

Sri Lanka

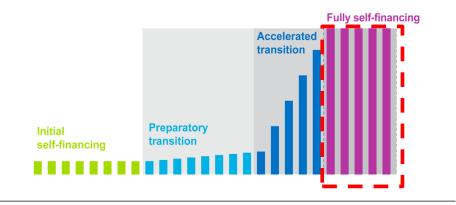
# **Region: SEARO**

## Key information on co-financing

Gross National Income per capita (2017): \$ 3,840

Co-financing status (2019):
 Fully self-financing

Country is fully self financing starting from 2016, except IPV.



### Immunisation financing

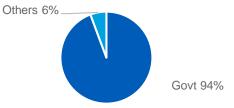
		2013	2014	2015	2016	2017
Vaccines used in routine immunisation						
- Government expenditure	\$	1,961,203 \$	4,514,300 \$	3,166,351 \$	3,054,365 \$	4,786,625
- Total expenditure	\$	4,772,203 \$	4,812,650 \$	4,675,414 \$	3,054,365 \$	5,073,905
- Government as % of total		41%	94%	68%	100%	94%
Routine immunisation	_					
<ul> <li>Government expenditure</li> </ul>	\$	13,913,997 \$	6,139,013 \$	4,791,064 \$	4,545,549 \$	-
- Total expenditure	\$	13,953,000 \$	6,595,363 \$	6,458,127 \$	4,545,549 \$	-
<ul> <li>Government as % of total</li> </ul>		100%	93%	74%	100%	N/A

Source: WHO-UNICEF Joint Reporting Form 2017

Domestic General government expenditure on health as a share of **0.1%** gross domestic product:

Source: WHO National Health Accounts, 2015

# Expenditure on routine immunisation in 2017



#### **Gavi supported vaccines**

Vaccines	Туре	Year(s) of Gavi support	Co-financing required
HepB mono	Routine	2003-2007	No
Pentavalent	Routine	2008-2015	Fully self-financing
IPV	Routine	2015-present	No
HPV	National	2017	Yes

### **Co-financing payments**

	Tota	l amount paid by the country	Co-finar	inced vaccines
2010	\$	541,000	Penta	
2011	\$	506,000	Penta	
2012	\$	991,000	Penta	
2013	\$	586,000	Penta	
2014	\$	2,405,000	Penta	
2015	\$	1,954,000	Penta	
2016	\$	-	*	
2017	\$	994,000	*	HPV

\* Sri Lanka is fully self-financing Pentavalent as of 2016, and received exceptional catalytic support for HPV introduction in 2017



2,552,611 \$

2,497,746 \$

2,450,765 \$

2,402,512

## **Co-financing projections for 2018 - 2022 (Fully Self-financed)**

\$

2,939,007 \$

Total

• Projections are based on Gavi's operational forecast version 16 and Gavi public price forecast version 16.