JUNE 2000

The Government of

Pakistan

Proposal for support submitted to the Global Alliance for Vaccines and Immunization (GAVI) and the Global Fund for Children's Vaccines (The Fund)

GAVI Global Alliance for Vaccines and Immunization

This document is accompanied by an electronic copy on diskette for your convenience. Please return a copy of the diskette with the original, signed hard-copy of the document to GAVI Secretariat; c/o UNICEF; Palais des Nations; 1211 Geneva 10; Switzerland. Enquiries please to: Dr Tore Godal, tgodal@unicef.ch or representatives of a GAVI partner agency. All documents and attachments must be submitted in English or French.

1. Signatures of the Government

The Government of THE ISLAMIC REPUBLIC OF PAKISTAN ..... commits itself to develop the national immunization services on a sustainable basis in accordance with the multi-year plan presented with this document, and to annually review districts performance on immunization through a transparent monitoring system. The Government hereby requests the Alliance and its partners to contribute to the unmet needs for financing, material and technical assistance required in accordance with the plan. This assistance is being requested through UNICEF as stipulated in page 15 document 8.

Signature: .....

EJAZ RAHIM
SECRETARY
MINISTRY OF HEALTH
GOVERNMENT OF PAKISTAN
ISLAMABAD

Title: SECRETARY HEALTH, GOVERNMENT OF PAKISTAN

Date: 26 June, 2000.

The GAVI Secretariat is unable to return submitted documents and attachments to individual countries. Documents may be shared with the GAVI partners and collaborators.

We, the undersigned members of the Inter-Agency Coordinating Committee endorse this proposal on the basis of the supporting documentation which is attached :

Agency/Organization	Name/Title	Signature
M. Bashirulhaq	Health Specialist World Bank	
UNICEF	Dr. T.O. Kyaw-Myint Chief, Health & Nutrition Sect	
WHO	Dr. MOHAMED A. JAMA A/WHO REPRESENTATIVE	
CDC	Anthony Mounts MEDICAL Epidemiologist	
Rotary International	ABDUL HAIY KHAN CHAIRMAN, NATIONAL POLIO PLUS COMMITTEE.	

Signed this day of : 26-June, /2000

In case the GAVI Secretariat have queries on this submission, please contact :

Name : Dr. Rehan A. Hafiz. Title/Address : National Programme Manager, EPI/CDD

Tel.No. : 9251-9255101 .....

Fax No. : 9251-9255086 .....

E-mail : rehan@epi-who.isb.sdnpk.org .....

2. Immunization-related fact sheet

Basic facts: (1998 or most recent; specify dates of data provided)			
Population	141,459,104	GNP per capita	$US
Infants 0-11 months	4,997,750	Infant mortality rate	90/ 1000
Percentage of GDP allocated to Health	0.8%	Percentage of Government expenditure for Health Care	

Health system development status

Please find attached background documentation on:

- Overall government health policies and strategies — Document number.....1.....
- Structure of the government health services at central, provincial and peripheral levels and how it relates to immunization services *(with an organizational chart)* — Document number.....2.....
- Status of the ongoing or planned health reforms (e.g. decentralization, integration of functions, changes in financing) as it impacts on immunization services — Document number.....3.....
- Government policies and practices on private sector participation, as it relates to immunization — Document number.....3.....

Immunization coverage trends As per annual reporting to UNICEF/WHO					**Vaccine preventable disease burden** As per annual reporting to UNICEF/WHO				
Vaccine	**Reported**		**Survey**		**Disease**	**Reported cases**		**Estimated cases/deaths**	
	1998	**1999**	**1998**	**1999**		**1998**	**1999**	**1998**	**1999**
BCG	97	105			Diphtheria	20	12		
DTP3	79	80			Pertussis	104	109		
OPV3	79	80			Polio	286	401		
Measles	76	81			Measles	2375	2940		
TT2+ Pregnant Women	58	60			NN Tetanus	1969	1555		
Hib					Hib				
Yellow Fever					Yellow fever				
HepB					HepB seroprevalence (if available)	Pl.see 3. A			

3. Profile of the Inter Agency Coordinating Committee (ICC)

(Various agencies and partners supporting immunization services in the country are coordinated and organized through an inter-agency coordinating mechanism which is referred to in this document as ICC)

- Name of the ICC...National Interagency Coordinating Committee
- Date of constitution of the current ICC .....21st February 2000.....
- Organizational structure (e.g., sub-committee, stand alone) .....
- Frequency of meetings .....Monthly.....
- Composition :

Function	Title / Organization	Name
Chair	Health Minister	Dr. Abdul Malik Kasi
Secretary	Health Secretary	Mr. Ejaz Rahim
Members	• UNICEF • WHO • RI • WB • DFID • Ministry of Planning • EPI	

- Major functions and responsibilities :

- Coordinate support at national level from government and partner agencies to strengthen EPI and polio eradication activities in Pakistan;
- Mobilize the national government and NGOs to eradicate polio and control other vaccine preventable diseases;
- Assist Pakistan in becoming self-sufficient in its immunization program
- Establish a forum for exchange of information and dialogue on immunization programs in the country and facilitate that dialogue by making data information sources readily available;
- Ensure the availability of appropriate policies, advice, and tools to the Pakistan government;
- Assist the international and national community in identifying and developing support for new disease control programs when appropriate intervention tools such as new vaccines, become available
- Advise the government in specific areas related to EPI and Polio Eradication where partner agencies have specialized expertise;
- Review progress towards Polio eradication, improving EPI, and plans for further activities

- The following diagram shows the ICC functional relationships with other institutions in health sector :

Find attached the following documents :

- Terms of reference of the ICC — Document number.....4.....
- Minutes of the three most recent ICC meetings or of any meetings in which partners participated that concerned improving and expanding the national immunization program — Document number.....5.....

4. Immunization services assessment

Reference is made to the most recent assessments of the immunization system that have been completed within the three years prior to the submission of this proposal.

- Assessments, reviews and studies of immunization services for current reference :

Title of the assessment	Main participating agencies	Dates
Report of Programme Review of Expanded Programme of Immunization in Pakistan	MOH, CDC, Rotary International, UNICEF and WHO	27 April to 11 May, 1998

- The following are the three major problems identified in the assessments :

  - ❑ Lack of planning at all levels
  - ❑ Inadequate transport
  - ❑ Poor supervision at district and provincial levels

- The following are the three major recommendations in the assessments :

  - ❑ The manageral capacity for EPI may be strengthen at all levles. At the Federal level the post o f Deputy Director, EPI should be created and filled as a priority
  - ❑ A technical advisory group should be convend at the Federal level and in each province to guide EPI Programme managers on technical issues
  - ❑ Supervision and training must be strengthen and conducted at all levels

- Find attached a complete copy (with an executive summary) of :
  - ❑ the most recent assessment report on the status of immunization services — Document number....6
  - ❑ a list of the recommendations of the assessment report with remarks on the status of their implementation i.e. included in workplan, implemented, not implemented, in progress.... — Document number....6

- The following components or areas of immunization services are yet to be reviewed (or studied). They will be assessed on the following dates.

Title of the assessment	Year	USD
Comprehensive Cold Chain	Aug,2000	40,000
Five year financial plan	on-going WB	50,000

5. Multi-Year Immunization Plan

Based upon the recommendations of the assessment of immunization services, the Government has developed (or updated) the multi-year immunization plan or adjusted the health sector plan.

- Please find attached a complete copy (with executive summary) of the Multi-Year Immunization Plan or of the relevant pages of the health sector plan. — Document number....7..

- As per 1999 annual report to UNICEF/WHO

1999	
Children vaccinated with DTP3	376688
Used doses of DTP	660102

- Estimated annual targets

	2000	2001	2002	2003	2004	2005
Children planned to be vaccinated with DTP3	4.390	4.499	4.612	4.727	4.845	
Doses of DTP planned to be used	17.515	17.953	18.402	18.862	19.333	

6. New and under-used vaccines

Find below a summary of those aspects of the plan, mentioned in section five, that refer to introduction of new and under-used vaccines.

- Assessment of burden of relevant diseases *(if available)*:

Disease	Title of the assessment	Date	Results
Hepatitis B	Viral Hepatitis in Pakistan	October 1999	See report 8

- ***(If monovalent vaccine is requested)*** Hereunder is the rationale for the choice of monovalent vaccine :

- Planning for hepB vaccinations :

	2001	2002	2003	2004	2005
Target group	2.474	4.612	4.727	4.845	4.964
Total vaccine doses required	9.279	17.295	17.726	18.169	18.614
Preferred vial size(s)	10	10	20	10	10
Estimated wastage rate	1.25	1.25	1.25	1.25	1.25
% of vaccines requested from the Fund	100	100	100	100	100
AD syringes	9.279	17.295	17.726	18.169	18.614

- Planning for Hib vaccinations :

	2001	2002	2003	2004	2005
Target group					
Total vaccine doses required					
Preferred vial size(s)					
Estimated wastage rate					
% of vaccines requested from the Fund					
AD syringes					

- Planning for yellow fever vaccinations :

	2001	2002	2003	2004	2005
Target group					
Total vaccine doses required					
Preferred vial size(s)					
Estimated wastage rate					
% of vaccines requested from the Fund					
AD syringes					

- Find attached the plan of action for vaccinations with new or under-used vaccines *(if already contained within the national, multi-year plan, indicate page and paragraphs)* Document number.....8

7. Unmet needs requiring additional resources

- Tables of expenditure for 1999 and resource needs (other than new vaccines) detailing the sources of funds for each line item and for each year are attached in Annex 1. Document number 9

- Find below a list of financial sustainability strategies and of current/projected financing mechanisms for immunization including agreements made with other agencies (i.e.: Vaccine Independence Initiative). The relevant documents are attached.

(USD ,000)

Strategy title / Line item	Partner[1]	1998	1999	2000	2001	2002	2003	2004	2005	Document number
Training for hepatitis B					156789	140196	0	0	0	
Monitoring and evaluation					75,600	0	18800		56800	
Miscellaneous related to hepatitis B					116,000	70,000	70,000	0	0	
Specify contributions in USD made by each partner sharing the strategy (Government, name of donor...)										

Please see document 9

- We summarize hereunder the support to immunization generated from the poverty reduction strategies (including the use of funds freed by debt relief), of which relevant pages are attached.

Document number.....

8. Preferred channel of funds

(Only for countries seeking support from the immunization services sub-account)

- From the immunization services sub-account, funds will be transferred to the country through the following channel or system (tick only one) :

Directly to the Government ☐ Through a partner agency ☐ Through an independent third party ☐

- In the following box we describe how the mechanism will operate and how it will address transparency, standards of accounting, long-term sustainability and empowerment of the government.

Document #8 P.15

9. Country concerns

The following are the ICC's concerns and recommendations while submitting this proposal :

ICC fully endorses the application. It seeks effective and sustained routine EPI coverage and incurages the development of a Multi year plan.

ANNEX 1

Statement of financing and of unmet needs for immunization (USD ,000)

Table 1

Expenditure in 1999 from different sources										
Ref. #	**Category** / Line item	Central Govern-ment	Local Govern-ment	Private sector	Donor 1[1]	Donor 2	Donor 3	Donor 4	Donor n..[2]	Total Expend-iture in 1999
1.	**Vaccines, AD syringes...**									
1.1	▪ Line item 1									
1.2	▪ Line item n[3]...									
2.	**Equipment (cold chain, spare parts, sterilization...)**									
2.1	▪ Line item 1									
2.2	▪ Line item n...									
3.	**Other item immunization specific**									
3.1	▪ Line item 1									
3.2	▪ Line item n...									
Total expenditure in 1999										

[1] *If basket funding or a similar aggregated funding approach is used, please describe the total funding amounts, and/or detail partner contributions as fully as possible.*
[2] *Please use the electronic version of the document and insert as many columns for partner contributions as are necessary for your submission*
[3] *Please use the electronic version of the document to insert as many line items as necessary for your submission*

Table 2

Budget for 1999 (Fill in a similar table for subsequent years)										
		Contributions committed by partners							Total projected needs	Unmet needs
Ref. #	**Category** / Line item	Central Govern-ment	Local Govern-ment	Private sector	Donor 1[1]	Donor 2	Donor 3	Donor n..[2]		
1.	**Vaccines, AD syringes...**									
1.1	▪ Line item 1									
1.2	▪ Line item n[3]...									
2.	**Equipment (cold chain, spare parts, sterilization...)**									
2.1	▪ Line item 1									
2.2	▪ Line item n...									
3.	**Other item immunization specific**									
3.1	▪ Line item 1									
3.2	▪ Line item n...									
Total commitment										

[1] *If basket funding or a similar aggregated funding approach is used, please describe the total funding amounts, and/or detail partner contributions as fully as possible.*
[2] *Please use the electronic version of the document and insert as many columns for partner contributions as are necessary for your submission*
[3] *Please use the electronic version of the document to insert as many line items as necessary for your submission*

ANNEX 2
Summary of documentation[1] requested

Background information on Health System Development status		
a)	Overall government health policies and strategies	Document # 1
b)	Structure of the government health services at central, provincial and peripheral levels and how it relates to immunization services *(with an organizational chart)*	Document # 2
c)	Ongoing or planned health reforms (e.g. decentralization, integration of functions, changes in financing) as it impacts on immunization services	Document # 3
d)	Viral hepatits in Pakistan –seroprevalence	Document # 3-A
Profile of the Inter Agency Coordinating Committee (ICC)		
e)	Terms of reference of the ICC	Document # 4
f)	Minutes of the three most recent ICC meetings or any meetings concerning the introduction of new or under-used vaccines	Document # 5
Immunization Services Assessment		
g)	Most recent, national assessment report on the status of immunization services	Document # 6
h)	Summary of the recommendations of the assessment report with remarks on the status of implementation of each recommendation.	Document #7
Multi-Year Immunization Plan		
i)	Complete copy (with executive summary) of the Multi-Year Immunization Plan or of the relevant pages of the health sector plan.	Document number #8
j)	Action plan for the introduction of new or under-used vaccines into immunization services (if already contained within the national, multi-year plan, please indicate page and paragraphs)	Document #9
Unmet needs requiring additional resources		
k)	Tables of expenditure for 1999 and resource needs (Annex 1)	Document # 9
l)	Agreement made with other agencies as sustainability strategy (i.e.: VII)	Document number.....
m)	The priority given to immunization in the poverty reduction strategies for the use of funds freed by debt relief (for countries targeted in the HIPC initiative)	Document number.....

[1] Please submit hard copy documents with an additional electronic copy wherever possible