

Country	Investment Areas (select from dropdown)	Objectives (select from dropdown)	Activities (describe the activity)	Key Results (mandatory for multi-year activities)	Primary Partner (directly contracted organization)	Implementing Partner (primary partner or subcontractor if any)	TOTAL
Myanmar	1. Service Delivery	1.1 Extend immunisation services to reach zero-dose, underimmunised children and missed communities	Establish and/or continue partnerships with CSO, NGOs and for-profit private sector actors, including professional associations, to reach zero-dose, under-immunized children and missed communities	Reached the most vulnerable children in urban and Hard-to-Reach Areas/ Conflict-affected areas with immunisation services	UNICEF	Relief International (RI) (subcontractor) UNICEF has established the partnership with RI in Shan State in 2023 for routine immunization services delivery in hard-to-reach townships of the state, and we will continue the partnership with them through the PEF TCA support in 2024& 2025. However, there are some potential organizations like Myanmar Red Cross Society (MRCS), ICRC, Burnet Institute and other NGOs including CHAI and PATH and we will explore more. We will continue discussion with Gavi and seek guidance for it.	\$ 2,656,058.88
Myanmar	2. Human resources for health	2.4 Improve distribution and retention of health workers to increase equitable access to immunisation services	Continue to monitor and assess the availability and distribution of human resources and advocate for developing appropriate human resource deployment plans including capacity building across the country, including hard-to-reach areas	Equitable distribution of human resources and execution of human resources development plan for provision of immunisation services	UNICEF	UNICEF	
Myanmar	3. Supply Chain	3.4 Strengthen Logistics Management Information Systems to assure real-time monitoring at all immunisation supply chain levels	Support the rollout of eLMIS immunization and public health commodities modules at central, sub-depots and townships and provide technical assistance in the planning, implementation and monitoring of the project	Improved vaccine and public health commodities logistics and management information system in terms of transitioning from paper based LMIS to electronic LMIS	UNICEF	Clinton Health Access Initiative Myanmar (subcontractor)	
Myanmar	3. Supply Chain	3.3 Increase capacity and quality of vaccine storage and distribution to improve vaccine availability, especially in the last mile	Provide technical assistance to the national program in cold chain expansion, extension, rehabilitation and efficient temperature monitoring	Improved capacity and quality of vaccine storage and distribution	UNICEF	UNICEF	
Myanmar	8. Health Financing	8.1 Support planning of Gavi and non-Gavi-supported vaccine procurement costs based on quality vaccine forecasts as part of national and subnational health budgets	Continued advocacy for earmarking the budget for vaccines procurement. Support the budgeting and targeting of domestic resources for immunization and primary healthcare (PHC) based on equity considerations. Also explore strategic purchasing mechanism especially for the hard to reach areas.	The budget for vaccines procurement is earmarked and increased for each year	UNICEF	UNICEF	
Myanmar	8. Health Financing	8.1 Support planning of Gavi and non-Gavi-supported vaccine procurement costs based on quality vaccine forecasts as part of national and subnational health budgets	Advocacy for earmarking the budget for vaccines procurement. Support the budgeting and targeting of domestic resources for immunization and primary healthcare (PHC) based on equity considerations. Also explore strategic purchasing mechanism especially for the hard to reach areas.	The budget for vaccines procurement is earmarked and increased for each year	UNICEF	UNICEF	
Myanmar	6. Demand Generation and Community Engagement	6.3 Improve capacity in designing, implementing, monitoring and/or evaluating demand generation activities at all levels	Assess gender related barriers and the capacity of grass root local actors for community mobilization and develop appropriate gender-responsive community engagement and interpersonal communication packages to enhance their capacities on effective community mobilization	Improved capacities of partners, mobilizers and volunteers on gender-responsiveness, community mobilization and engagement	UNICEF	UNICEF	
Myanmar	6. Demand Generation and Community Engagement	6.2 Design and implement social and behaviour change interventions	Formulate demand generation/ Programme communication strategy and plans of action to increase demand for immunization among diverse target communities	The parents/caregivers of the most vulnerable children in peri-urban, Hard-to-Reach Areas and conflict-affected areas are reached with immunization messages and bridged with immunisation services	UNICEF	UNICEF	
Myanmar	6. Demand Generation and Community Engagement	6.5 Strengthen partnerships with local and community actors to improve demand for immunisation	Establish and/or continue partnerships with CSOs, CBOs and NGOs to effectively mobilize communities for promoting importance of vaccination increasing demand for immunization services	Demand for immunization promoted by identifying key barriers of the communities through Human-centered design (HCD) approaches	UNICEF	UNICEF	
Myanmar	3. Supply Chain	3.3 Increase capacity and quality of vaccine storage and distribution to improve vaccine availability, especially in the last mile	Provide technical assistance to the national program in cold chain expansion, extension, rehabilitation and efficient temperature monitoring	Improved capacity and quality of vaccine storage and distribution	UNICEF	UNICEF	
Myanmar	3. Supply Chain	3.4 Strengthen Logistics Management Information Systems to assure real-time monitoring at all immunisation supply chain levels	Provide technical assistance to the planning, implementation and monitoring of eLMIS immunization and public health commodities modules at central, sub-depots and townships	Improved vaccine and public health commodities logistics and management information system in terms of transitioning from paper based LMIS to electronic LMIS	UNICEF	UNICEF	
Myanmar	2. Human resources for health	2.4 Improve distribution and retention of health workers to increase equitable access to immunisation services	Assess the availability and distribution of human resources and advocate for developing appropriate human resource deployment plans including capacity building across the country, including hard-to-reach areas	Equitable distribution of human resources and execution of human resources development plan for provision of immunisation services	UNICEF	UNICEF	
Myanmar	1. Service Delivery	1.1 Extend immunisation services to reach zero-dose, underimmunised children and missed communities	Establish and/or continue partnerships with CSO, NGOs and for-profit private sector actors, including professional associations, to reach zero-dose, under-immunized children and missed communities	Reached the most vulnerable children in urban and Hard-to-Reach Areas/ Conflict-affected areas with immunisation services	UNICEF	UNICEF	
Myanmar	1. Service Delivery	1.1 Extend immunisation services to reach zero-dose, underimmunised children and missed communities	Technical support in planning, implementation and monitoring of activities addressing equity and coverage of zero-dose and underimmunized children.	Reduced zero dose and underimmunized children.	WHO	WHO	\$ 1,765,142.25
Myanmar	1. Service Delivery	1.4 Establish and/or continue partnerships with civil society organisations to provide immunisation services	Partnership with INGO/NGO/CSO to identify and reach zero dose and under immunized children in selected townships	Number of children identified and mobilized for vaccination (zero dose and under immunized children).	WHO	Will identify the implementing partners as per official guidance	

Myanmar	2. Human resources for health	2.1 Improve technical and managerial capacity of healthcare workers to plan, implement and monitor immunisation services	Training of healthcare workers (including newly recruited PHS2) in immunization related areas	Health staff trained on immunization	WHO	WHO
Myanmar	5. Vaccine Preventable Disease Surveillance	5.2 Increase timely detection of and response to vaccine-preventable disease outbreaks	Timely reporting, investigation, specimen collection, transportation and outbreak response immunization	Detected timely and responded VPD outbreaks	WHO	Event Management Company will be contracted to support the transport of specimens for laboratory investigation. If necessary, potential partners will be identified for the same works.
Myanmar	4. Health Information Systems and Monitoring & Learning	4.5 Scale up digital health information interventions based on country needs, priorities, plans, strategies, and readiness	Develop DHIS 2 dashboard for immunization	Monitor and utilize real time data	WHO	Will identify the company for technical support
Myanmar	7. Governance, Policy, Strategic Planning, and Programme Management	7.2 Strengthen programme performance monitoring and management systems at all levels	Periodic reviews and monitoring program performance at all levels including providing strategic directions to MOH and other partners/ stakeholders	Establish systematic feedback and review mechanism at appropriate levels	WHO	WHO The Event Management Company will be hired for workshop and training supports.
Myanmar	4. Health Information Systems and Monitoring & Learning	4.1 Ensure timely, fit-for-purpose information is available at all levels of the system, and is used regularly and systematically to improve programmatic reach and performance	Identify and train data focal persons in each township for regular reporting through HMIS	Trained all newly recruited data focal persons	WHO	WHO
Myanmar	2. Human resources for health	2.1 Improve technical and managerial capacity of healthcare workers to plan, implement and monitor immunisation services	Training of healthcare workers (especially newly recruited staff) related to immunization and surveillance	Trained all newly recruited basic health staff on immunization and surveillance modules.	WHO	WHO
Myanmar	7. Governance, Policy, Strategic Planning, and Programme Management	7.1 Strengthen capacity of governance/technical bodies for planning, coordination and tracking progress at all levels, particularly for reaching zero-dose children	Support revitalization of immunization and surveillance technical committees and enhance their capacity	Strengthened capacity of EPI committees including NITAG and AEFI	WHO	WHO
Myanmar	9. Grant Management and Indirect Costs	9.2 TA for Gavi management support to grant implementation	Timely submission of technical and financial report to GAVI	Maximum utilization of GAVI grant	WHO	WHO
Myanmar	5. Vaccine Preventable Disease Surveillance	5.2 Increase timely detection of and response to vaccine-preventable disease outbreaks	Timely reporting, investigation, specimen collection, transportation and outbreak response immunization	VPDs outbreaks timely detected and responded	WHO	WHO
Myanmar	1. Service Delivery	1.1 Extend immunisation services to reach zero-dose, underimmunised children and missed communities	Technical support in planning, implementation and monitoring of activities to reach zero-dose, underimmunized children and missed communities through experienced TA provider	Reached zero dose, underimmunized and missed children.	WHO	WHO