



LNCT
Learning Network for
Countries in Transition



Gavi post-transition engagement 2018-20



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Board Decision 12a: Engagement with Countries Post-Transition

***“Approved** continued Gavi Alliance engagement with Phase 3* countries as they sustain and introduce self-financed vaccines and, when requested by Phase 3 countries, fund targeted support to such countries under the Partners Engagement Framework (PEF)”*

- The Alliance have made US\$ 30 million available for **post-transition support** in the 2018–2020 period to address specific challenges facing transitioned countries, if it is requested by countries themselves.
- This support will target activities intended to help reduce the chance that vaccines will be dropped from the national schedule after transition, achieve and maintain high coverage and equity, ensure that countries have the skills and decision-making processes necessary to introduce additional vaccines in the future and they maintain financial and political commitment to immunisation.
- The overall goal is to **ensure that countries maintain gains achieved with Gavi support** and to **mitigate potential risks to sustainability** of now self-financed vaccine programmes.

* Phase 3 countries: countries that are fully self-financing all vaccine programmes originally introduced with Gavi support.

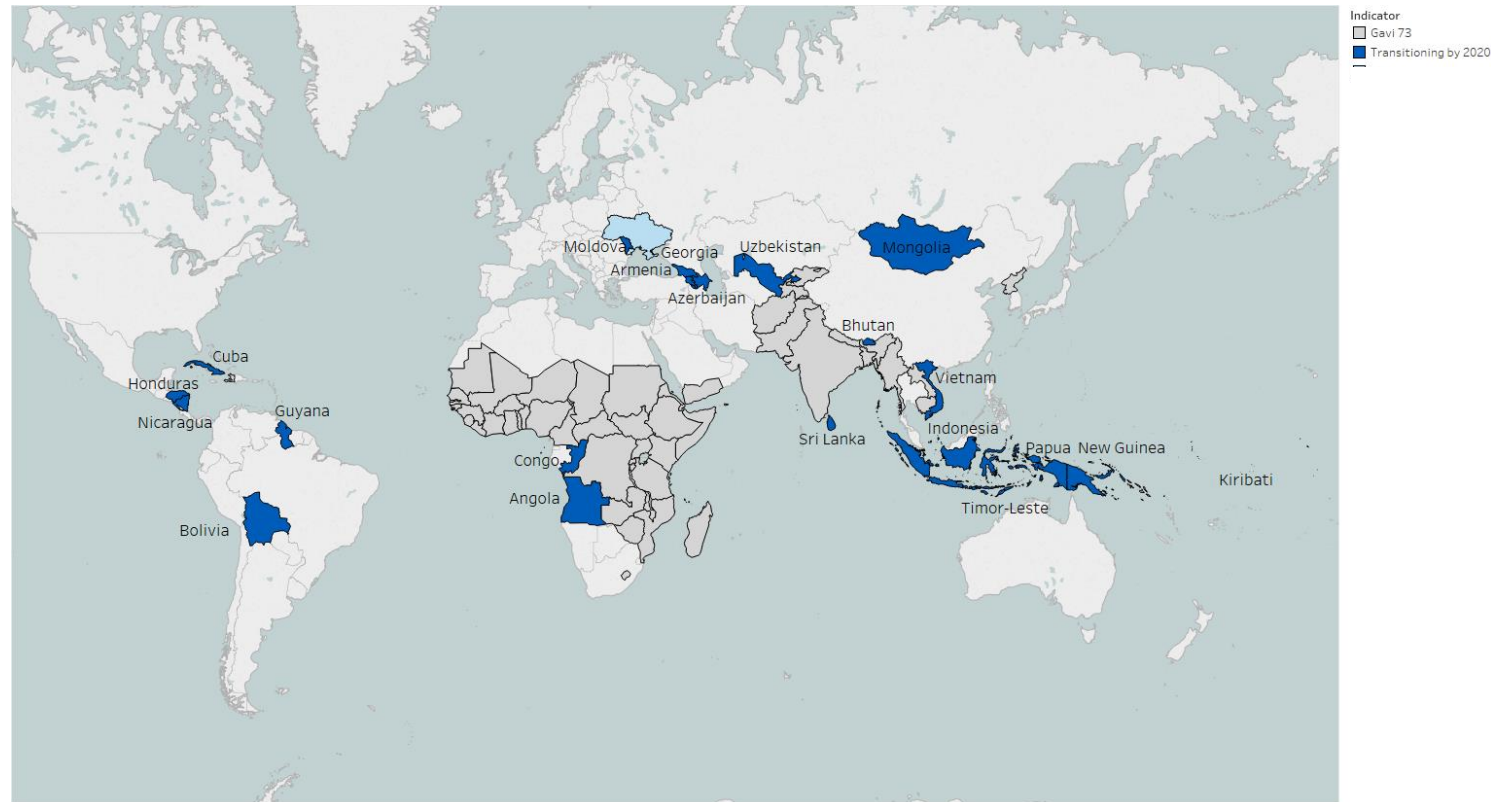
Principles guiding the post-transition support

- The support requested must be **sustainable, time-limited, targeted** and **results-oriented**.
- **Sustainability:** countries will have to demonstrate from the outset how the catalytic investments will be sustained beyond Gavi support (or no longer needed). One-off investment requests will have to demonstrate how they seize a particular/unique opportunity in the operating environment.
- **Catalytic impact:** countries should demonstrate how the requested support could leverage domestic resources (funding, legal frameworks, institutions, partnerships, etc.) to strengthen the immunisation programmes.
- It is required to outline the risk to successful transition and how the specific support would **mitigate this risk**.
- Recognizing that traditional solutions may not provide the fresh approach needed in exceptional circumstances, **innovative approaches** will be encouraged.
- Support will not be a continuation of “business-as-usual” for Gavi: there will be no extension of the current transition grants, HSIS or TCA.
- Post-transition support will be subject to countries continuing to fund vaccines introduced through Gavi.

Post-transition support will be determined by specific risks to successful transition

- The risk assessment and support request submission will seek to establish the following:
 - What are the **existing or future risks to immunization sustainability**? What is the **current mitigation strategy** to address these risks? What are the **gaps** in current approach?
 - What are **additional targeted activities/catalytic investments** that could complement the current risk mitigation strategy and fill the gaps?
 - Which **partner** (existing or new) could implement the proposed activities?
 - How the current support can **leverage domestic resources** to strengthen the immunization programs?
 - How the support will be **sustained by the country or no longer needed**?
- If common risks or opportunities are identified across a number of countries in a given region, a **regional rather than country-specific approach** should be proposed to maximize efficiencies and the request will be **submitted by the regional partner** (instead of a country).

Fourteen countries are eligible for post-transition support by 2020



Map based on Longitude (generated) and Latitude (generated). Color shows details about Indicator. The marks are labeled by Country. Details are shown for Country. The view is filtered on Exclusions (Country,Indicator), which keeps 73 members.

LNCT countries eligible: Armenia, Georgia, Indonesia, Moldova, Sri Lanka, Vietnam (only for 2020)

Other countries: Azerbaijan, Bhutan, Bolivia, Cuba, Honduras, Guyana, Mongolia, Kiribati

Good practice from first round of support requests

- The EPI teams invested significant time in analysing relevant information (JA reports, EVM and cold chain assessments, cMYPs, qualitative studies, economic/political context and forecasts) to inform the risk assessment and plan development.
- Targeted mitigation strategies: linking the requested investments to a specific, time-sensitive risk.
- Good quantification of needs and budgets, as well as definition of timelines and expected results.
- Holistic approach: requested activities are building on risk mitigation strategies currently implemented by the government and complementary to the support of other partners.
- Catalytic impact: clear outline of the how the proposed activities will leverage domestic resources to strengthen the immunization programmes and quantified government co-investment (e.g. human or financial resources); and sustainability – how they will be : commitment to sustain the investment by the government beyond Gavi support window.

Key weaknesses of some proposals

- General lack of sustainable philosophy:
 - requesting funding consultancies and staff positions which should be regular staff positions recruited by the Ministry of Health;
 - support of recurrent costs (such as surveillance kits);
 - requesting activities not addressing the priority risks to successful transition (listing all existing and future needs without strategic prioritization)
- Some of the proposed activities were a continuation of activities funded by the transition grant.
- No diversity of stakeholder engagement by EPI in the consultation process.
- Not adequately demonstrated catalytic effect of leveraging domestic resources.
- Neither current contribution of the government, nor government's role in taking over the activities once the post-transition support was over, were clearly stipulated in the plans.
- The requests did not provide an adequate explanation of how this final support from Gavi would leave the EPI team with the necessary skills and knowledge to lead the immunisation programme without continued assistance.

Post-transition support identification & allocation process



- The **risk assessment** is initiated and driven by the country itself, or triggered by the Gavi Secretariat monitoring indicating that there might be challenges in the transitioned country's performance (e.g. WUENIC estimates showing a downward trend).
- It draws on: JA, transition assessment, transition grant review and any other relevant country documents; interviews with government and partners. In-country engagement could be considered where necessary.
- The Secretariat and partners assist the government through iterative dialogue, but the **country is in the driver's seat** in this risk and needs identification process.
- Based on risk and gap assessment, the country government submits a request for targeted support to the Secretariat (via *Annex 1* to the Guidance, Excel template).
- It is required to outline the risk to successful transition and how the specific investment would **mitigate this risk**.
- The support request must clearly demonstrate how the investment would be **sustainable, time-limited, targeted** and **result-oriented**.
- Country can propose either Alliance partners or expanded partners as implementers of the support. Expanded partners can be identified through an existing Gavi database or through a competitive process.
- The Secretariat reviews the country requests leveraging the Managing Directors review mechanism (+ Immunisation Financing and Sustainability Director).
- If the request follows the post-transition engagement principles (outlined in the Guidance) and meets the criteria, it is recommended for CEO approval.
- Monitoring & reporting of results will be bi-annual and will leverage the PEF MT structure.

*Note: this process is not applicable to the global level post transition support.

Planning for 2018-20 – next steps

- **Next submissions benefit from “rolling admission”:** countries are encouraged to submit their proposals when they are ready and Gavi Secretariat will review it as they come.
- **Country EPI team in the driver’s seat, but stakeholder consultation – contributions from relevant Ministries, in-country/regional partners, institutes and Gavi – will help calibrate the proposal.**
- **Iterative dialogue in the process: do not hesitate to reach out to your Gavi team for guidance and inputs in the risk assessment & support request development!**



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Post-transition support. Moldova experience

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**World Health
Organization**

Proposal development for post-transition support

Begining of development – August 2018

- Development and process lead – National Agency for Public Health, EPI specialists
- Coordination process – UNICEF, WHO and MoH
- Aproval process – MoH
- ✓ **First draft** – 30 August 2018 (presented at RWG)
- ✓ **Second draft** of proposal and risk assessment - 25 September 2018
- ✓ **Final version** – 31 October 2018

Development process



Post-transition risk assessment immunization sustainability and successful transition REPUBLIC OF MOLDOVA

Background
In 2017, population of Republic of Moldova according to the national bureau of statistics was count as 3.5 million persons and annual birth cohort is around 40,000 new-borns [1]. Immunizations included in the National Immunization Programme (NIP) are free of charge for all citizens of the Republic of Moldova. The Ministry of Health, Labour and Social Protection (MHLSP) is responsible for overall coordination of NIP activities [2]. The National Agency for Public Health is responsible for implementing the NIP which includes tasks such as monitoring of vaccination coverage, maintenance and development of cold chain supplies as well as training of health workers in the provision of vaccination. The provision of vaccinations is usually done at primary care level (family doctor offices and health centers).

According to transition analysis, Republic of Moldova demonstrated commitment to immunization and is now fully self-financing vaccine programs since January 2017 (except IPV and HPV since 2017-2018). Moldova has efficiently utilized all donor's transition support to complete immunization programme. The country could steadily paid on time its co-financing obligations despite a challenging economic situation. With Gavi support, Moldova introduced three life-saving vaccines: pentavalent PCV and rotavirus, and is currently introducing the fourth vaccine, IPV, creating the last opportunity of additional catalytic support.

The commitment to sustainability of Moldova is recently demonstrated by approval of Ministry of Health, Labour and Social Protection (MHLSP) the official national forecast for vaccines and budget for 2018 which included 400,000 doses of IPV for procurement in 2019 as maintaining bilateral agreement on sustainability of IPV vaccine after IPV donor programme for 2017-2018.

Therefore, country has honored its obligations in front of partners and now in post-transition time least risk to sustainability of all efforts which were done.

Overall Risks

- Risk identifying
- Prioritization of the risks
- Team work
- Risk Assessments
- Partners feedback

➤ Background for risk assessment:

- ✓ Previous researches
- ✓ Assessments (EVM, cold chain,)
- ✓ JAs
- ✓ Qualitative studies
- ✓ New assessments – **be prepared!**

Country	Risk Scenario	Current mitigation strategy	Identified Gap	Proposed Plan	Responsible organization/agency	Timeline	Budget (USD M)			Status	Comments
							2017	2018	2019		
Moldova	Self-financing of vaccine procurement	Government budget	Government budget	Government budget	Government budget	2017-2018	1000000	1000000	1000000	On track	Self-financing of vaccine procurement
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Strategies and activities proposed

First prioritization:

- Vaccine hesitancy
- Vaccine sustainability
- Building capacity for HCW
- Improvement of data quality
- Cold chain equipment

NOT APPROVED

Gavi feedback:



- Detailed breakdown for each “Identified Gap” and activity planned
- More detailed budget assumptions for each activity planned
- Specific Government commitment and contribution for each activity
- All the risks and related activities link to studies, evaluations or self-assessments

Strategies and activities proposed

Final prioritization:

1. Data quality improvement
2. Increase vaccine demand
3. Cold chain supply
4. NITAG strengthening



Reflection on process

- Lot of risks and ideas for support – but **not eligible**
 - Was not easy to identify:
 - Activities and proposal as catalytic support
 - Prove sustainability beyond Gavi support
 - Provide risk mitigation which are in place
 - Quick development of new assessment of current situation or mapping
 - Not all the times data is easy to collect and to be analyzed
 - Partners can be very useful – expertize
- Gavi provided sufficient support and comments during the process

Thank You!!!