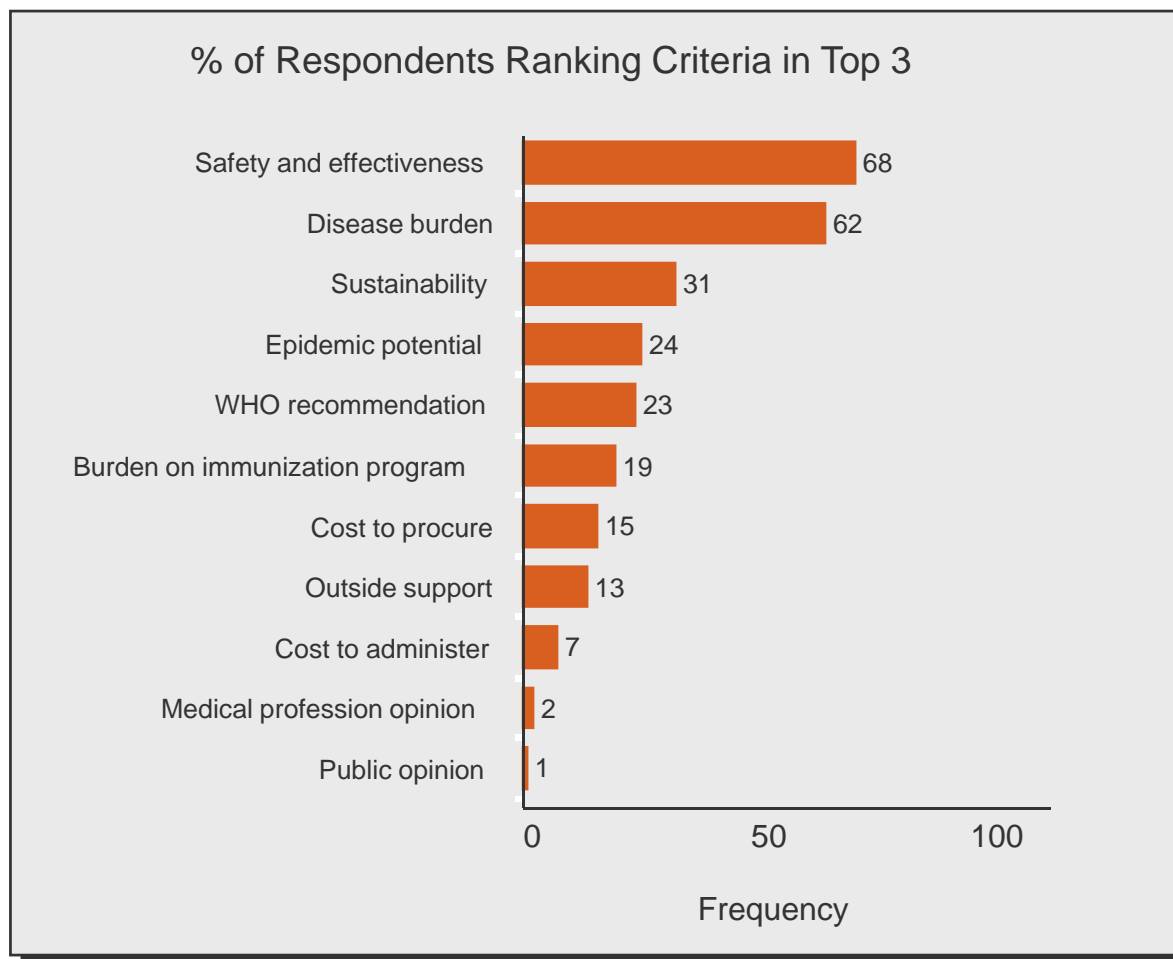
- Of all these criteria, which are the most important when you think about adding a new vaccine?

ANALYSIS

- % who say the criteria is among the top three most important

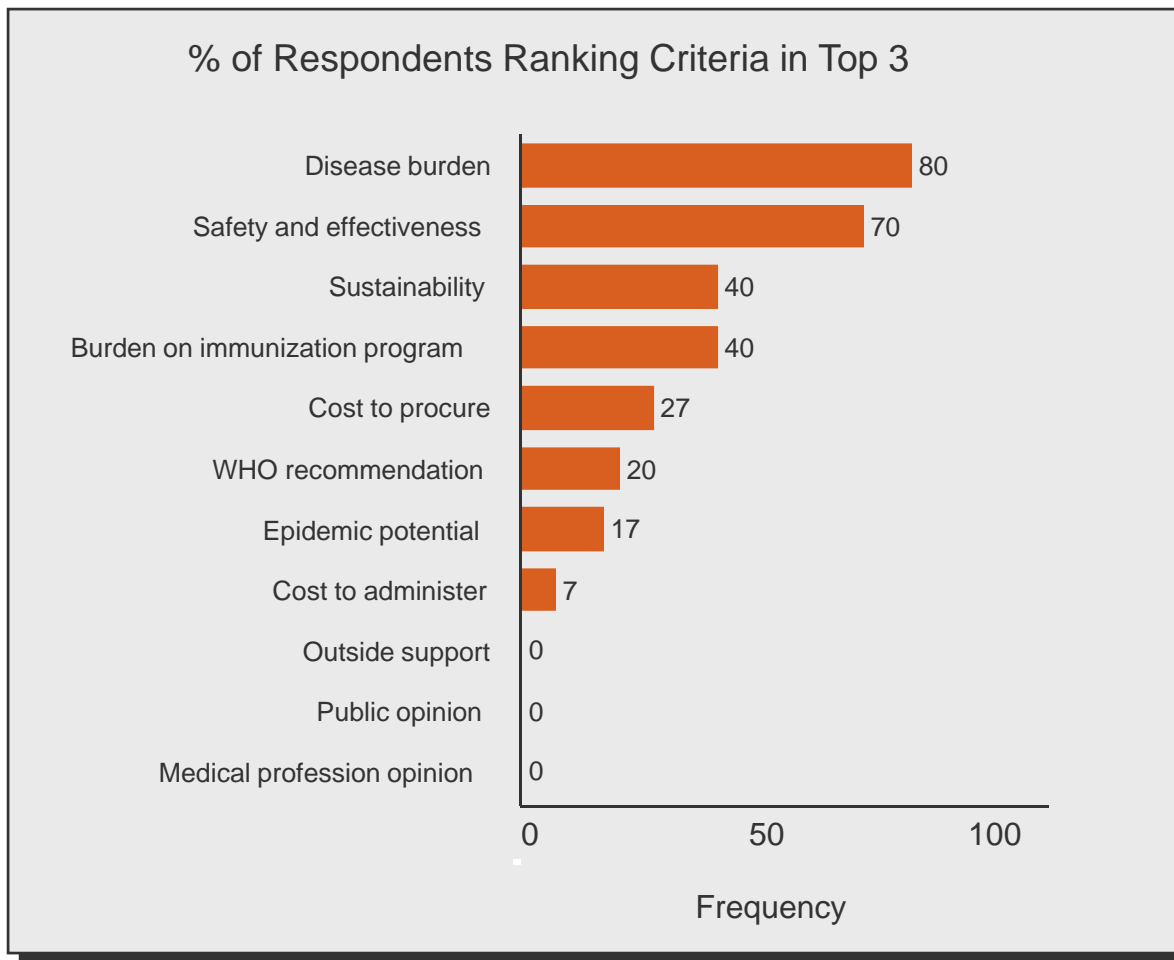
Key Country Decision Criteria

AFRO (n = 264)



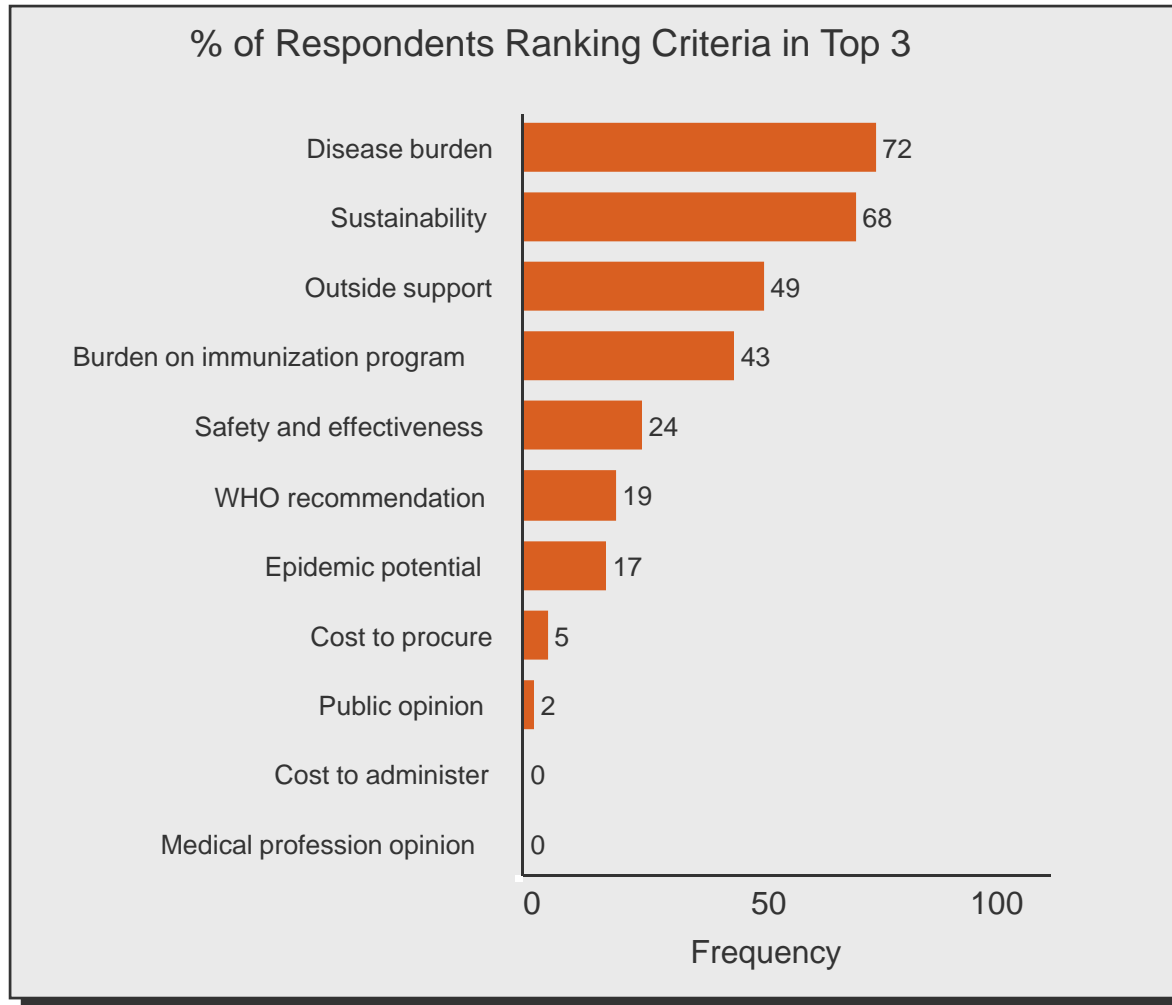
Key Country Decision Criteria

AMRO (n = 12)



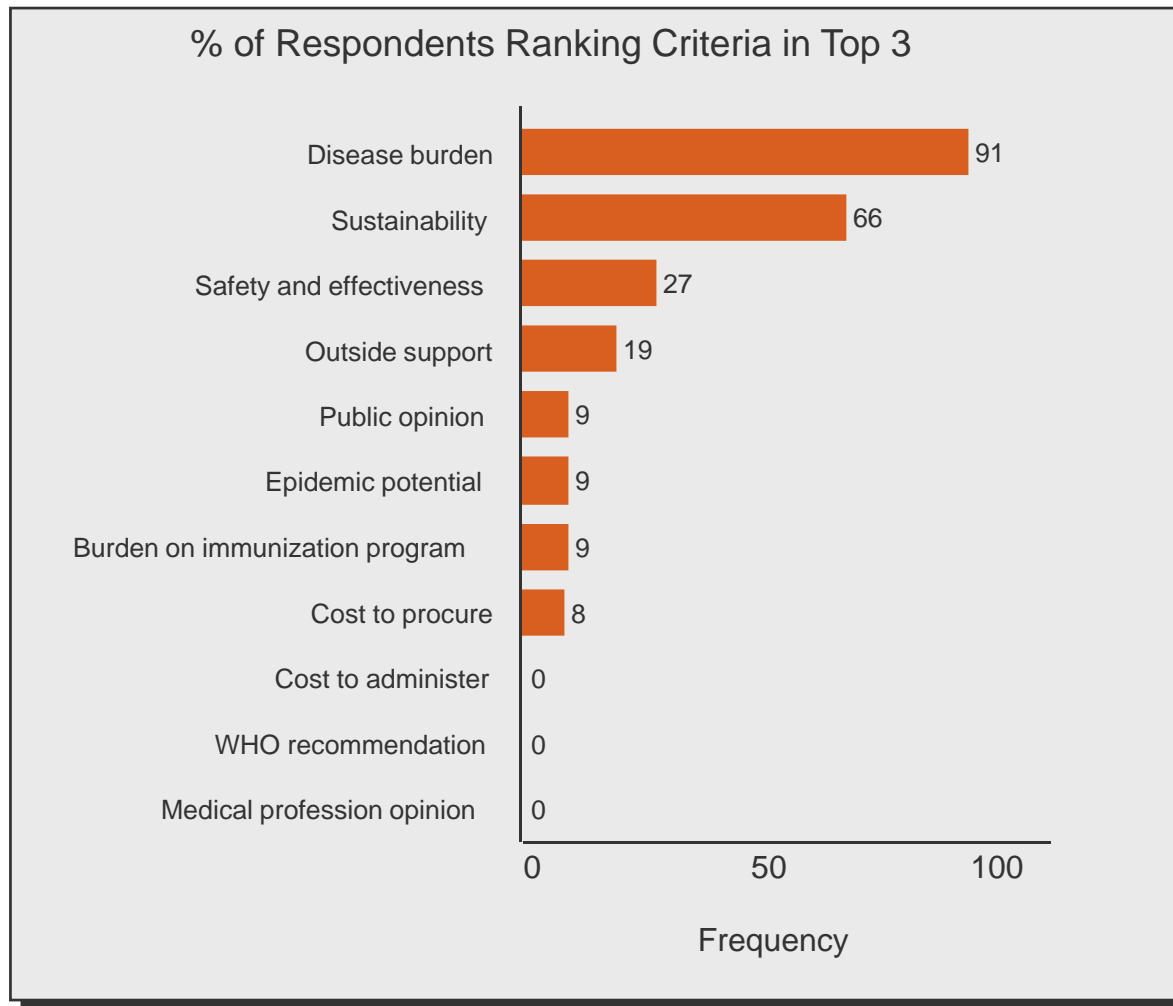
Key Country Decision Criteria

EMRO (n = 20)



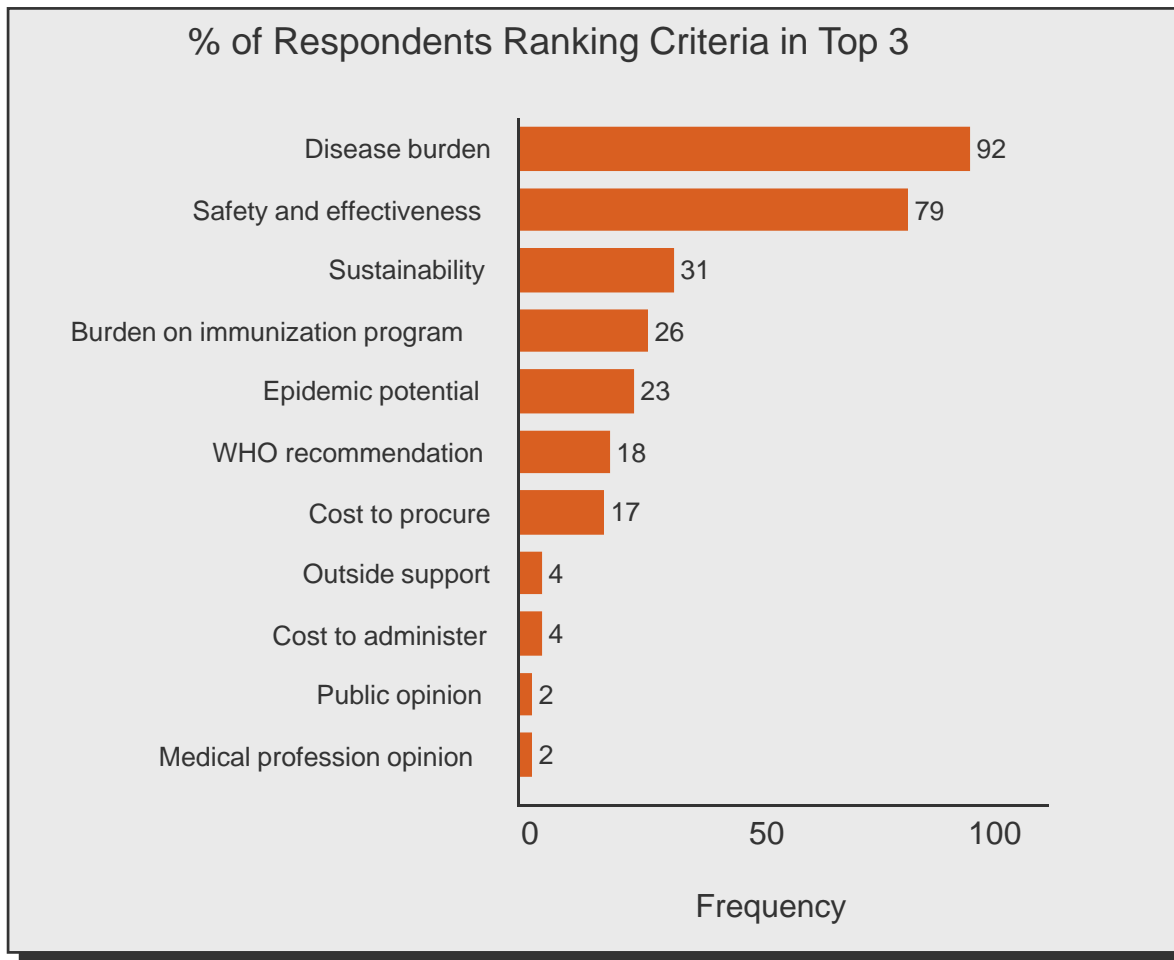
Key Country Decision Criteria

EURO (n = 7)



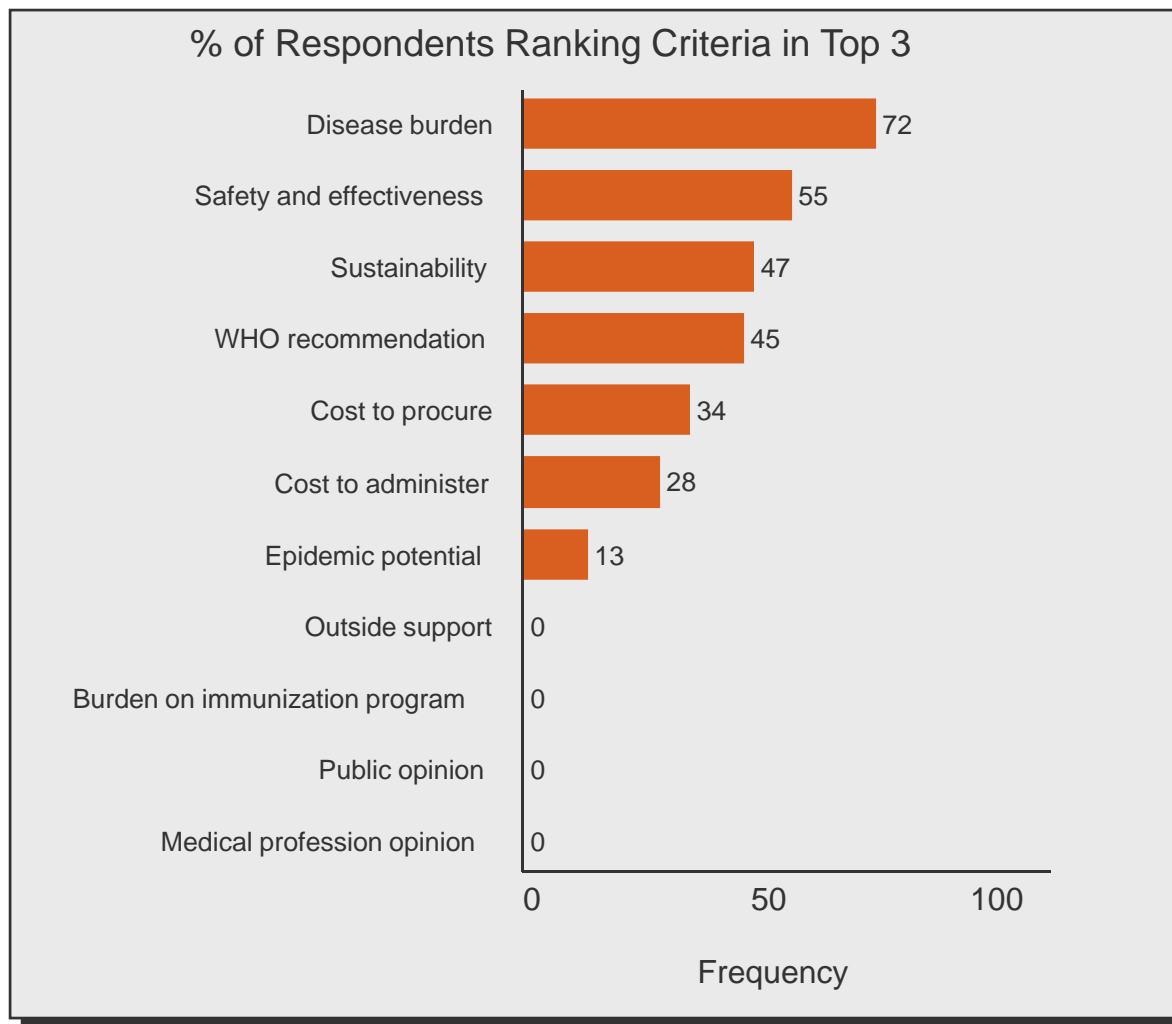
Key Country Decision Criteria

SEARO (n = 19)



Key Country Decision Criteria

WPRO (n = 15)



Key Country Decision Criteria

BY REGION

Priority	AFRO (n=264)	AMRO (n=20)	EMRO (n=7)	EURO (n=19)	SEARO (n=15)	WPRO (n=12)
1 st Tier	<ul style="list-style-type: none"> • Safety & effectiveness • Disease burden 	<ul style="list-style-type: none"> • Disease burden • Safety & effectiveness 	<ul style="list-style-type: none"> • Disease burden • Sustainability 	<ul style="list-style-type: none"> • Disease Burden 	<ul style="list-style-type: none"> • Disease burden • Safety & effectiveness 	<ul style="list-style-type: none"> • Disease burden
2 nd Tier	<ul style="list-style-type: none"> • Sustainability 	<ul style="list-style-type: none"> • Sustainability • Burden on immunization program 	<ul style="list-style-type: none"> • Outside support • Burden on immunization program 	<ul style="list-style-type: none"> • Sustainability 	<ul style="list-style-type: none"> • Sustainability • Burden on immunization program • Epidemic potential 	<ul style="list-style-type: none"> • Safety & effectiveness • Sustainability • WHO recommendation
3 rd Tier	<ul style="list-style-type: none"> • Epidemic potential • WHO recommendation 	<ul style="list-style-type: none"> • Cost to procure 	<ul style="list-style-type: none"> • Safety & effectiveness • WHO recommendation • Epidemic potential 	<ul style="list-style-type: none"> • Safety & effectiveness • Outside support 	<ul style="list-style-type: none"> • WHO recommendation • Cost to procure 	<ul style="list-style-type: none"> • Cost to procure • Cost to administer
4 th Tier	<ul style="list-style-type: none"> • Burden on immunization program • Cost to procure • Outside support • Cost to administer 	<ul style="list-style-type: none"> • WHO recommendation • Epidemic potential 	<ul style="list-style-type: none"> • Cost to procure 	<ul style="list-style-type: none"> • Epidemic potential • Burden on immunization program • Public opinion • Cost to procure 		<ul style="list-style-type: none"> • Epidemic potential

Key Country Decision Criteria

BY FINANCING TIERS

Priority	Least Poor (n=9)	Intermediate (n=102)	Poorest (n=145)	Fragile (n=81)
1 st Tier	<ul style="list-style-type: none"> • Disease burden 	<ul style="list-style-type: none"> • Disease burden • Safety & effectiveness 	<ul style="list-style-type: none"> • Disease burden • Safety & effectiveness 	<ul style="list-style-type: none"> • Safety & effectiveness • Disease burden
2 nd Tier	<ul style="list-style-type: none"> • Safety & effectiveness • sustainability 	<ul style="list-style-type: none"> • sustainability 	<ul style="list-style-type: none"> • Sustainability 	<ul style="list-style-type: none"> • Burden on immunization program • Epidemic potential
3 rd Tier	<ul style="list-style-type: none"> • Epidemic potential • Cost to procure • WHO recommendation 	<ul style="list-style-type: none"> • WHO recommendation • Epidemic potential • Outside support • Burden on immunization program • Cost to procure 	<ul style="list-style-type: none"> • WHO recommendation • Cost to procure • Epidemic potential • Burden on immunization • Outside support 	<ul style="list-style-type: none"> • WHO recommendation
4 th Tier	<ul style="list-style-type: none"> • Cost to administer 	<ul style="list-style-type: none"> • Cost to administer 	<ul style="list-style-type: none"> • Cost to administer 	<ul style="list-style-type: none"> • Outside support • Sustainability • Cost to procure • Cost to administer

Key Country Decision Criteria

BY ORGANIZATION TYPE

Priority	Government ¹ (n=128)	Multi & Bilaterals ² (n=75)	Other Experts ³ (n=122)
1 st Tier	<ul style="list-style-type: none"> • Disease burden • Safety & effectiveness 	<ul style="list-style-type: none"> • Disease burden • Safety & effectiveness 	<ul style="list-style-type: none"> • Safety & effectiveness
2 nd Tier	<ul style="list-style-type: none"> • Sustainability • WHO recommendation • Epidemic potential 	<ul style="list-style-type: none"> • Sustainability 	<ul style="list-style-type: none"> • Disease burden
3 rd Tier	<ul style="list-style-type: none"> • Outside support • Burden on immunization program • Cost to procure 	<ul style="list-style-type: none"> • Burden on immunization program • Cost to procure • WHO recommendation • Epidemic potential 	<ul style="list-style-type: none"> • Sustainability • Epidemic potential • WHO recommendation
4 th Tier	<ul style="list-style-type: none"> • Cost to administer 	<ul style="list-style-type: none"> • Outside support • Cost to administer 	<ul style="list-style-type: none"> • Burden on immunization program • Cost to procure • Cost to administer • Outside support • Medical professional opinion

¹Government = Ministry of Health, Ministry of Finance, other government agencies

²Multi and bilaterals = WHO, UNICEF, other multi and bilateral donors

³Other Experts = health service providers, academics/researchers, medical associations, NGOs, journalists

*Numbers in parentheses = number of people who answered questions

Key Country Decision Criteria

CRITERIA ROLE IN ACTUAL DECISION-MAKING

- Large majority think these criteria will be part of the decision making process to a great or moderate extent*
- This finding holds across all regions, financial tiers, and organization types

**asked in online survey only*

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- ***Key GAVI Decision Criteria***
- New Vaccine Familiarity & Priority

Key GAVI Decision Criteria

QUESTION & ANALYSIS

QUESTION

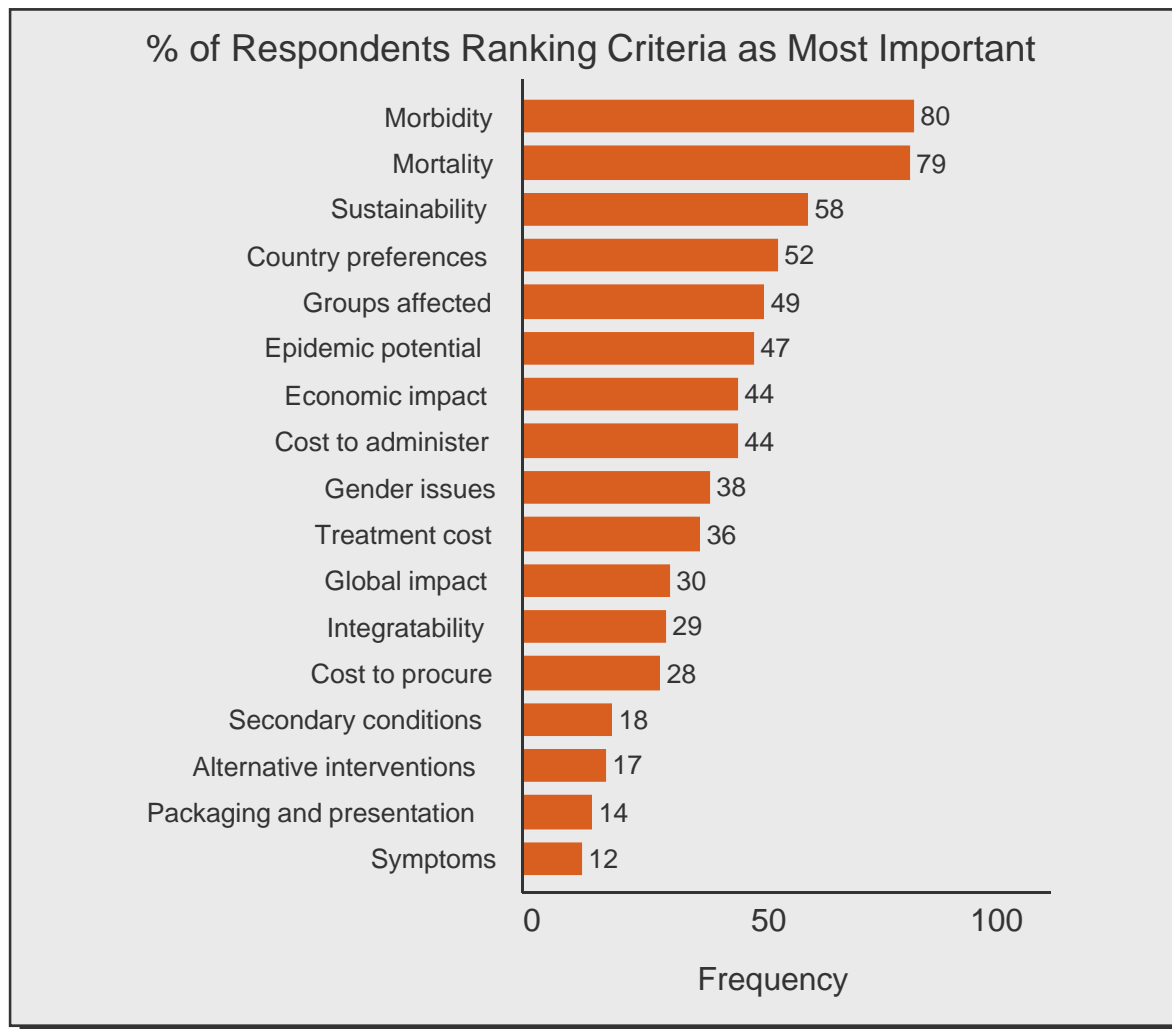
- Thinking about the criteria GAVI will use to decide which vaccines to finance, how important should the following criteria be when GAVI is considering which vaccines to invest in?

ANALYSIS

- % who say the criterion is among the most important (i.e., “definitely consider”)

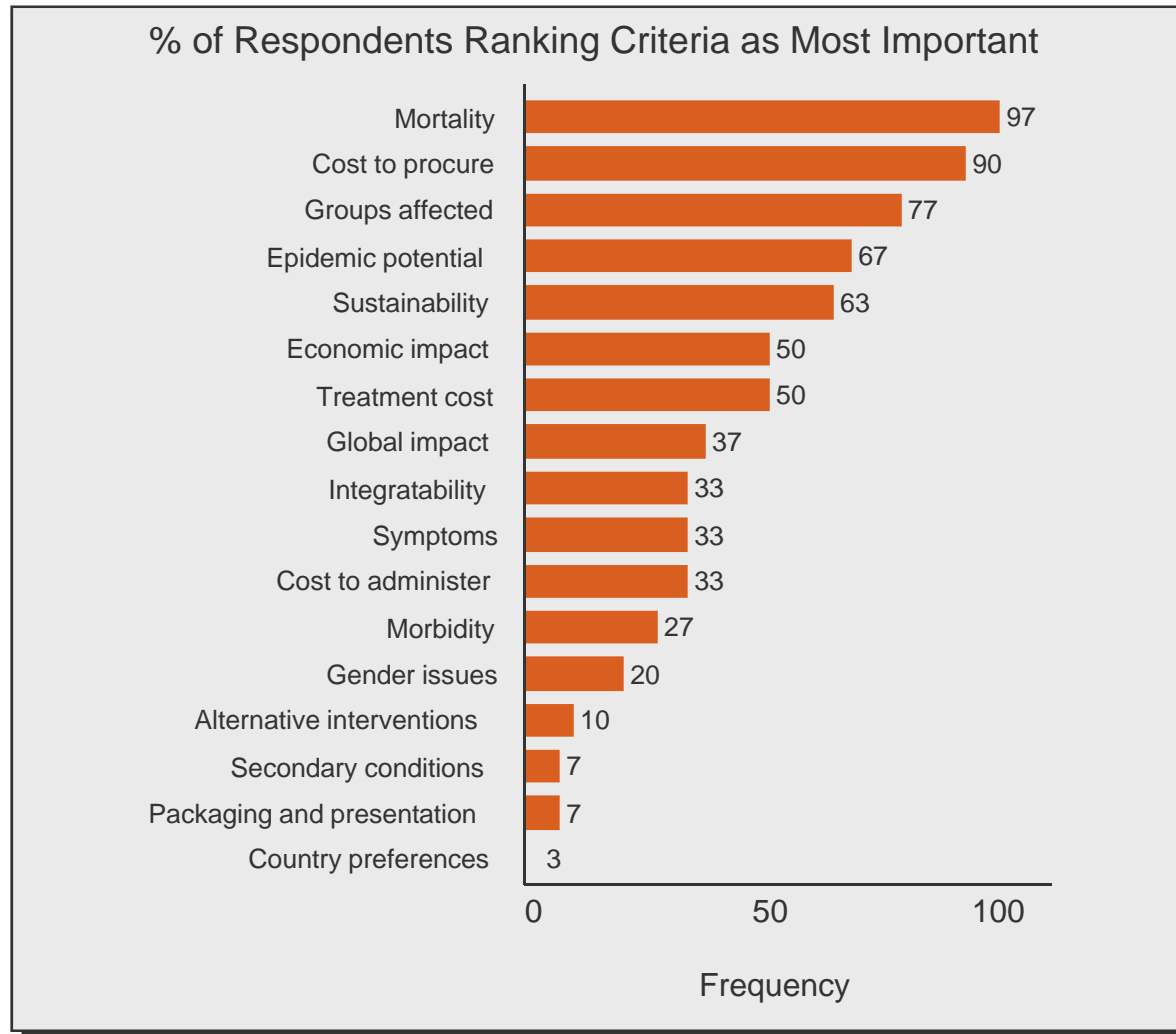
Key GAVI Decision Criteria

AFRO (n = 162)



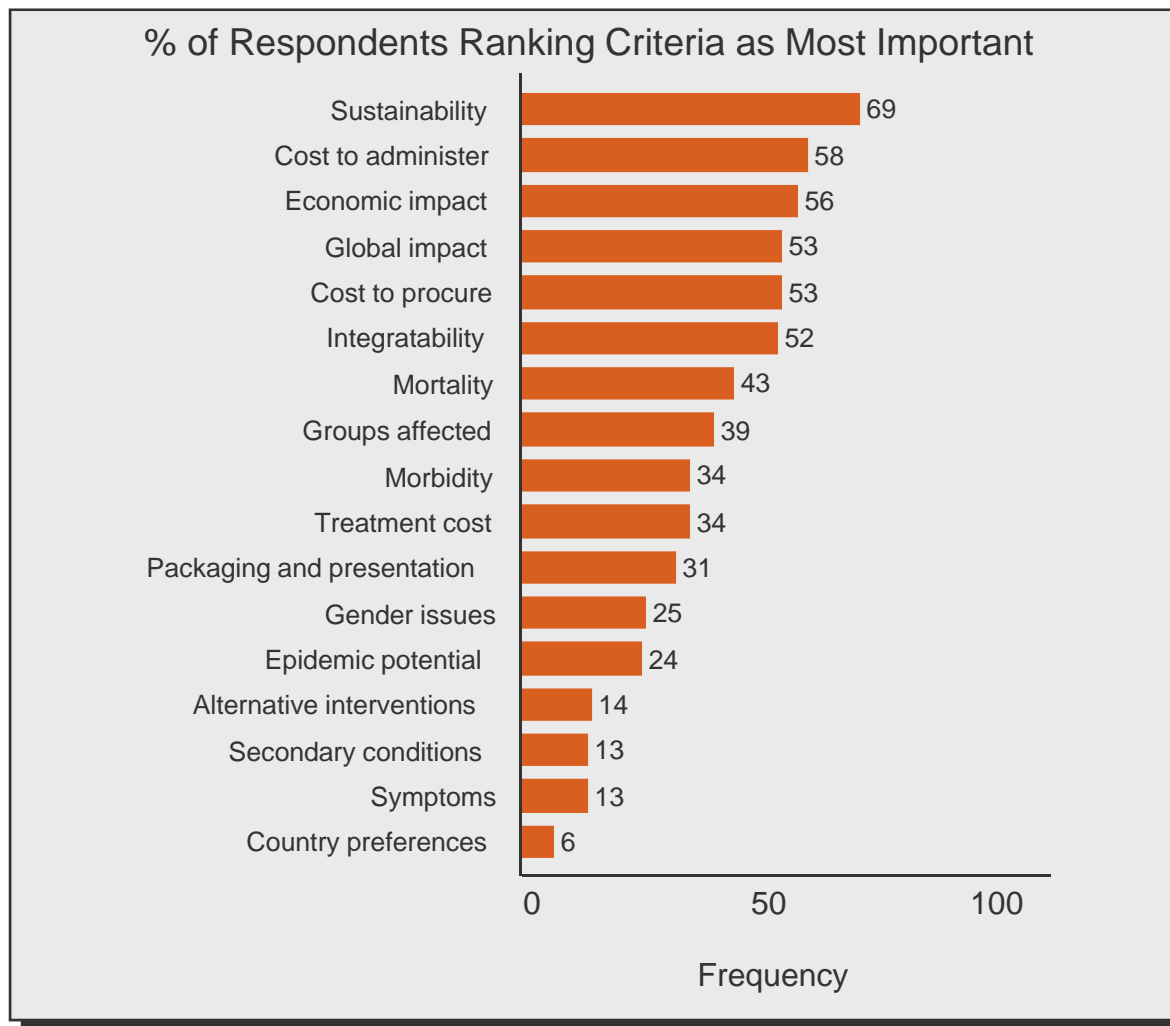
Key GAVI Decision Criteria

AMRO (n = 12)



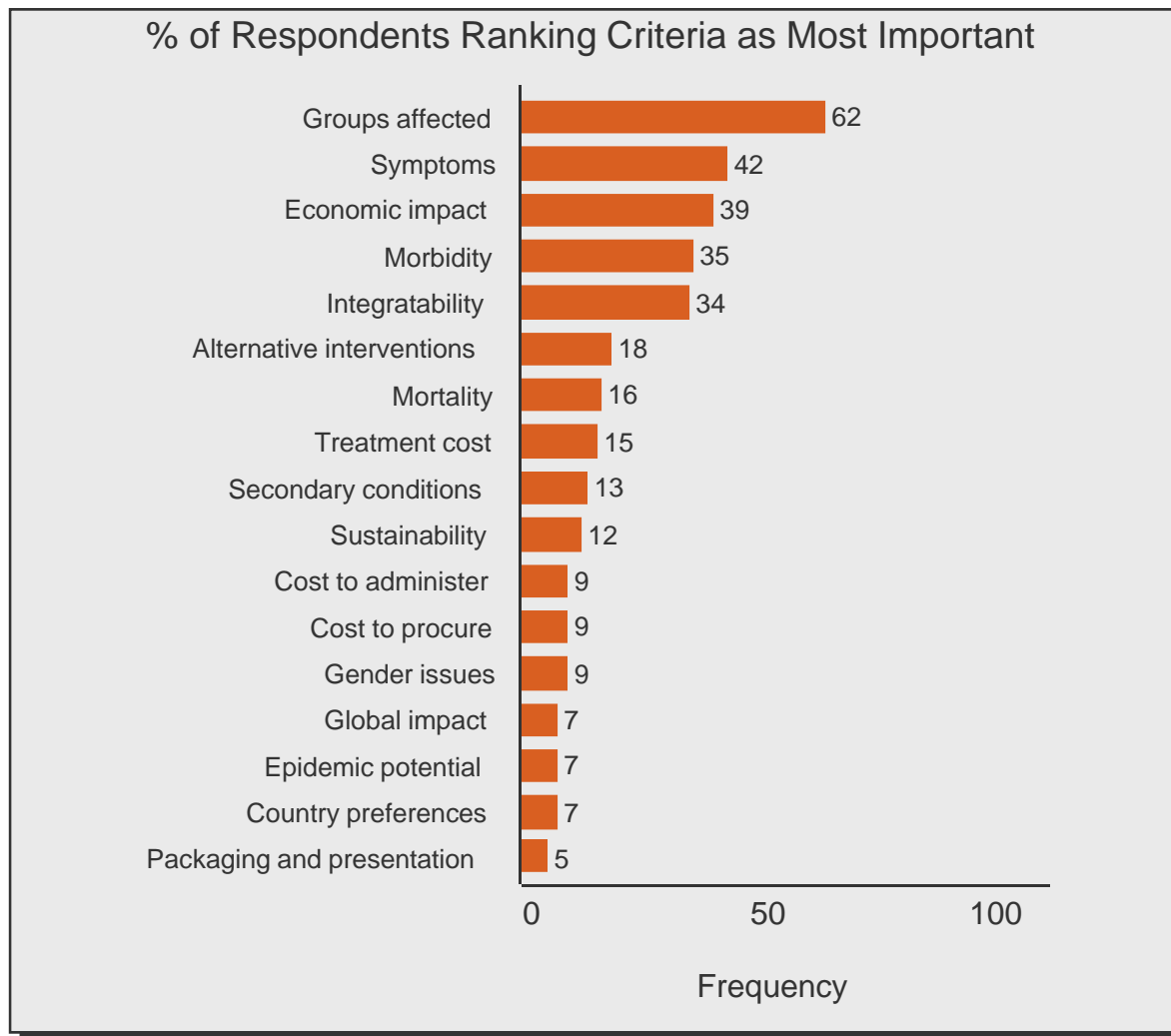
Key GAVI Decision Criteria

EMRO / EURO (n = 21)



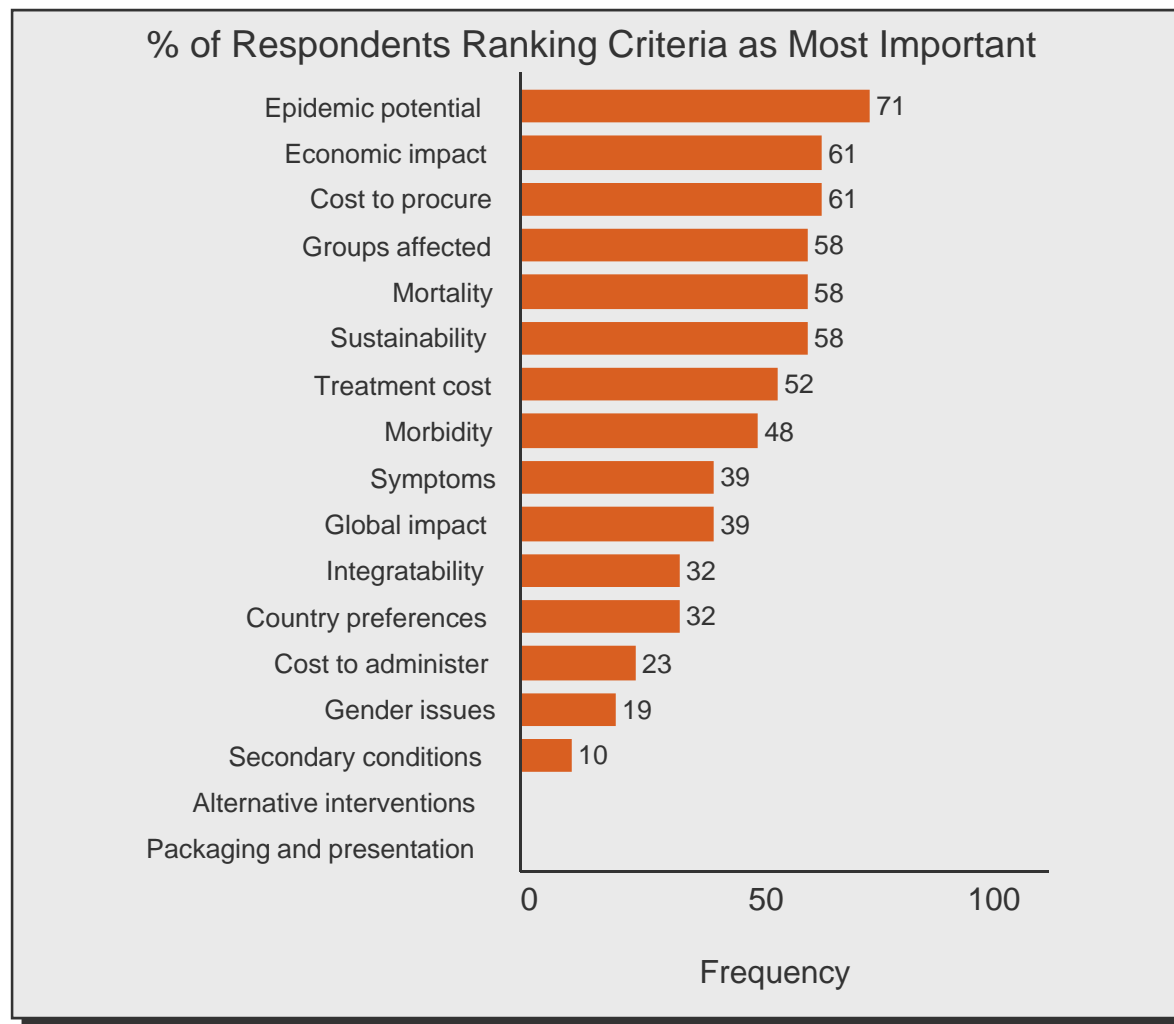
Key GAVI Decision Criteria

SEARO (n = 18)



Key GAVI Decision Criteria

WPRO (n = 10)



Key GAVI Decision Criteria

BY REGION

Priority	AFRO (n=162)	AMRO (n=12)	EMRO / EMRO (n=21)	SEARO (n=18)	WPRO (n=10)
1 st Tier	<ul style="list-style-type: none"> • Morbidity • Mortality 	<ul style="list-style-type: none"> • Mortality • Cost to procure 	<ul style="list-style-type: none"> • Sustainability 	<ul style="list-style-type: none"> • Groups affected 	<ul style="list-style-type: none"> • Epidemic potential
2 nd Tier	<ul style="list-style-type: none"> • Sustainability • Country preferences 	<ul style="list-style-type: none"> • Groups affected • Epidemic potential • Sustainability 	<ul style="list-style-type: none"> • Cost to administer • Economic impact • Global impact • Integratability 	<ul style="list-style-type: none"> • Symptoms 	<ul style="list-style-type: none"> • Economic impact • Cost to procure • Groups affected • Mortality • Sustainability
3 rd Tier	<ul style="list-style-type: none"> • Groups affected • Epidemic potential • Economic impact • Cost to administer 	<ul style="list-style-type: none"> • Economic impact • Treatment cost 	<ul style="list-style-type: none"> • Mortality 	<ul style="list-style-type: none"> • Economic impact • Morbidity • Integratability 	<ul style="list-style-type: none"> • Treatment cost • Morbidity
4 th Tier	<ul style="list-style-type: none"> • Gender issues • Treatment costs • Global impact 	<ul style="list-style-type: none"> • Global impact • Integratability • Symptoms • Cost to administer 	<ul style="list-style-type: none"> • Groups affected • Morbidity • Treatment cost • Packaging & presentation 		<ul style="list-style-type: none"> • Symptoms • Global impact • Integratability • Country preferences

Key GAVI Decision Criteria

BY FINANCING TIERS

Priority	Least Poor (n=8)	Intermediate (n=74)	Poorest (n=89)	Fragile (n=52)
1 st Tier	<ul style="list-style-type: none"> • Groups affected 	<ul style="list-style-type: none"> • Morbidity • Mortality 	<ul style="list-style-type: none"> • Morbidity • Mortality 	<ul style="list-style-type: none"> • Mortality • Sustainability • Cost to administer
2 nd Tier	<ul style="list-style-type: none"> • Mortality • Cost to procure • Treatment cost 	<ul style="list-style-type: none"> • Epidemic potential • Economic impact 	<ul style="list-style-type: none"> • Groups affected • Sustainability • Economic impact 	<ul style="list-style-type: none"> • Country preferences • Morbidity
3 rd Tier	<ul style="list-style-type: none"> • Morbidity • Sustainability 	<ul style="list-style-type: none"> • Sustainability • Country preferences • Integratability • Groups affected 	<ul style="list-style-type: none"> • Treatment cost • Epidemic potential • Cost to administer • Cost to procure 	<ul style="list-style-type: none"> • Gender issues
4 th Tier	<ul style="list-style-type: none"> • Epidemic potential • symptoms 	<ul style="list-style-type: none"> • Treatment cost • Global impact • Gender issues 	<ul style="list-style-type: none"> • Country preferences • Integratability • Gender issues 	<ul style="list-style-type: none"> • Groups affected

Key GAVI Decision Criteria

BY ORGANIZATION TYPE

Priority	Government ¹ (n=94)	Multi & Bilaterals ² (n=61)	Other Experts ³ (n=68)
1 st Tier	<ul style="list-style-type: none"> • Morbidity • Mortality 	<ul style="list-style-type: none"> • Mortality • Morbidity • Groups affected • Sustainability 	<ul style="list-style-type: none"> • Mortality • Groups affected • Morbidity
2 nd Tier	<ul style="list-style-type: none"> • Country preferences • Sustainability 	<ul style="list-style-type: none"> • Epidemic potential • Economic impact 	<ul style="list-style-type: none"> • Sustainability
3 rd Tier	<ul style="list-style-type: none"> • Cost to administer 	<ul style="list-style-type: none"> • Global impact • Integratability • Cost to administer 	<ul style="list-style-type: none"> • Treatment cost • Epidemic potential • Global impact • Cost to procure • Cost to administer
4 th Tier	<ul style="list-style-type: none"> • Economic impact • Groups affected • Gender issues • Epidemic potential • Treatment cost 	<ul style="list-style-type: none"> • Treatment cost • Country preferences • Cost to procure • Gender issues 	<ul style="list-style-type: none"> • Economic impact • Gender issues • Integratability

¹Government = Ministry of Health, Ministry of Finance, other government agencies

²Multi and bilaterals = WHO, UNICEF, other multi and bilateral donors

³Other Experts = health service providers, academics/researchers, medical associations, NGOs, journalists

*Numbers in parentheses = number of people who answered questions

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- ***New Vaccine Familiarity & Priority***

New Vaccine Familiarity and Priority

FAMILIARITY QUESTION & ANALYSIS

QUESTION

- Here is a list of diseases for which vaccines are currently available or will be available in the next five years
- How familiar are you with the existing and future vaccines for the following diseases?

ANALYSIS

- % who say very familiar (asked in online survey only)

New Vaccine Familiarity and Priority

FAMILIARITY BY REGION¹

Vaccine	AFRO (n=64)	AMRO (n=20)	EMRO / EURO (n=19)	SEARO (n=15)	WPRO (n=12)
Meningococcal	59	29	67	67	50
Rabies	44	29	79	79	88
Mumps	36	43	86	86	88
Pneumococcal	44	13	67	67	63
Typhoid	38	14	64	64	63
Rubella	27	71	73	73	75
Cholera	37	14	47	47	38
HPV	27	33	50	50	50
Hepatitis A	26	14	43	43	50
Rotavirus	28	0	33	33	63
Malaria	22	33	20	20	29
JE	2	0	67	67	75
Dengue	6	43	13	13	25
Hepatitis E	6	0	21	21	13

New Vaccine Familiarity and Priority

FAMILIARITY BY FINANCING TIER¹

Vaccine	Least Poor (n=6)	Intermediate (n=45)	Poorest (n=45)	Fragile (n=22)
Meningococcal	100	67	52	28
Rabies	100	76	45	17
Mumps	80	76	35	12
Pneumococcal	20	67	50	8
Typhoid	40	56	38	16
Rubella	80	73	23	21
Cholera	80	32	40	13
HPV	0	50	29	8
Hepatitis A	0	52	28	4
Rotavirus	25	55	21	4
Malaria	0	21	28	16
JE	40	42	4	0
Dengue	0	21	4	8
Hepatitis E	0	21	7	0

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FAMILIARITY BY ORGANIZATION TYPE¹

Vaccine	Governments (n=31)	Multi & Bilaterals (n=29)	Other Experts (n=58)
Meningococcal	50	53	56
Rabies	59	39	63
Mumps	33	50	50
Pneumococcal	35	46	48
Typhoid	35	37	42
Rubella	31	37	52
Cholera	35	31	36
HPV	23	33	28
Hepatitis A	21	29	40
Rotavirus	31	22	39
Malaria	17	26	23
JE ²	21	16	15
Dengue	15	6	13
Hepatitis E	13	4	16

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VACCINE PRIORITY QUESTION & ANALYSIS

QUESTION

- If your country could only introduce a vaccine for one of these diseases, which one do you think it should be? Second? Third?

ANALYSIS

- Each disease received a weighted score based on the number of 1st priority mentions, 2nd priority mentions, and 3rd priority mentions

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VACCINE PRIORITY¹

Priority	AFRO (n=260)	AMRO (n=12)	EMRO (n=19)	EURO (n=12)	SEARO (n=17)	WPRO (n=17)
1 st Tier	<ul style="list-style-type: none"> • Malaria 	<ul style="list-style-type: none"> • Malaria • HPV 	<ul style="list-style-type: none"> • Malaria • Rotavirus 	<ul style="list-style-type: none"> • Meningococcal 	<ul style="list-style-type: none"> • Malaria 	<ul style="list-style-type: none"> • JE
2 nd Tier	<ul style="list-style-type: none"> • Pneumococcal 	<ul style="list-style-type: none"> • Pneumococcal • Typhoid 	<ul style="list-style-type: none"> • Pneumococcal 	<ul style="list-style-type: none"> • Mumps • Hepatitis A • Pneumococcal 	<ul style="list-style-type: none"> • Rubella • HPV 	<ul style="list-style-type: none"> • Dengue • Pneumococcal
3 rd Tier	<ul style="list-style-type: none"> • HPV • Meningococcal 	<ul style="list-style-type: none"> • Dengue • Hepatitis A 	<ul style="list-style-type: none"> • Meningococcal 	<ul style="list-style-type: none"> • Rotavirus • Typhoid 	<ul style="list-style-type: none"> • Rotavirus • Cholera 	<ul style="list-style-type: none"> • Malaria • HPV • Rubella
4 th Tier	<ul style="list-style-type: none"> • Typhoid • Rotavirus • Cholera 	<ul style="list-style-type: none"> • Rotavirus • Rubella 	<ul style="list-style-type: none"> • Typhoid • Hepatitis E 	<ul style="list-style-type: none"> • Malaria • Rabies • HPV 	<ul style="list-style-type: none"> • JE • Pneumococcal • Hepatitis A • Meningococcal 	<ul style="list-style-type: none"> • Rabies • Hepatitis A
5 th Tier	<ul style="list-style-type: none"> • Hepatitis A 	<ul style="list-style-type: none"> • Meningococcal • Rabies 	<ul style="list-style-type: none"> • Hepatitis A • Rubella • Cholera 	<ul style="list-style-type: none"> • Hepatitis E 	<ul style="list-style-type: none"> • Typhoid • Dengue • Rabies 	<ul style="list-style-type: none"> • Meningococcal • Rotavirus • Cholera