

Country Programme and Health System Support Update

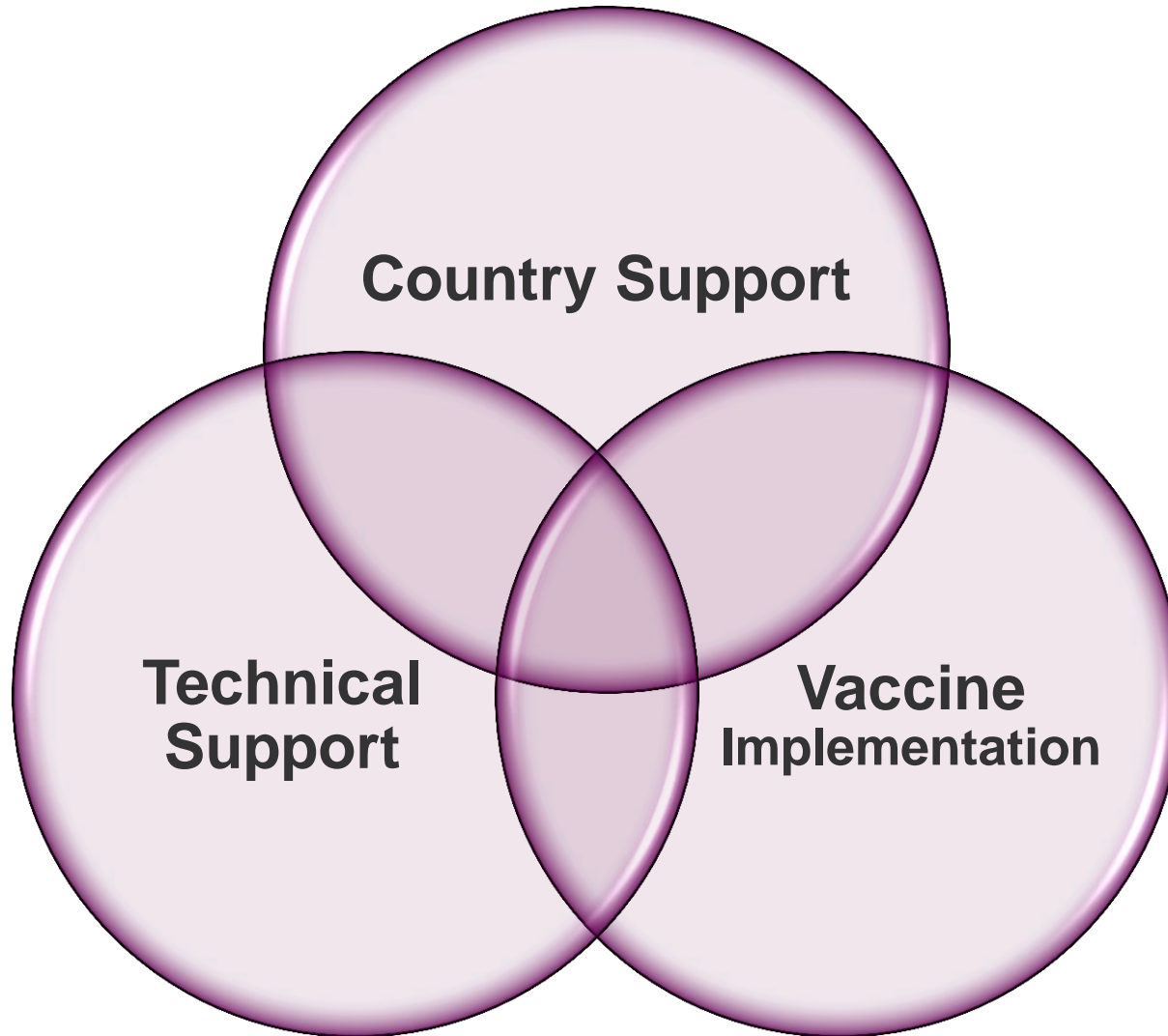
Hind Khatib-Othman

GAVI Alliance Board meeting

Dar es Salaam, Tanzania, 4-5 December 2012



COUNTRY PROGRAMMES



Key Highlights

- Country Programme commitments of US\$5 billion for the period 2011-2016
- 27 new routine introductions in 2012 (18 since last board) – 6 new campaigns in 2012 (4 since last board)
- Stronger engagement with countries
- Customized approach to country work and special attention to countries in need
- Stronger linkages across strategic goals and greater focus on results in the new business plan
- Focusing HSS on the immunisation strengthening

Presentation outline

- **Country Support**
- Vaccine Implementation
- Co-financing
- Health systems strengthening

India

- Demand for pentavalent vaccine increases – Ministry planning next phase of roll-out
- Post Introduction Evaluation shows good leadership, well trained health workers, high levels of community acceptance
- Reduction in vaccine wastage for 10 dose pentavalent vaccine vials down from 25% to 10% - substantial savings
- Progress on development of a HSS proposal to strengthen systems in states with <60% DTP3 coverage
- Developing a plan that sets out how GAVI will support India to scale up pentavalent vaccine nationally, intensify routine immunisation and plan for new vaccine introduction

Nigeria

- On track to introduce penta in 13 states in 2012 and seeking to fast-track additional states
- Stock out of DTP vaccine in 2011 contributed to the decline in coverage for Nigeria
- Re-programmed \$51 million Health System Strengthening (HSS) and Immunisation System Support (ISS)
 - Targeted to support pentavalent vaccine introduction
- Future focus on engagement with Governor's Forum, Cold Chain Working Group and better donor collaboration

Democratic Republic of Congo (DRC)

- Progress with co-financing arrears
 - Partial payment of 2011 arrears – full payment would allow the resumption of PCV roll out.
- Government's new comprehensive Multi Year Plan (cMYP) intended to revitalise routine immunisation
 - \$1 million allocated for purchase of traditional vaccines
- Working with Government to ensure the cMYP provides the framework for immunisation financing sustainability

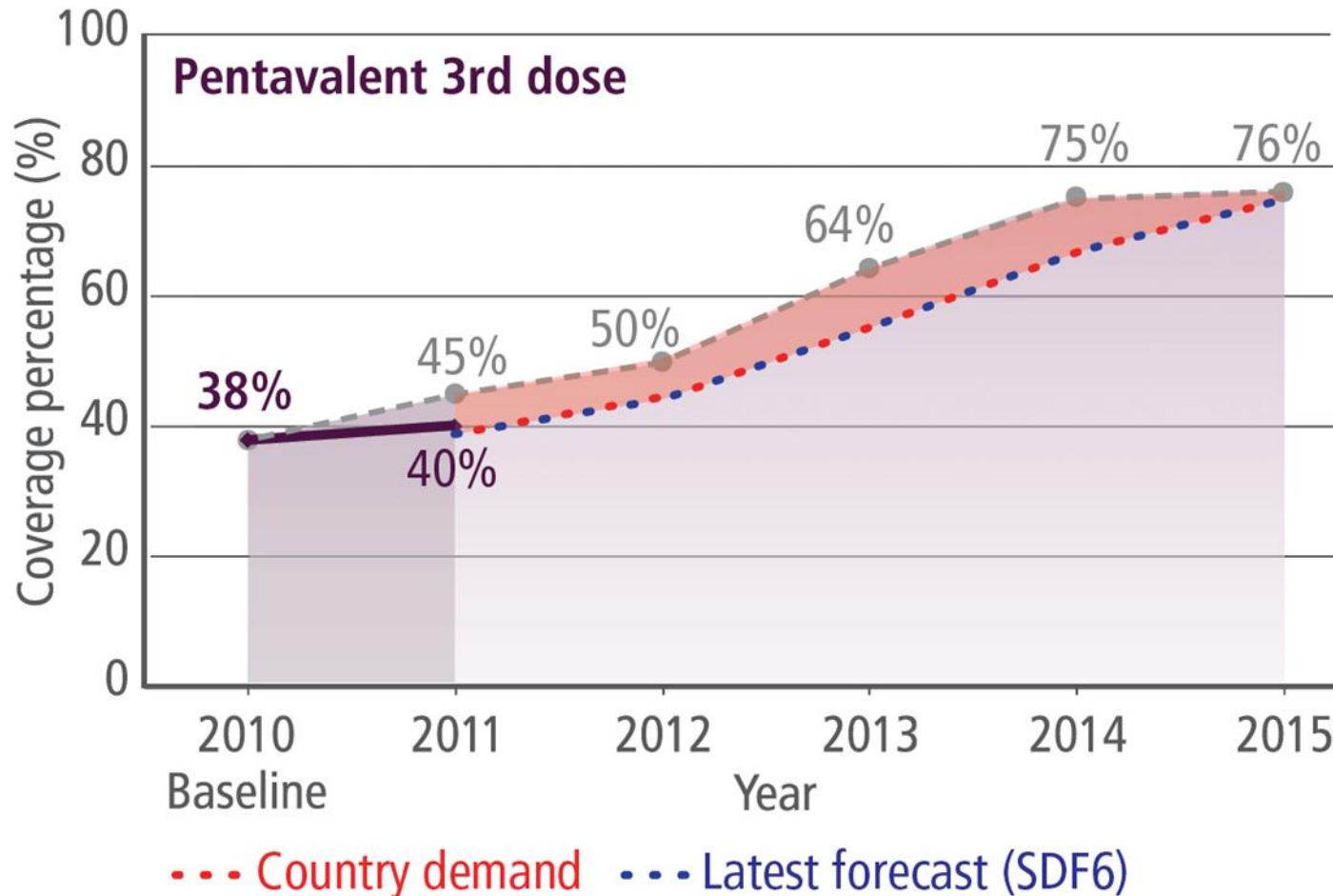
Pakistan

- October launch of pneumococcal vaccine in Punjab the beginning of phased national introduction
 - Requires close Alliance monitoring
- Institutional uncertainty continues since abolishing Federal Health ministry
- Health System Strengthening (HSS) revived...
 - ...But stalled
- Interest in rotavirus vaccine

Vaccine Implementation

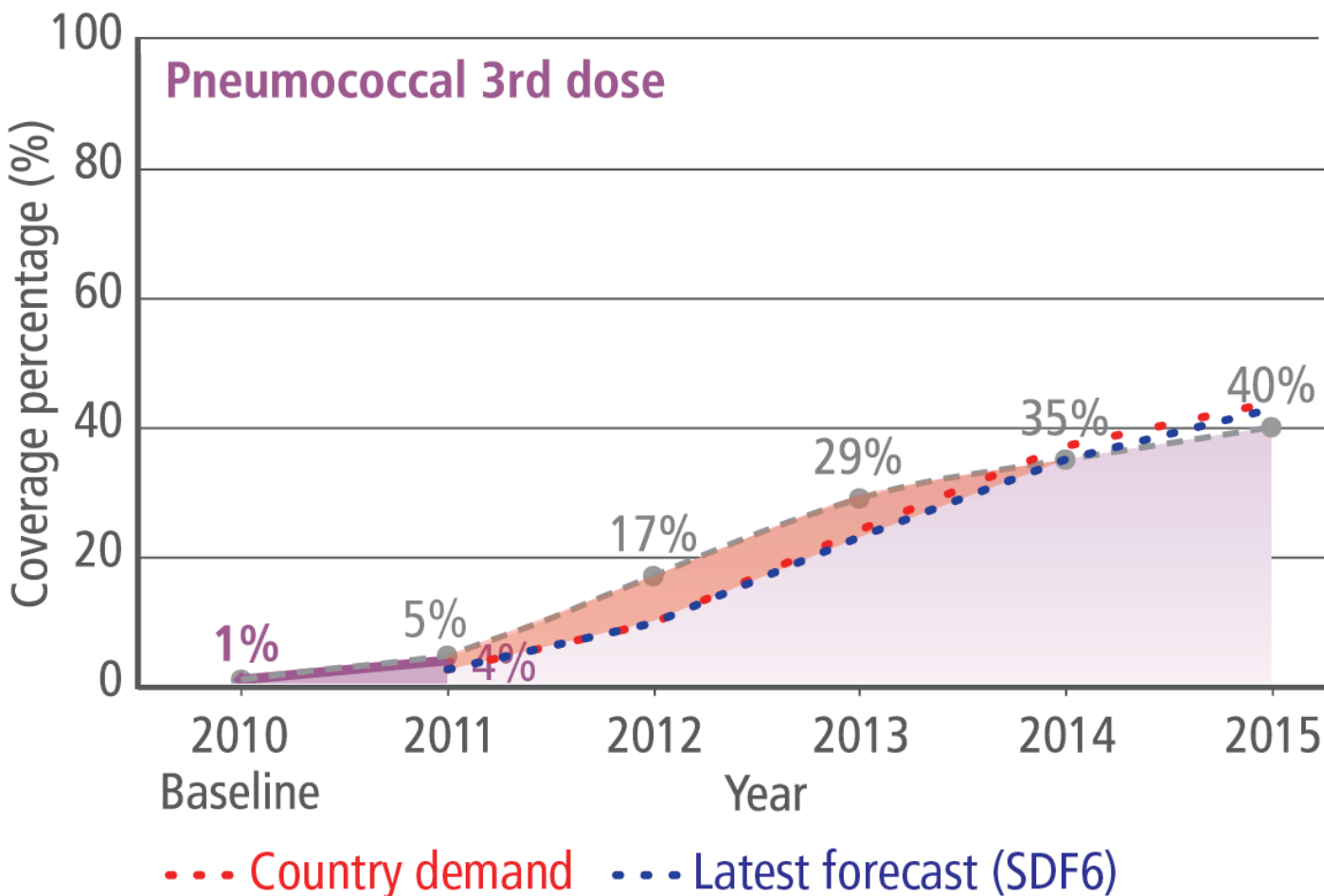
Penta introduced in all eligible countries by 2015

Large countries coverage the challenge ahead



Source: SDF 6.0 – coverage projections do not incorporate the latest changes in introduction dates
 *: Targets & forecast include 6 countries that introduced Penta without GAVI support

Pneumo approved applications meet introductions target; supply and readiness still affecting roll out

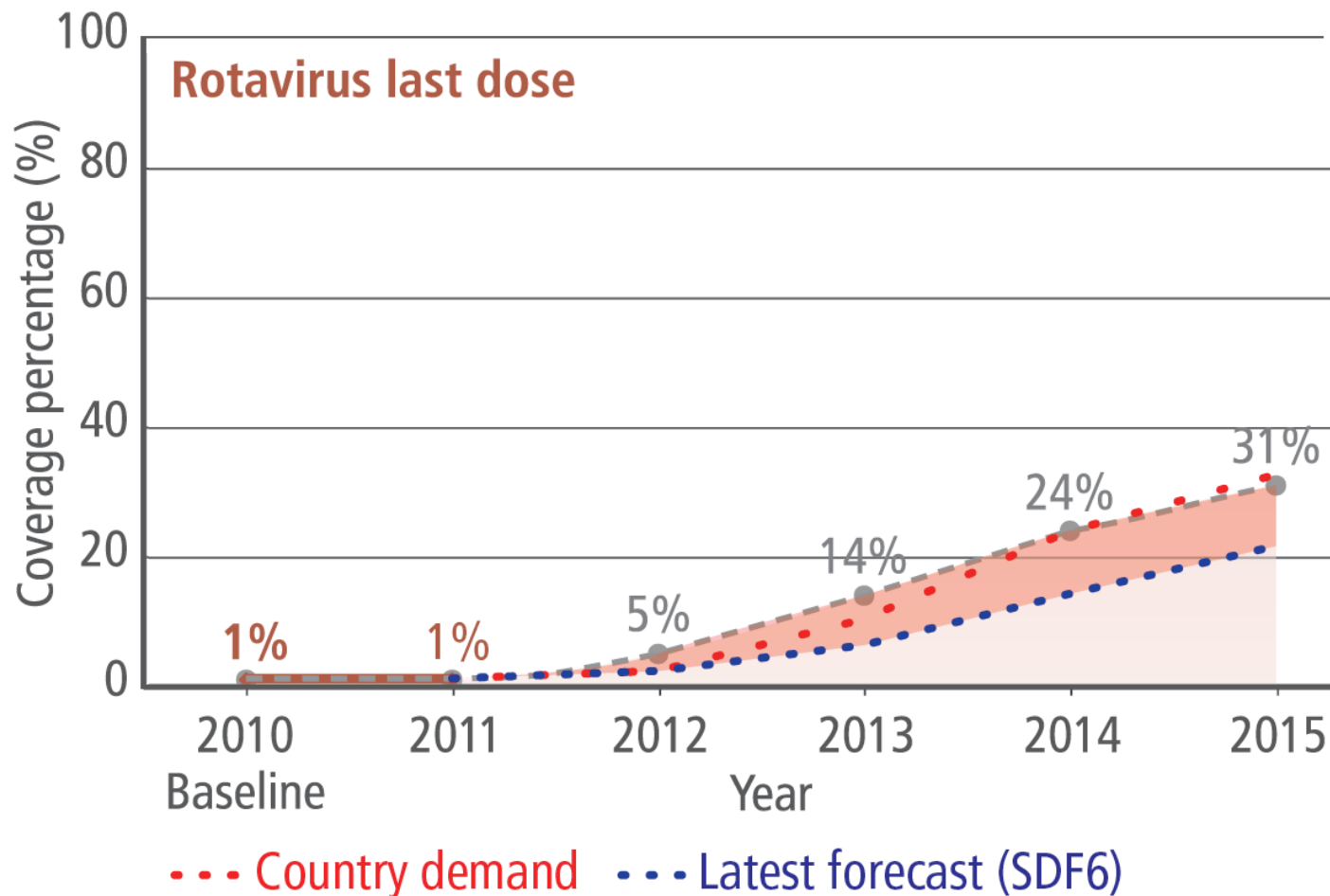


Source: SDF 6.0 – coverage projections do not incorporate the latest changes in introduction dates

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Rotavirus strong demand confronted with supply shortages and preference mismatch



Source: SDF 6.0 – coverage projections do not incorporate the latest changes in introduction dates

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Human Papilloma Virus extends GAVI reach in new target population

National Introduction:

2 applications received: (Rwanda - Uganda) / up to 13 expected by 2015. 1st introduction: 2014

Demonstration Program:

15 applications received / 9 approval with clarifications. 1st introduction: 2013

- Over 32m girls projected to be immunized with HPV vaccines by 2020 with GAVI support
- Collaboration among cancer, women, reproductive, adolescent, school health key requirement for success
- Opportunities for strengthening comprehensive cervical cancer control and adolescent/school health and service integration

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Other vaccines continue successful roll-out

- **Meningitis A:** campaigns ramped-up in Q4 2012 to reach 4 more countries (10 since start); 100 million vaccinated reached in Nigeria
- **Yellow Fever** - 2008 investment case concluded with last 2 countries (12 since start); Nigeria to launch a campaign in 2013/14
- **Measles Second Dose:** 8 introduction for the year (10 since start)
- **Rubella:** application window opened this year; 9 countries applied, 32 countries expected to introduce MR vaccine by 2015
- **Measles SIA's:** 3 out of 6 large countries at high risk of outbreaks applied for support

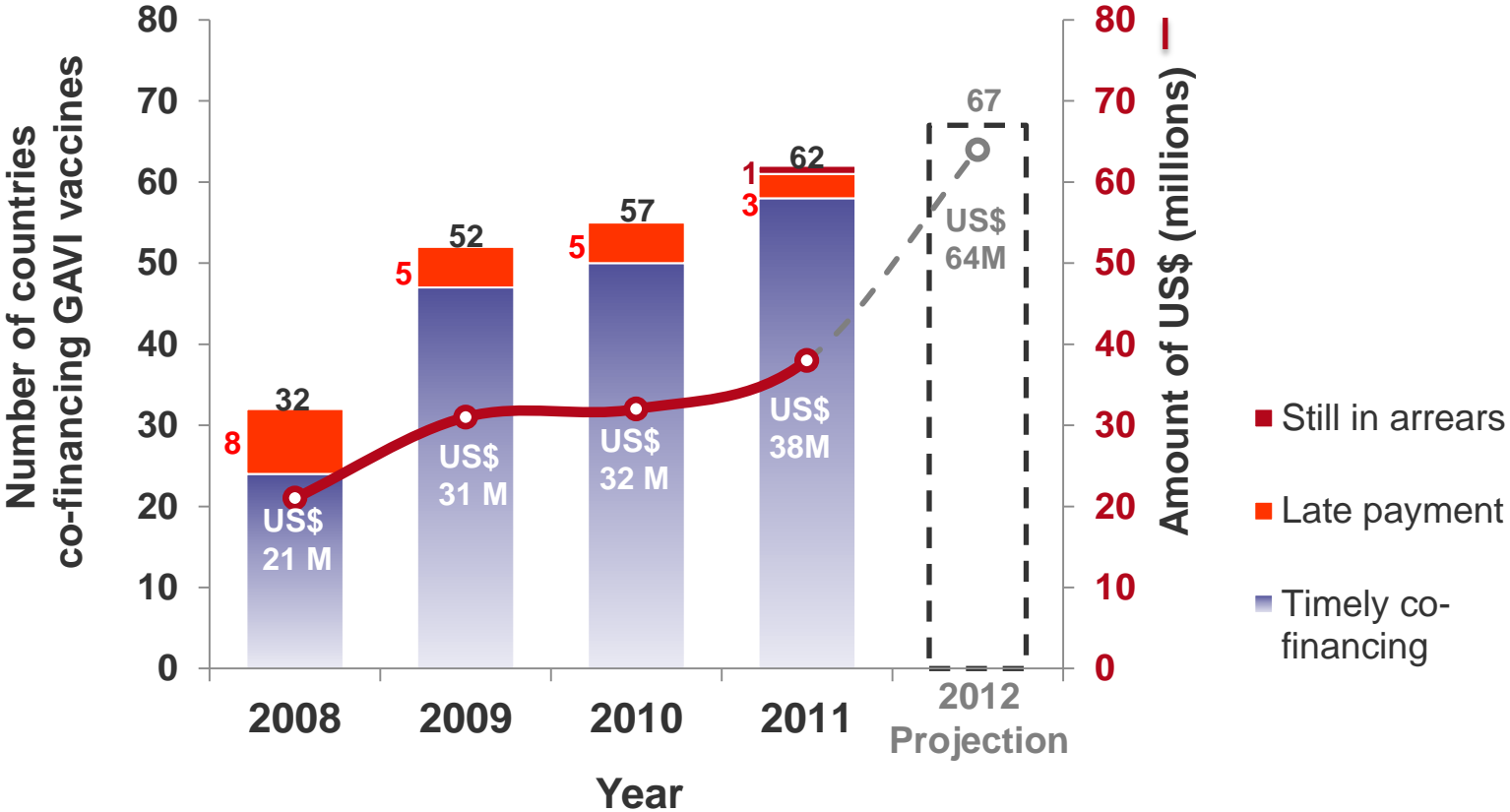
2013 continued focus on supply and readiness

- **Strong country demand for new vaccines**
 - More than 110 introductions since 2001
 - Up to 170 introductions and campaigns expected in next 3 years
- **Focus areas**
 - Supply constraints (in particular RV and to lesser extent PCV)
 - Country readiness
 - Coverage uptake and maintenance
- **Mitigating actions to close the gap**
 - Strengthened Vaccine Implementation management team (VIMT)
 - Technical support to countries from Secretariat and partners for stronger introduction plans and sustained coverage
 - Actions to increase short term supply (RV, PCV)

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- **Co-financing**
- Health systems strengthening

Co-financing: countries fulfilling commitments



Source: GAVI Alliance data as of 1 November 2012

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Graduating countries

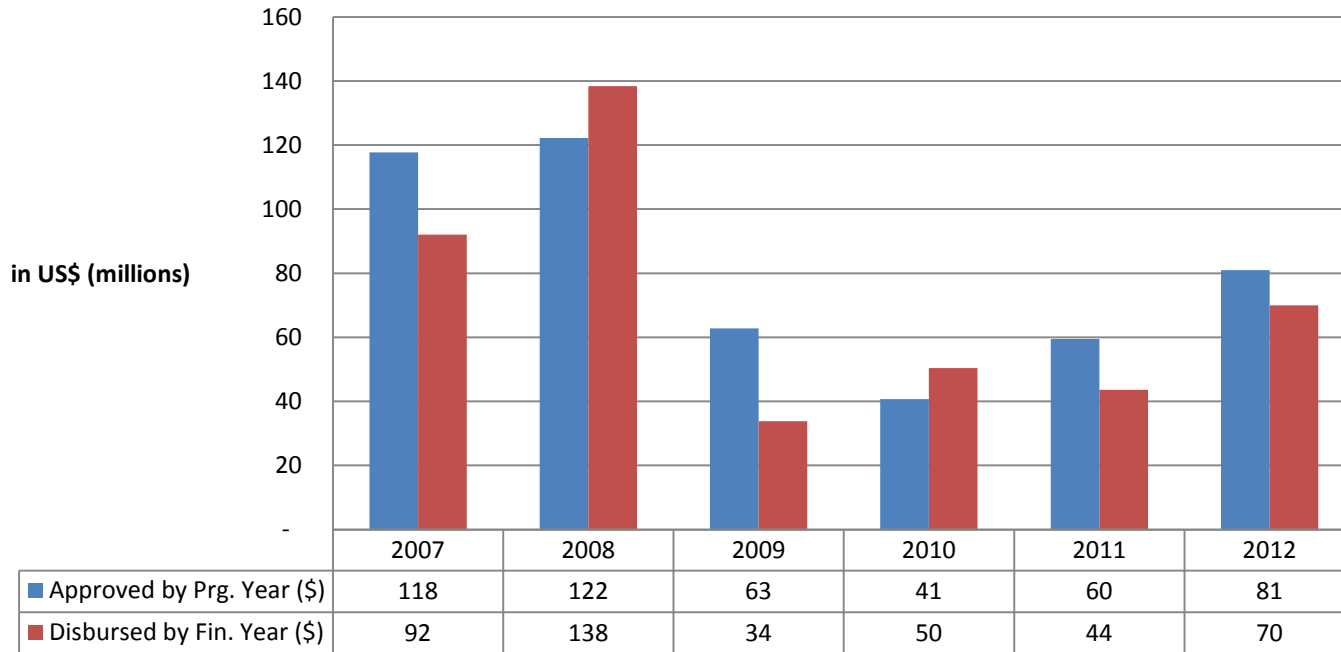
- Six priority graduating countries identified
 - Angola, Congo Republic, Republic of Moldova, Bhutan, Mongolia, Georgia
- Immunisation Financing & Sustainability task team visited 5 of the countries so far
 - visit to Angola expected before the end of 2012
- Specific country action plans to support the graduation process were finalized and implementation of the plans has started

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Portfolio snapshot

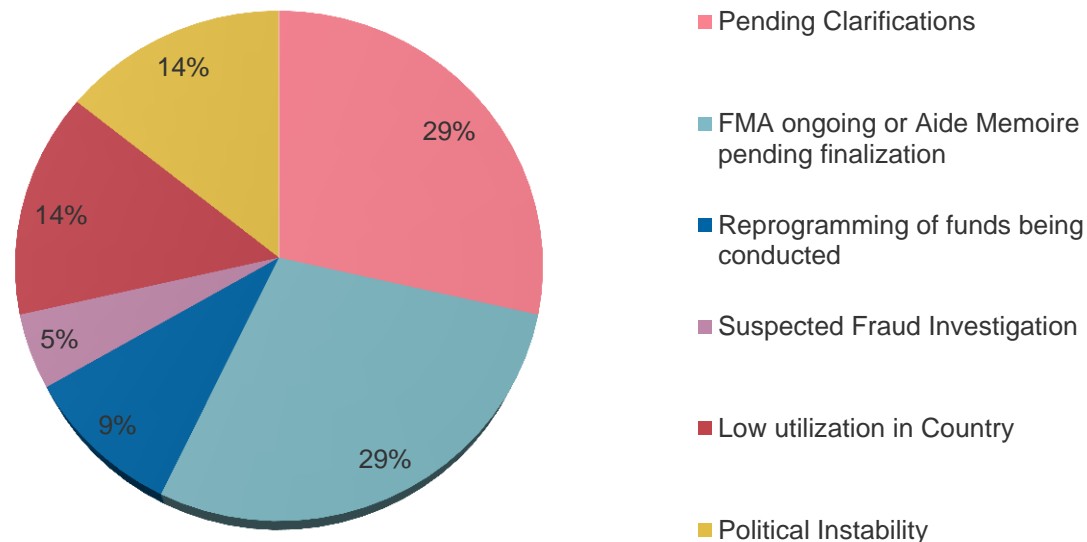
HSS Funding Amounts 2007-2012
as of 1-Nov-2012



- As of November 2012 there are 52 active health system grants.
- Total approvals (2007 – 2012) = \$485 million.
- Total disbursements (2007 – 2012) = \$393 million (81%)

Pending HSS disbursements

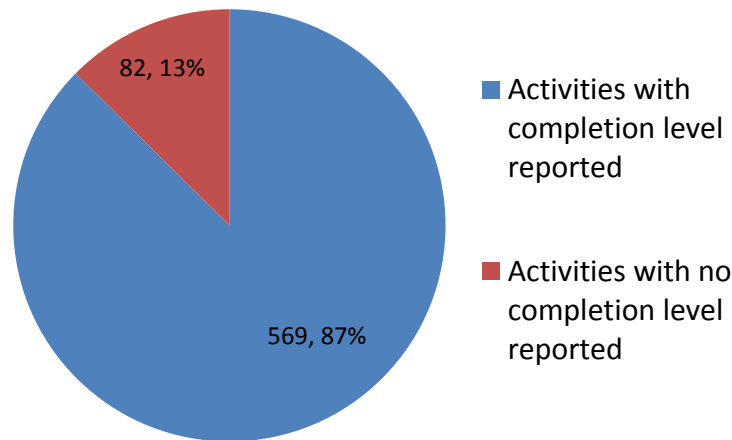
Pending HSS fund disbursement (17 countries)
as of 1-Nov 2012



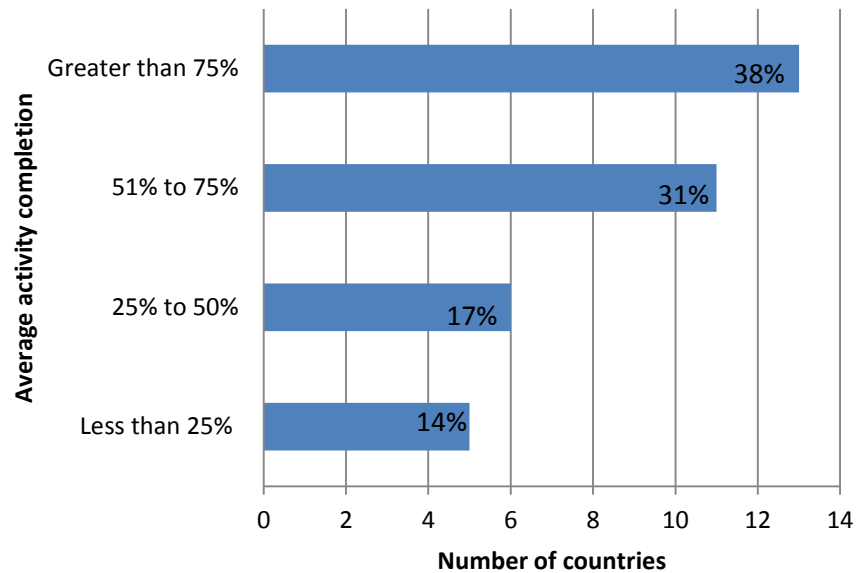
- Out of 52 active health system grants, 17 countries are experiencing disbursement delays
- Main Reasons: pending IRC clarifications, FMA/AM to be finalized, reprogramming, low utilization in country, political instability

Activities from 2011 Annual Progress Reports

**2011 APR Activities for HSS
(37 countries, 651 activities)**



Average (mean) activity completion rate



- Reporting on activity implementation rate is high
- 69% of activities implemented with the completion rate above 50%
- 1/3 of activities display low completion rate

HSS support model under revision

- Greater focus on routine immunisation systems
- Intensified monitoring of grant implementation and disbursements
- Tailored approach to countries – focus on underperformers
- More result oriented business plan with clearer accountability among partners
- Diversifying funding modalities for HSS based on country context
- New mechanisms for providing technical assistance and implementation support
- Streamlining internal procedures to reduce barriers for countries to funding
- Risk management

Rolling out Performance Based Funding (PBF)

- Being rolled out in all 10 countries approved for HSS support in 2012 – Phase I countries.
- Adjustments made in line with recommendations of TAG-HSS and consultations with countries
 - Increased predictability
 - Enhancing the incentive power
 - Complementing outcome indicators with intermediate indicators
- Operational framework and guidelines developed
- Country-by-country consultations are underway to guide them through implementation
- Phased implementation incorporates learning process

Priorities

- Increased technical support to ensure country readiness to introduce and sustain post-introduction coverage
- Active pursuit and implementation of solutions to Secure supply
- Improved HSS links with immunisation outcomes
 - Supporting better implementation performance and rewarding results through Performance Based Funding
- Opportunities to partner with Global Polio Eradication Initiative to strengthen routine immunisation



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