

17th TechNet Conference

Panama City, Panama October 16-19, 2023 Immunization Programmes That Leave No One Behind

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Impact of Air-travel logistics on access and availability of routine vaccines.

Jeniffer Adungosi, Associate, Vaccine Cold Chain Logistics, Clinton Health Access Initiative (CHAI).

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Introduction.



Is there a 'faster' way to deliver vaccines and related health commodities?

- Sub-national air distribution of vaccines has been in consistent operation in one county Turkana.
- Following Covid-19's outbreak and logistical requirements, vaccine air transportation was expanded to more regions, improving and shortening availability and access of the vaccines in these regions.
- In the wake of the Covid-19 pandemic, air transport has been expanded to cover routine vaccines and other immunization supplies in regions with reduced accessibility.



Hypothesis:

• Coordinated air travel logistics in collection and supply of vaccines and other health commodities would increase access and availability of vaccines at last mile, leading to timely delivery of immunization services.



Background. Kenya's vaccines supply



Kenya's vaccines supply chain is a 4-tiered system, The average turnaround time for delivery between the CVS and IHFs is 14 days.



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Methodology



Integrated distribution plan was updated to utilize air-travel for effective and efficient movement of vaccines.

- In collaboration with NVIP and other supporting stakeholders, regions and counties in urgent need of vaccines, including COVID-19, were identified. Vaccines orders were placed through Chanjo eLMIS at the sub-county or RVS level.
- Mapping was carried out based on the availability of airport/airstrips.
 - No. of regional vaccines stores (with access to air transport): 5/9
 - No. of directly impacted counties: 26/47
 - Total No. of airports and airstrips: 5
 - Review period: 2021 2022 (On-going)
- Sourcing for airlines was carried out based on route, timing and cost. Costing was based on volume and capacity of the aircraft in service on the route(s).
- Correct packaging was done to ensure the quality and efficacy of vaccines using conditioned ice packs. Real-time weighing and temperature-tracking devices were used to monitor potency of vaccines.
- Cold boxes were used for transporting vaccines to departure airports, and from arrival airports to county/sub-county vaccine stores, and IHFs, via ground transportation.



Results:



<u>Air travel</u>:

- Improved timeliness in the access and availability of vaccines and related health commodities.
- Minimised missed opportunities/defaulters by contributing to uninterrupted service delivery.
- Had direct impact of ~50% on 2 major supply levels ; i.e., 56% on regional vaccines stores (5/9) and 55% (26/47) for counties.
- Integration of air freight in vaccines distribution reduced distribution cost.



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Can not carry out last mile distribution to the service delivery points.

Integrate other modes of transport available (i.e. road/ water)





Low number of airports/airstrips

Integrate other modes of transport available





Overtime/ extra working hours (prepacking/ airport dropping/picking)

Flexible and adequate human resource; allowance; incentives such as off days.



Immediate cash payment before delivery

Quick fund acquisition/ access processes

Strict flying timings and schedules (cargo)

Advance scheduling/ distributionplanning of products



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Lessons learnt and opportunities:



- Despite it being a mixed model of vaccines distribution (air and road/water where feasible); utilization of airfreight is way cheaper and faster.
- Air freight, as a mode of vaccines distribution has significant logistical advantages in emergency and/or pandemic events.
- Based on the geographical set up of a country, more than one mode of vaccines distribution can be applied.
- Coordination of key stakeholders at all supply chain levels is important to have a successful air freight mode of distribution.
- Air freight is a quick alternative in averting wastage, especially closed vial i.e. shortexpiry and VVM changes, through quick re-distribution.



Recommendations

(Take home message)



Considering the economies of scale, the utilization of air freight for distributing vaccines should be contemplated with regard to:

Velocity: Air freight enables the rapid transportation of vaccines, covering vast distances in considerably shorter durations.

Efficiency: It offers a superior turnaround time, ensuring more favourable lead times for vaccine deliveries.

Economy: When compared to exclusive road transport, air freight tends to reduce overall costs, taking into account several factors, including:

- *Human Resources*: The need for extensive human resources is minimized in air freight operations.
- <u>Vehicle Maintenance</u>: Maintenance costs associated with vehicles are significantly lower in air transport.
- <u>Security</u>: Air freight often provides enhanced security measures, reducing the risk of vaccine pilferage or tampering.
- <u>Mitigation of Vaccine Wastage</u>: Quick delivery through air freight helps in averting vaccine wastage, ensuring their effectiveness and availability.



Conclusion.



The utilization of air freight is crucial in:

- Streamlining the distribution of vaccines and related health products, thereby reducing turnaround and lead times.
- Enhancing accessibility and availability of vaccines while ensuring their potency and effectiveness.

However, further investigation is required to study full implementation and scalability of this approach for routine vaccines distribution.



Business at the speed of thought







Thank You!

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Drone logistics enables routine, emergency, and campaign immunizations for hard to reach and remote communities

- Evidence of benefit from scaled up operations -

Dr. Olivier Defawe, Director, Outsourced Drone Transport Lead VillageReach

Founder & Coordinator of the UAV for Payload Delivery Working Group (UPDWG)

October 17, 2023

VillageReach's Outsourced Drone Transport Solution since 2015







12,000+ flights, **500K+** km flown**5,000+** hours flight time



370,000+ Vaccine doses delivered



9,800+ Lab samples collected



100+ Health facilities served



260,000+ People directly served



1M+ People indirectly served

As of March 2023



Different Technologies for Different Uses



 Short-range (<150km) drones, small to medium payload (1 – 10kg), Vertical Take-Off and Landing (VTOL)

(DroNet, RigiTech Swoop Aero, Phoenix Wing)

<u>Last mile & Urban</u> deliveries: Sub-national storage to service delivery level OR Urban delivery



 Long-range drones (>150km), medium to heavy payload (10 – 100kg), fixed wings needing take-off & landing strip

(Pyka Pelican)

<u>Middle mile</u> deliveries - National storage to sub-national level



• Long-range drones (>150km), heavy payload (100kg – 2T)

(Xwing autonomous Cessna Caravan) <u>First mile</u> - Cross boarder deliveries







Outsourced Drone Transport in the DRC

Patrick | McGovern



SWOOP



VILLAGE REACH.

🕑 santé

USAID

Location: Equateur Province (103,902 km²)

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GATES freeder

Gavi 🐼

Scope: Began in Dec 2020, now supplying 40 health facilities via 24 landing sites

- Bi-directional drone network is one of the largest in the world: <u>37,445 km²</u>
- Drone hub ~30 min by road from provincial warehouse
- BVLOS flights of 15-60 min, landing at the remote facilities

 Drone battery change (stopover) for longer distances (> 115 km)

		2023	2024	2025	40km
	Our Expected Impact	1 province	3 provinces	5 provinces	
		115 health facilities	145 health facilities	175 health facilities	20

CROWN FAMILY PHILANTHROPIES UNICE



DRC Routine Drone Transport



Primarily 20 Immunization Products & Lab Samples

Monthly & on demand transportation for 40 communities:

- 1. Exclusive drone transportation for immunization products
- 2. Lab samples & reports
- 3. Emergency orders of other products

Outsourcing drone transportation to Swoop Aero:

- Bi-directional, electric, VTOL drones
- 3 kg & 5.4 L capacity
- 90-115 km/hr, 115km range
- Satellite connectivity and visual targets for areas without mobile access
- Fully local drone team





DRC Routine Drone Transport: Accomplishments



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5,004 flights in 413 days

1,845 product deliveries both ways

2,233 flight hours 225,031 km flown (2-6 drones)



131,907 people directly benefitting from products flown by drone, including:

- 76,858 children < 1 year,
- 25,911 pregnant women,
- 29,120 people of all ages,
- 18 (community) health workers

1M+ people indirectly benefitting



40 health facilities

supplied with immunization products

via **24** drone-landing sites

1,862 kg (volume of 7,275 L) delivered 👩



vaccines + lab samples, reports + medicines, PPE

347,037 vaccine doses*



120,111 diluents + 185,589 syringes + 18,148 adaptors

438 lab samples

85 test results (5 positive)

311 reports + 4 product order forms 15,328 vaccination cards + 100 tally sheets

485 PPEs for COVID-19 14 blisters + 16 vials of medicines 102 collection kits + 23 other products







Higher availability of immunization products & faster VILLAGEREACH. transport after drone introduction

KEY INDICATORS Hard-to-reach health facilities (drone landing sites)	Baseline Apr – Sep 2020	Target	Endline Jan – Jun 2022	Trend
Vaccine availability (last 3 months)	65%	80%	98%	ſ
 % facilities with stockouts. (last 3 months) Pentavalent Measles Yellow fever 	6% 12% 18%	0% 0% 0%	0% 4% 0%	Ļ
% facilities taking 2+ days to get vaccines	65%	0%	0%	Ţ
% facilities stocked according to plan	32%	80%	98%	
% AFP (polio) samples received at provincial EPI within 2 days (Drones and ground transport)	35%	80%	69%	Ŷ

Endline evaluation results are consistent with prior trends seen in the 1st and 2nd midterm evaluations (data collected over 18 months)



Health Workers & Community Perception

Higher availability of immunization products with drone transport (from 65 to 98%)



"We are happy, before to stock up on vaccines, we took the lake route but with the drone project, our hospital no longer lacks vaccine" (Community member from Maanga health center in Bikoro health zone)

"This 'plane' brings us the vaccines. Ingende is far from here. Before, we went to get the vaccines in Ingende, sometimes it loses coldness on the way, which was not good and today, we have the vaccines available thanks to the drone" (Community leader from Mpakuin health center in Ingende health zone)





Health Workers & Community Perception

Higher % of vaccination sessions conducted according to plan (from 69 to 94%)

"The frequency has increased because we plan one session per week each time and four sessions per month. Before, it was two sessions per month because we lacked the vaccines but now there are vaccines available, every week one session"

A mother from Maanga health center said: **"In the past, it was after a month that we were invited; today, it is every week that children are invited to take their vaccines"**



Yellow Fever Mass Vaccination Campaign in DRC 2021



- Re-think the organization of vaccination campaign
- Optimize the cold chain equipment placement and supply network design

"The strategy of transport by drones of vaccines, biological samples and reports during the campaign against Yellow fever, improved access to vaccination for hard-to-reach populations, the inhabitants of the islets of Lake Tumba" said Dr. Guy Kalambayi, WHO, Equateur, DRC

Source: Drones are a Hero in Yellow Fever Immunization Campaign. DroneLife January 09, 2022

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Health Workers & Community Perception

Reduce hidden cost and burden on health care workers

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"In the past, we spent the money. Someone would have to take transportation back and forth to pick up the vaccines...it's expensive. But today, there is no question of expenses. The drone brings the vaccines. He even transports our reports to the central office; no more question now that we pay the money. This cost is over" Nurse at Bonsole Lofosola health center in Bolenge health zone.

"There is nothing that cannot be achieved in our center regarding vaccination. you come, you will find the vaccines. We used to lament when the nurses went to get the vaccines elsewhere. But today, the vaccine is permanent." Focus group participant from Bonsole Lofosola health center in Bolenge health zone.



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Economic evaluation methodology





Secondary analysis of VillageReach financial records to identify costs of introducing the D4H intervention uncaptured in iSC costing



Adapted USAID | DELIVER activity-based supply chain costing methodology of the D4H network pre and post intervention Cost-effectiveness Analysis (CEA)

Cost-effectiveness analysis conducted utilizing a multicomponent performance metric, weighted based off DRC stakeholder preferences The current drone iSC configuration (endline) has the second seco

Metrics		Baseline 2020	Endline 2022	Cost-effectiveness Analysis (CEA)
Cost	Cost per dose	\$.58	\$1.84	
Effectiveness	Multi-metric score (%)	21%	48%	
Cost-Effectiveness	Cost (\$K) per % of effectiveness	7.16	10.04	

When low asset utilization is addressed, optimized SC design shows reduction of cost, with a high potential for future cost-effectiveness

Metrics		Baseline 2020		Improved Endline	3
Cost	Cost per dose	\$.58	\$1.84	\$1.19	Cost-effectiveness Analysis (CEA)
Effectiveness	Multi-metric score (%)	21%		48%	
	Cast (SK) par % of	۲			
Cost-Effectiveness	effectiveness	7.16	10.04	6.50	



Multi market development strategies



Drone logistics are **not financially** sustainable for public health markets

Levers to unlock affordable drone logistics for the health sector in low and middle-income countries

Cost-competitive & sustainable pricing for the public health market

Public health



- Customers funding start-up costs (MoH or donors)
- Single customer paying for all recurring costs
- **One-pricing strategy** for customers
- Small scale leading to high unit costs
- No economies of scale







Public & Private health, agriculture, logistics, postal, maritime, disaster response, etc.



- Drone service providers **fund** start-up costs in new markets
- Multiple customers to spread recurring costs amongst
- Market-driven pricing strategy for costsensitive customer



- Large scale leading to lower unit costs
- Economies of scale





Thank You!

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