RESOURCE TRACKING UPDATE FROM MONGOLIA

Above: Dr. S. Naryad, NITAG Member, at Sabin/SIF-sponsored briefing in Hentii aimag, September 2015.

On September 18, SIF sponsored a subnational briefing on immunization financing in Hentii aimag, birthplace of Genghis Khaan. The event was organized by local government and Ministry of Health officials. Joining them from federal level were counterparts from the Parliamentary Standing Committee of Social Affairs, the Ministries of Health and Finance and Mongolia’s national immunization technical advisory group (NITAG). The briefing featured presentations by S. Erdenechimeg, Advisor to the State Budget Expenditure Department and Dr. S. Naryad, Member of NITAG. Governor of Hentii, M. Bold, and the Head of the Hentii Health Department, Dr. Sh. Enkhmandakh, described how local health services, and immunization in particular, are currently financed. Local Tax and Health Department counterparts distributed a poster summarizing the figures. In 2014, Hentii aimag collected US$7.02 million in tax revenues and spent $5.8 million on health, of which $27,500 went for immunization.

The Hentii results were in alignment with those reported previously by other aimags. “We have improved each time”, commented Sabin Senior Program Officer Dr. Khongorzul Dari, who has attended all four Sabin-supported subnational briefings in the country to date.

Above: An example of a Mongolian subnational immunization financial report.

For NITAG member Dr. S. Naryad, who also presented during the briefing, the experience was an eye opener. A former immunization manager herself, Dr. Naryad was familiar with the technical side of immunization. But this was her first time observing government officials sharing expenditure information with the public. After the briefing, Naryad and local counterparts discussed
ways to better capture local immunization expenses and relate them to program outputs. She shared her own experiences and gave them copies of her recent book on the history of immunization in Mongolia.

Following the briefing, Hentii officials expressed their confidence that their local immunization program budget would increase in the coming years. Dr. Enkhmandakh proposed working with Dr. Dari to improve local immunization resource tracking. She proposed a project to analyze the costs of a recent measles outbreak and using that information for advocacy with local officials.

Back in Ulaanbaatar, Parliamentarian immunization financing advocates subsequently proposed extending the resource tracking work down to the local (soum) level. Dr. Dari and her counterparts are investigating how best to do this, starting in the previously engaged aimags.

**USING MASS MEDIA FOR SUSTAINABLE IMMUNIZATION FINANCING ADVOCACY**

This year, the Sabin SIF team worked with mass media counterparts in Nepal and Uganda to better inform citizens about immunization financing. Each case provides interesting insights on how the media contribute to the goal of countries owning their immunization programs.

In Nepal, work on a national immunization law began in 2011 [see related stories, Summary Digest 5(1), Immunization Financing News 6(1), 6(4)]. Three iterations of the bill were scrutinized by government and private sector stakeholders. In January 2014, the regulations for the proposed fund were published in the Nepal Gazette. This was the first official public acknowledgement that such a law was in the works.

“We needed to inform the public and the MPs needed to know whether or not the people wanted the bill”, recalls Nepal-based Senior Program Officer Devendra Gnawali.

The first step was a media briefing, which took place on 7 February 2014 at the Ministry of Health and Population. The event drew around fifty journalists, government officials and immunization experts. The discussion touched on the usual immunization facts- that most but not all Nepali children are being immunized, that vaccine-preventable diseases are on the wane, that vaccines are increasingly expensive yet highly cost-effective. The Minister of Health then described the proposed national immunization fund and how it would help Nepal fully finance its immunization program.

In April, the immunization bill was formally submitted to Parliament. Copies of the bill were printed and distributed to MPs, however, the public remained largely uninformed. At the request of the Chair of the Women, Children, Senior Citizen & Social Welfare Committee, Gnawali and Ministry of Health and Population Child Health Division counterparts planned a media briefing on the pending law. This soon led to a more ambitious media project. A local media firm, Vibration Media Team, was engaged by Sabin to produce a series of twelve fifteen-minute public information spots on various immunization-related topics. The Vibration journalists interviewed a range of Nepali MPs, government officials, Rotarians and health experts. The spots were aired nationwide on Radio Nepal from 21 August to 27 September 2015. In one spot, Minister of Health and Population Hon. Mr. Khagaraj Adhikari endorsed the national immunization fund and urged parliament to pass the supporting legislation. In another spot, Hon. Mrs. Ranju Kumari Jha, Chairperson of Women, Children, Senior Citizens and Social welfare committee of Parliament, expressed her full support for the pending immunization bill and called on the domestic private sector to help build the national immunization fund.

Ugandan leaders began fashioning a national immunization law in 2011 [see related articles Summary Digest, 4(4), 5(1), Immunization Financing News, 7(1)]. The action began in Parliament, where interested MPs formed a Parliamentary Forum on Immunization. The law was seen as the best way to get the government to increase the immunization budget, which had been flat for nearly a decade. Forum members consulted with Ministry of Health counterparts and the two institutions began drafting the immunization bill together. Sabin SPO Diana Kizza Mugenzi acted as interlocutor. Throughout 2012, Forum members issued a series of press releases favoring the bill. Meanwhile, Mugenzi...
and Ministry of Health counterparts planned a briefing on immunization financing for members of the Ugandan Local Government Association, which took place in May, 2012. Appraised of the situation, ULGA delegates from throughout the country demanded bigger health and immunization budgets. With members of the Parliamentary Forum in attendance, the event received wide press coverage. Work on the bill continued but the issue soon dropped from the public spotlight.

In mid-2014, Mugenzi teamed up with several local non-governmental organizations to devise a public information campaign on immunization. The NGOs aimed to train district-level advocates in communication skills and media relations. Mugenzi’s aim was to speed up the slow-moving immunization bill. Four journalists from the Uganda Media Network who had covered immunization issues in the past were contracted by Sabin (Kyeyune Umar, Uganda Broadcasting Corporation; Agnes Kyotarengerire, The New Vision News Paper; Emmanuel Ainebyona, The Daily Monitor; and Tyaba Abubaker, Nile Broadcasting Service). The journalists interviewed parliamentarians, government officials and external partner experts. They travelled to four regions of the country to interview a sample of the NGO advocates. They produced seven thematic spots which were televised by the Uganda Broadcasting Network throughout September, 2014.

“We had to select the topics carefully”, recalled Mugenzi. “The journalists wanted to create a buzz, to focus national attention on immunization issues they had previously reported.”

The two media projects initially focused on immunization legislation but ended up covering a range of immunization-related topics. The projects took shape through contrasting pathways. In Nepal, government and parliamentary counterparts worked each step of the way with the SPO to create and implement the media project. In Uganda, NGOs took the lead with public institutions agreeing to collaborate. The cost of each project was quite modest. Their effectiveness remains to be seen: both immunization laws currently await final parliamentary action.

### BOLD STEPS BY NIGERIA TO MEET SUSTAINABLE IMMUNIZATION FINANCING CHALLENGES

After years of concerted efforts by the government and people of Nigeria, the WHO removed the nation from its list of polio endemic countries on 25 September, 2015. The government is now focusing on ensuring adequate funding for the National Immunization Program. Nigeria finances all vaccines for its routine immunization program, but the introduction of newer, more expensive vaccines has substantially increased costs. These cost increases coincide with the country’s transition off of GAVI support, scheduled to be complete by 2022. The recent fall in oil prices has led to cuts in the government’s health budget, which are expected to generate an estimated US$400m gap in primary health care budgets. Exacerbating this situation is incomplete disbursement of approved PHC program funds (only 53% in 2014), weak immunization resource tracking (little is known about actual spending at state and local levels) and irregular and incomplete reporting of government immunization spending (WHO/UNICEF Joint Reporting Form).

At the recent Sabin-organized peer review workshop, held 26th-28th October in Nairobi, delegates from Nigeria’s National Primary Health Care Development Agency (NPHCDA), Nigeria’s newly inaugurated Immunization Financing Task Force, and Parliament...
shared experiences with counterparts from Kenya, Liberia, Sierra Leone and Uganda. The Nigerian delegates pledged to improve JRF expenditure reporting, continue efforts to develop a National Immunization Trust Fund and push for domestic vaccine production.

Above: Nigerian delegates attend the SIF Anglophone Africa Peer Review, 26-28 October in Nairobi, Kenya

“Nigeria now realizes it must change course”, commented Sabin Senior Program Officer Cliff Kamara, who works on the SIF Program in Sierra Leone, Liberia, and Nigeria. “Our Nigerian counterparts are coming up with some exciting new financing ideas such as engaging the domestic private sector and creating mutual awareness of immunization financing issues with the states,” added Kamara.

Future plans include the development of a National Immunization Financing Trust Fund (with possible public-private partnership support) and beginning local vaccine production. Ten years in the making, the 2014 National Health Act has created a new forum for collaboration between federal and local governments, making sustainable immunization financing an attainable goal [see related article, *Immunization Financing News*, 6(3)]. To capitalize on Nigeria’s momentum, Kamara and his NPHCDA counterparts are planning the next SIF Anglophone African Peer Exchange, to take place in the capitol city Abuja, in early 2016.

**SIF COUNTRIES IN THE CURRENT GAVI LANDSCAPE**

Earlier this year, Gavi, the Vaccine Alliance, revised its business plan. Sustainability, where the Sabin SIF Program plugs in, remains an important work stream. Countries are still grouped according to their gross national incomes. As their incomes approach the Gavi eligibility threshold (currently gni=US$ 1580), countries are now seen as transitioning through four phases rather than simply “graduating”. The four phases are shown in the diagram below.

As shown in the map below, the 22 SIF Program countries are distributed across all four Gavi phases. Two SIF countries (Sri Lanka and Mongolia) are classified as fully self-financing, seven SIF countries are in the Accelerated transition phase, four SIF countries are in the Preparatory transition phase and nine are in the Initial Self-Financing stage.
OTHER SIF UPDATES AND HIGHLIGHTS

NEW WEBSITE UPDATES AVAILABLE
The SIF Program’s newly updated website pages are now available. View them online at: http://www.sabin.org/programs/vaccine-advocacy-education/sustainable-immunization-financing-sif-program
Check back for the French versions, coming soon!

VACCINE PRICES FOR GAVI TRANSITIONING COUNTRIES
Several manufacturers have agreed to maintain current UNICEF (“tail”) vaccine prices for countries after they transition out of Gavi support. View the information online at: http://www.gavi.org/library/gavi-documents/supply-procurement/vaccine-price-commitments-from-manufacturers/

July
- 6-7 July, Selenge aimag, Mongolia. SIF SPO Khongorzul Dari organizes Subnational SIF briefing.
- 6-10 July, Chisinau, Moldova. SIF SPO Eka Paatashvili attends Gavi/WHO/Sabin Joint Appraisal.
- 21-23 July, Geneva, Switzerland. SIF Director Mike McQuestion attends Gavi IFS Task Team Face-to-Face conference.

August
- 3 August, Brazzaville, Congo. SIF Director Mike McQuestion, Sabin Executive Vice President Jon Andrus, and SPO Helene Mambu-Ma-Disu attend WHO/AFRO planning meeting.
- 4-5 August, Brazzaville, Congo. SIF Director Mike McQuestion, Sabin Executive Vice President Jon Andrus, and SPO Helene Mambu-Ma-Disu meet with national parliamentary and Ministry of Health counterparts to discuss sustainable immunization financing issues.
- 5-7 August, Kinshasa, DRC. SIF Director Mike McQuestion and SPO Helene Mambu-Ma-Disu conduct a field visit.
- 7 August, Buchanan, Liberia. SIF SPO Cliff Kamara organizes legislative workshop/peer exchange with delegates from Nigeria, Liberia, and Sierra Leone.
- 14-23 August, Uzbekistan. SIF SPO Eka Paatashvili attends Joint Gavi Partner Assessment.
- 17 August, Geneva, Switzerland. SIF Director Mike McQuestion attends Gavi Consultation on strengthening country decision making capacity for immunization policies and programmes.
- 18 August, Henti aimag, Mongolia. SIF SPO Khongorzul Dari organizes Subnational SIF briefing.
- 31 August, Antwerp, Belgium. SIF SPO Eka Paatashvili attends WHO/EURO EPI Partners Meeting.

September
- 14-23 September, Uzbekistan. SIF SPO Eka Paatashvili joins Joint Gavi Partner EPI assessment
- 10, 15 September. Nakuru, Nairobi, Kenya. SIF co-sponsors national- county consultative workshops on immunization financing.
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<th>Milestone/Activity</th>
<th>Achieved this quarter</th>
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<td>National Briefings</td>
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<td>Sub-regional briefings</td>
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<td>31</td>
<td>Mongolia (2), Vietnam (2), Kenya</td>
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<tr>
<td>Workshops/Capacity Building Meetings</td>
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<td>Cambodia, Nepal, Congo Republic</td>
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<td>Sierra Leone/Liberia/Nigeria</td>
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<td>Number of ICC Meetings (measured since April 2013)</td>
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