Implementing the 2012 Nigeria National HIV Vaccine Plan

Chidi V Nweneka, PhD
Deputy Director, Public Health Programs & Policy
US DoD Walter Reed Program – Nigeria
2013 Biomedical HIV Prevention Forum, Abuja
November 19, 2013
Presentation Outline

• HIV vaccine plan in Africa
• Challenges to developing a National HIV Vaccine Plan
• Implementation of National HIV Vaccine Plans
• The 2012 Nigerian HIV Vaccine Plan – an overview
• Implementing the 2012 National HIV Vaccine Plan
Countries with NHVPs/Guidelines

- Botswana
- Cameroon
- Cote d’Ivoire
- Ethiopia
- Kenya
- Mozambique
- Nigeria
- South Africa
- Tanzania
- Uganda
- Zambia
Why do African countries need National HIV Vaccine Plans?

- NHVPs provide a framework for incorporating HIV vaccine devt and evaluation into NASP

- NHVPs provide clear rules on regulatory approval, scientific and ethical reviews, biosafety and monitoring guidelines

- NHVPs helps highlight gaps in the country’s response to HIV vaccine R&D, creating a potential for filling those gaps.
Challenges to developing a National HIV Vaccine Plan

- Consensus building during the process

- Could be time consuming and costly

- Dissemination of the plan

- Implementation of the plan after it has been developed
Implementation of National HIV Vaccine Plans

• “As a guidance document, the National HIV vaccine plan is very good, but most of the time it is not implemented until issues arise then it is referred to”

• “However, most sections of the document were never implemented”

• As the nation grows in experience and as more capacity is built, the need for the plan wanes; and the actors begin to work more from intuition

• Some of the committees were initially set up, made some ‘noise’ and then fizzled out

• With time, the existence of the document was just confined to the memory
Why African countries don’t implement their NHVPs

1. Alien Concept
   - NHVPs development reactionary rather than proactive
   - Plan seen as an end rather than a means to an end
   - Inadequate national dialogue prior to developing plan
“While most guidelines were developed to meet historical and contextual needs, without clarity of goals most guidelines ended up being redundant, useless or lose value overtime. Guidelines should convincingly give a reason to a funder, scientist, advocate, policy maker or community to continuously refer to or meaningfully use them”

– Prince Bahati, IAVI Nairobi
“since most of the HIV vaccines which have been through trials in Africa were developed in developed countries mainly in the USA and Europe and most of the funding and sponsorships were from outside Africa, it was seen necessary to have guidance documents and not national plans which would have required most of the research activities including designing and production of vaccine products to be done in Africa which is not yet the case”

- A Tanzanian scientist
A pro-active country driven plan would encourage the implementation structures of the new plan to be adequately and appropriately integrated into existing structures in order to minimize wastages and enhance efficiency and synergy.
Why African countries don’t implement their NHVPs

1. Alien Concept

2. Unmet expectations
   - Failed hopes that NHVPs would attract research funding especially in countries with inadequate research capacity
Why African countries don’t implement their NHVPs

1. Alien Concept
2. Unmet expectations
3. Unrealistic expectations

   – **Reality**: Not every African country can host an HIV vaccine trial
     • lack of appropriate research capacity
     • lack of appropriate candidate vaccines for testing in those countries

   – Failure to re-strategize
Why African countries don’t implement their NHVPs

1. Alien Concept
2. Unmet expectations
3. Unrealistic expectations
4. Compartmentalization of the AIDS response
   - Failure to see the bigger picture
   - Most Plans too HIV vaccine specific
   - NHVPs not seen as opportunities for developing a national R&D plan
Why African countries don’t implement their NHVPs

1. Alien Concept

2. Unmet expectations

3. Unrealistic expectations

4. Compartmentalization of the AIDS response

5. General inefficiency and ineptitude inherent in many of our public systems in Africa
The 2012 Nigerian HIV Vaccine Plan – an overview
Goals

• Build and enhance research capacity in Nigeria

• Identify opportunities for and enable the formation of collaborative relationships both within Nigeria and among international partners

• Create immeasurable public health impact and benefit for Nigeria’s most vulnerable populations
Objectives – the 3 A’s

• **Augment**: Articulate the policies and guidelines that will strengthen vaccine development activities and related scientific research in Nigeria

• **Advance**: Develop a strategy to enhance capacity, resources and infrastructure for HIV vaccine-related research activities

• **Achieve**: Establish an action-oriented implementation mechanism to track progress, measure success and ensure that momentum and overall commitment are maintained
## Strategic Framework

<table>
<thead>
<tr>
<th>Category</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Government</strong></td>
<td>- Guidance document that will shape new policies and define investment priorities.</td>
</tr>
<tr>
<td><strong>Scientific Community</strong></td>
<td>- Research framework that will direct research projects/themes and serve to prioritize the development of skills and capacity required to support trials.</td>
</tr>
<tr>
<td><strong>Non-Governmental Organizations</strong></td>
<td>- Advocacy tool that will promote awareness and relay the importance of vaccine testing and clinical trial participation.</td>
</tr>
<tr>
<td><strong>International Donor Agencies</strong></td>
<td>- Information source that will provide details of on-the-ground vaccine-related activities so that the appropriate guidance, assistance and support are offered to facilitate trial execution.</td>
</tr>
<tr>
<td><strong>Trial Initiators/Investigators</strong></td>
<td>- Regulatory document that will inform the trial initiator of the steps involved in obtaining regulatory and ethical approval of protocols and guide each step of the vaccine trial process.</td>
</tr>
</tbody>
</table>
Implementing the 2012 National HIV Vaccine Plan
✓ Goal addresses the bigger picture
✓ Objectives realistic and inclusive
✓ Well articulated strategic framework
✓ Clear, feasible implementation plan

Leadership

What is the Problem?
Step 1 – Self-realization process

- Study and internalization of NHVP document
- Assessment of Financial & Resource implications
- NACA-only Plan implementation Committee
- Develop clear roadmap
- Develop appropriate role implementation strategy
- Identify an individual to lead the process
Step 2: National Program Implementation Team

- NHVP Program Coordinator (NACA)
  - Program Management Committee
    - National Program Implementation Committee
      - Sub-Committees

Appointed by NACA DG based on ability to deliver

About 5 people – NACA only

Representative membership. Chair preferably outside NACA

Sub-Committees
Sub-Committees
Sub-Committees
Sub-Committees
Step 3a – Oversight by relevant committees at the National Assembly
Step 3b – Sustained advocacy for the implementation of the Plan by the Civil Society
Responding to Funding Issues

• Budgetary constraints – Yes
• Yet plenty money in the system
• What should be done?
  – Make smart decisions
  – Build effective collaborations
  – Create synergy
  – Think outside the box
    • How much can we do with available resources?
Acknowledgment

- Dr Mohammed Afolabi – MRC The Gambia
- Prince Bahati – IAVI Nairobi, Kenya
- Prof Fred Mhalu – Tanzania
- Dr Oliver Ezechi – NIMR, Lagos
- Dr Yakubu Adamu – DOD Walter Reed Program, Nigeria
- Dr Edward Mbidde – UVRI, Uganda
- Dr Simon Agwale – Nigeria
- Dr Odile Ouwe Missi Oukem – Niamey, Niger
- And many others...
A preventive HIV Vaccine will be a great tool to end the AIDS epidemic

Thank you