Case Study:

Improving Sustainable Immunisation Coverage in Pakistan in partnership with the Alliance

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Gavi Board meeting, 14 June 2017

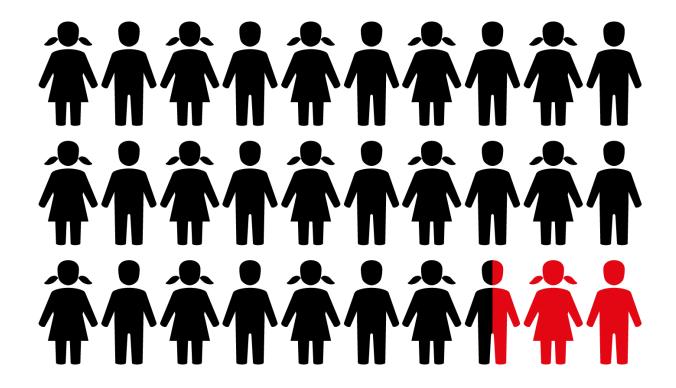


Contents

- ◆ Devolution and its impact
- **♦** Commitment to improve
- System interventions
- Challenges and opportunities



Pakistan represents 9% of Gavi-country underimmunised children

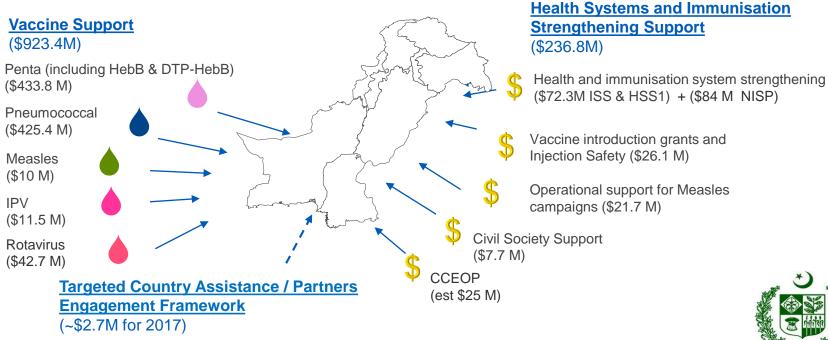




Overview of Gavi support

Pakistan remains the largest recipient of Gavi support

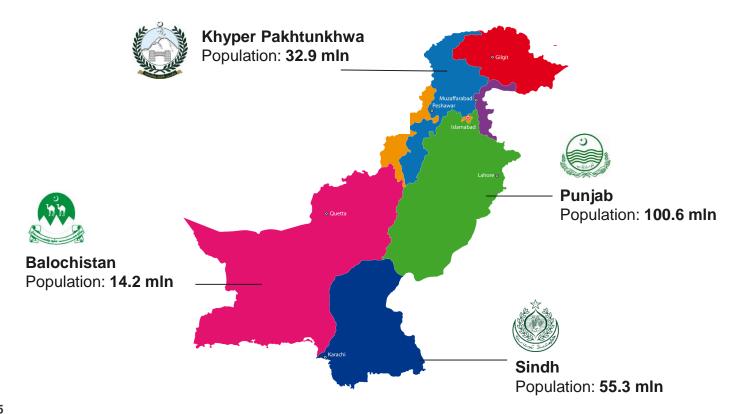
Total committed funds as of January 2017: **US\$1.16 billion**



- ♦ WHO and Unicef_staff & World Bank's technical assistance
- Expanded partners; IVAC, Acasus and CSO platform (through CRS)



Devolution of Health to Provincial Governments



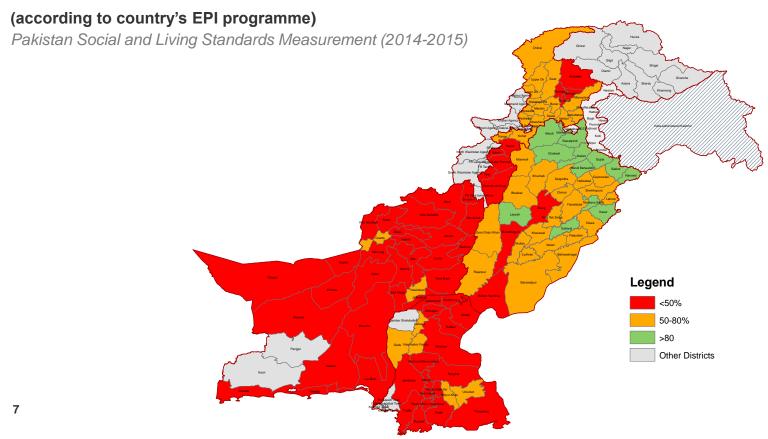


Key challenges after devolution



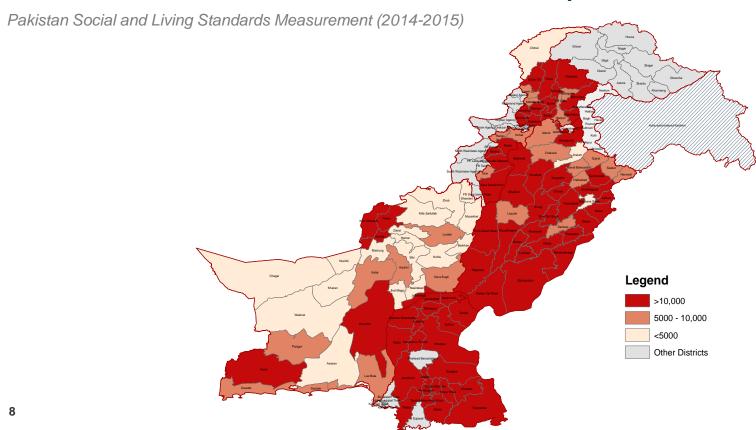


Percentage of Fully Immunised Children per District





Number of unvaccinated children per district







Commitment to improving immunization

Strong political commitment to immunisation

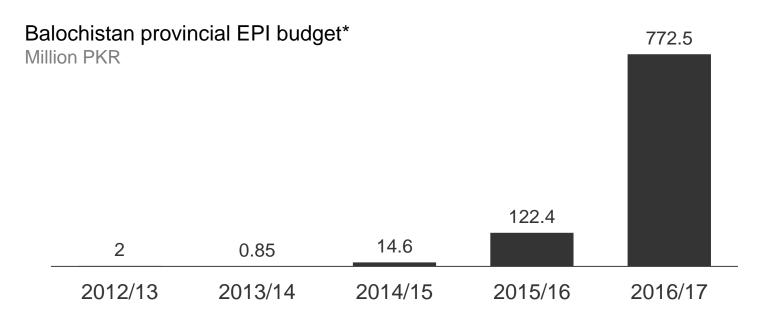


Regular Stock-take Sessions (Punjab and KP)





Significant increase in the EPI budget; Balochistan





Regular engagement of the Alliance with Country's leadership







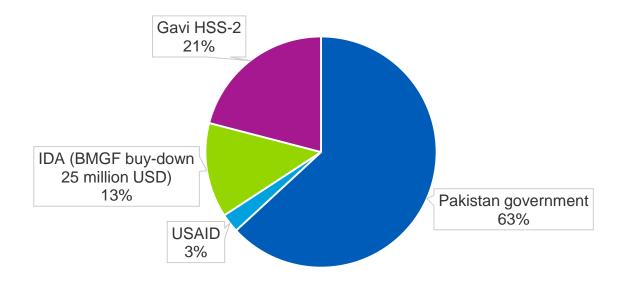
Strengthening systems

National Immunisation Support Project (NISP)

- Pooled funding through a Multi-Donor Trust Fund (MDTF) managed by the World Bank
- ◆ The MDTF uses government systems and structures for implementation and engages directly with Provinces
- ◆ The Fund will reimburse the government based on the achievement of disbursement-linked indicators (DLIs) tailored at the Provincial level
- Reporting on progress through a single Performance and Results Framework, reducing transaction costs
- Key role of ICC in review of NISP programme reporting



National Immunisation Support Project (NISP)

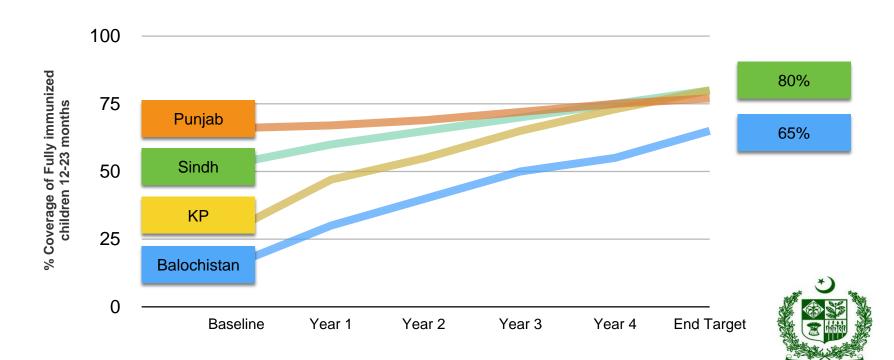




Total: \$370 Million

Tailored Targets to Provincial Situation

(NISP Joint Performance and Results Framework)



Sustainability of Financing

Moving from PC-1 (development budget system) to recurrent cost (regular budget)

Project-based Budget (PC-1)

- Time-bound
- Donor-oriented
- Multiple levels of approval



Recurrent Budget

- Regular, following fiscal year allocations, predictable
- No longer subject to multiple approval processes



Pooled Procurement and financing for vaccines







Improving Equitable Coverage

Urbanisation

Challenge of reaching every child: Service delivery in urban slums





Supply and Cold Chain Investments

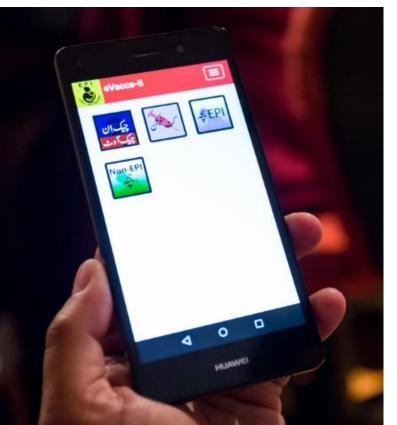
- Supply chain system re-design and support from cold-chain equipment optimization platform (CCE OP)
- Nineteen new and refurbished warehouses
- Use of advanced information technology for vaccine management
- ◆ ISO 9001 certification of the management of central warehouse







Data Improvement and Use of Technology



- ♠ E-Vaccs in use
- ◆ A district-level immunisation coverage survey is planned for 2017
- On-time vaccination and equity have both improved significantly



Country Tailored Approach by Alliance

Flexibilities for Pakistan:

- ♦ Alignment of co-financing requirements with country's fiscal year
- Strategic use of remaining Gavi balances
- Use of a joint performance and results framework through NISP



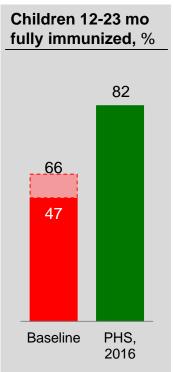
Leveraging Polio Assets

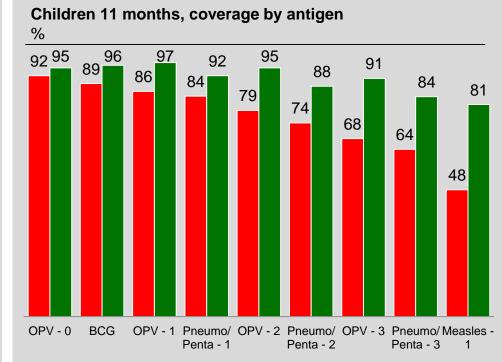


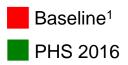
- Identification of zero-dose children
- Sharing of micro-plans
- Sharing of lessons learned such as vaccinating at transit points and improved data collection



Evident Progress: example of Punjab









Challenges and opportunities

- **♦** Uneven progress
- **♦** Population growth and movement
- Varying capacities
- **Beyond Polio**
- Integration



