

# Financing and Managing Immunization Programs in Decentralized Contexts

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Day 1 – An overview and framing of  
immunization in decentralized contexts

April 2021

# Financing and Managing Immunization Programs in Decentralized Contexts

## Welcome! Bienvenue!



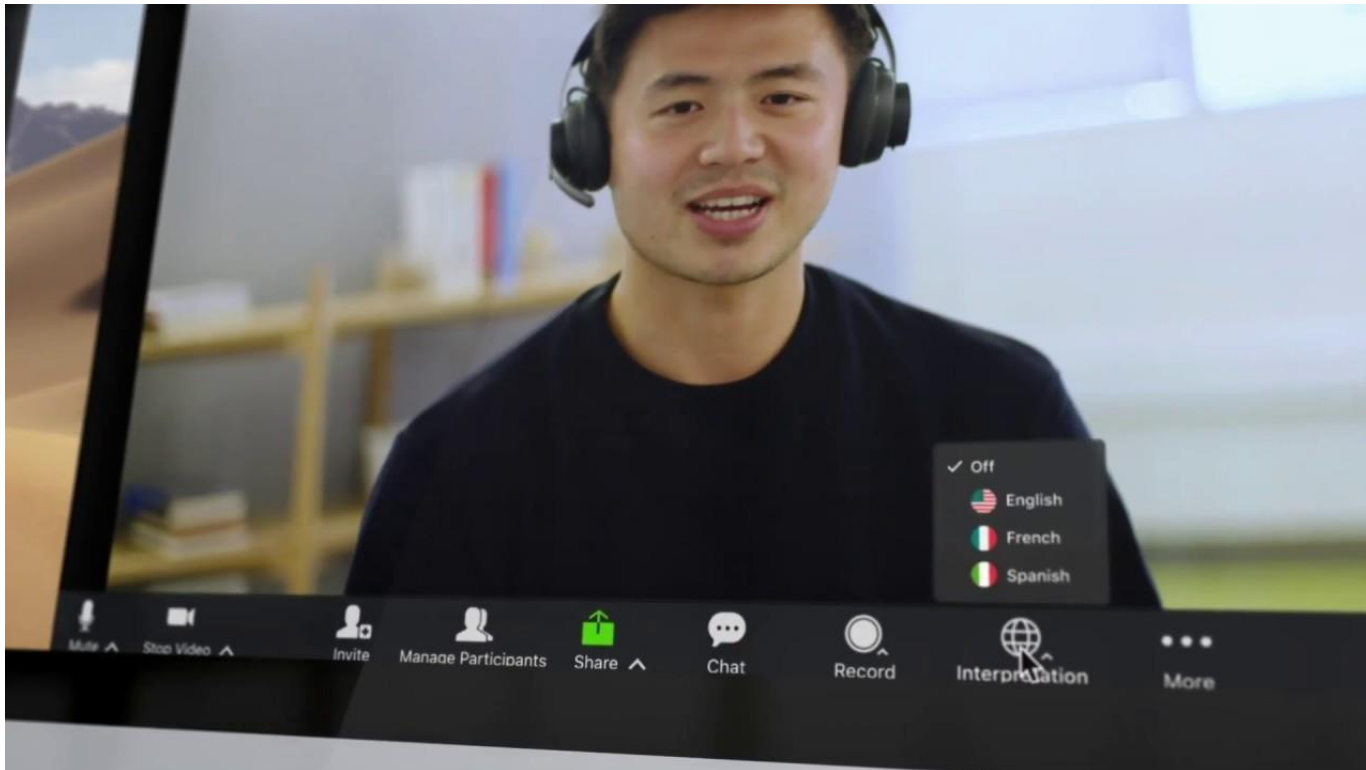
**LNCT**

Learning Network for  
Countries in Transition

April 20-22

# Interpretation

1. At the bottom of the screen, select the “Interpretation” function.
2. English and French options will appear.
3. Select your preferred language.

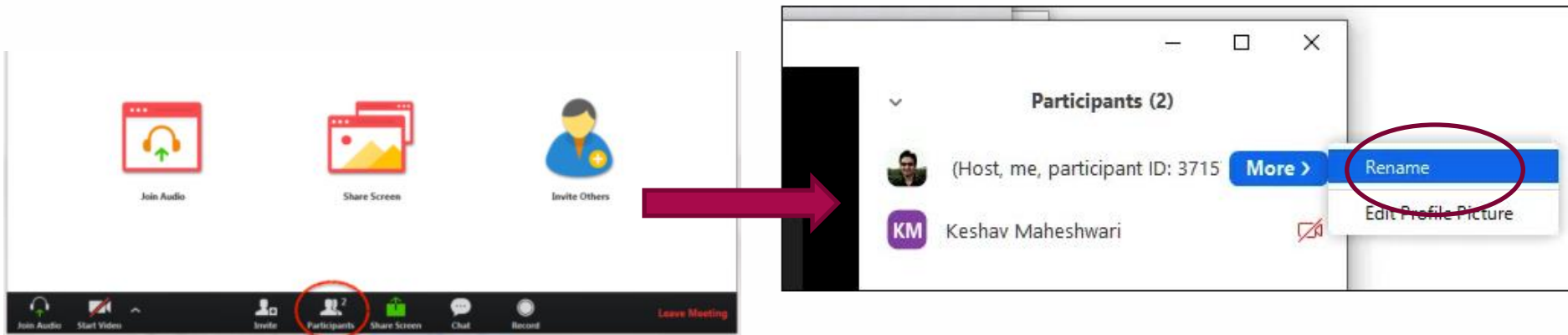


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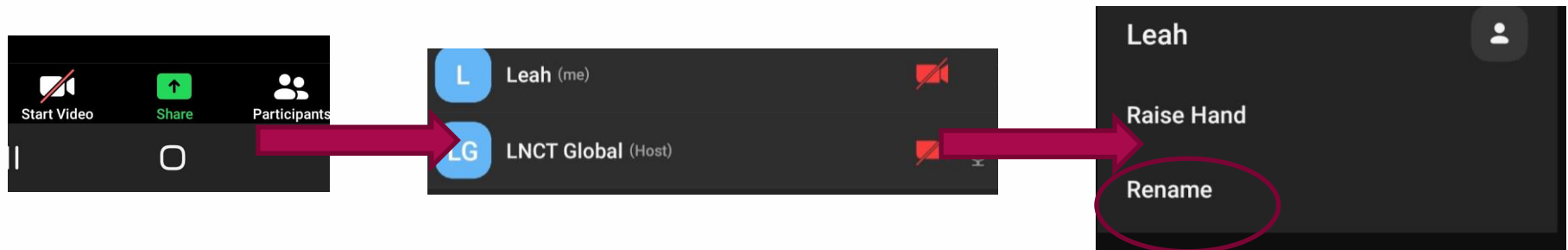
Name, Country

*"Leah List, US"*

Computer:

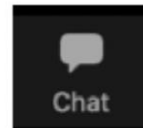
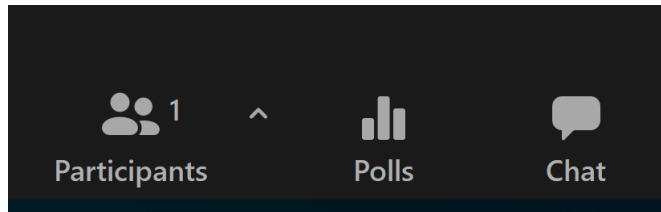


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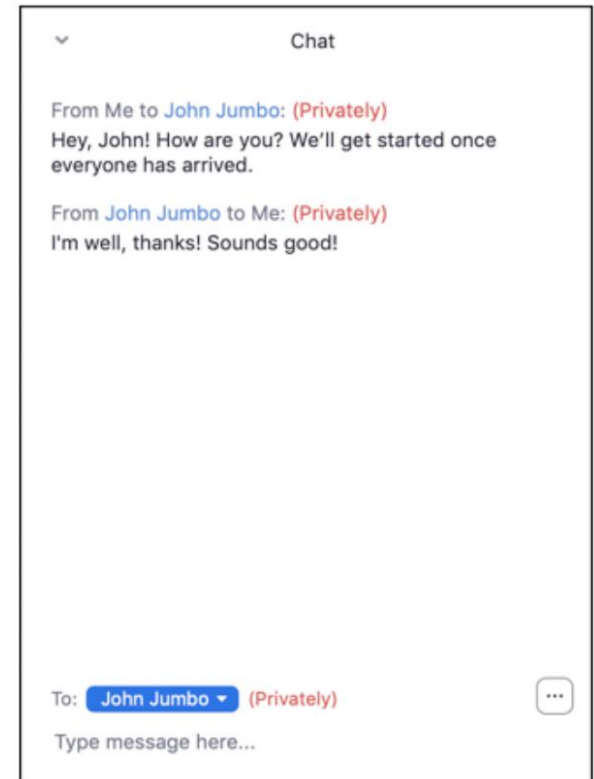


# Throughout the presentations, place questions in the chat box

Find the chat button at the bottom of your screen and click



A chat panel will open on the side



## Who to contact:

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- If you have problems with **Zoom**, including **Interpretation** please let us know via the chat or via e-mail [info@lnct.global](mailto:info@lnct.global) and one of the members of the LNCT Network Coordination team will do our best to help.



**Elizabeth Ohadi**



**Leah Ewald**



**Leah List**

- Our interpreters for the workshop are: Claudine Belhomme and Maud Blachier.

# Online Workshop Resources:

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- Contains the agenda for the workshop, copies of the presentations in English and French, and a directory of all the participants attending the event.
- You can access the page here: <https://lnct.global/resources/lnct-workshop-resources-mobilizing-resources-and-managing-immunization-program-in-decentralized-contexts/>

## — LNCT WORKSHOP RESOURCES: MOBILIZING RESOURCES AND MANAGING IMMUNIZATION PROGRAM IN DECENTRALIZED CONTEXTS

April 13, 2021

### — DATES

April 20-22, 2021

### OBJECTIVES

- - Define what "decentralization" looks like for immunization programs in LNCT countries (including defining types of decentralization, mapping roles/responsibilities)
  - Discuss the opportunities decentralization presents for immunization programs
  - Examine the common financial and programmatic challenges related to decentralization for immunization programs in LNCT countries
  - Explore the strategies countries have successfully used to overcome or mitigate these challenges

### AGENDA

Day 1: An Overview and Framing of Immunization in Decentralized Contexts

Day 2: Programmatic Sustainability in Decentralized Contexts

Day 3: Financial Sustainability in Decentralized Contexts

### WORKSHOP MATERIALS

# Meeting norms

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LNCT meetings are intended to be a safe space for participants to share their experiences, challenges and best practices.

Please help us make this meeting space the most welcoming possible by:

Recognizing this  
is a confidential  
space

Sharing your  
experiences

Appreciating  
when questions  
are asked

Limiting time  
spent on tasks  
unrelated to the  
workshop

Honoring time limits

Being  
Respectful



# Welcome

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**Ganiyu Salau**  
**Steering Committee representative, Nigeria**

# Welcome

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**Kim Harper**  
**Senior Manager for Policy and Strategic  
Design, Immunisation Financing &  
Sustainability, Gavi**

# Welcome

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**Amanda Folsom**  
**Interim Director, Network Coordination team**

# Workshop Objectives

- Increase our understanding of:
  - How decentralization affects the financing and implementation of immunization programs and impacts the program's coverage and equity goals?
  - What is the impact of decentralization on emergency response, such as in the case of COVID vaccine roll out?
  - What are common financial and programmatic challenges and opportunities for immunization programs in decentralized LNCT countries?
  - What strategies have countries successfully used to overcome or mitigate common decentralization-related challenges?

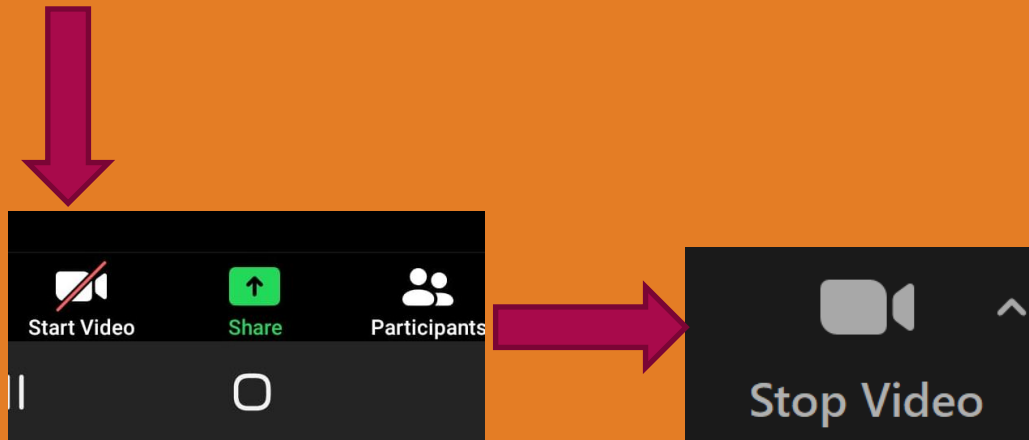
# Workshop Agenda

No.	Length	Session Title	Presenter(s)
1	45 min	<b>Welcome and Introductions</b>	Ganiyu Salau, LNCT Steering Committee Member, Nigeria Kim Harper, Senior Manager for Policy and Strategic Design, Immunisation Financing & Sustainability, Gavi
2	35 min	<b>Coverage, Equity and Gavi Transition in Decentralized Contexts: Challenges and Opportunities</b>	Leah Ewald, LNCT Network Coordinator
<b>10-minute break</b>			
3	30 min	<b>Facilitated discussion: Emergency response in decentralized contexts: The example of COVID-19</b>	Miloud Kaddar, LNCT Network Coordinator
4	30 min	<b>Small group discussions: Decentralization challenges and opportunities</b>	
5	5 min	<b>Evaluation Survey</b>	
6	10 min	<b>Day 1 Wrap Up</b>	

**Day 2: Programmatic Sustainability in Decentralized Contexts**

**Day 3: Financial Sustainability in Decentralized Contexts**

# Ice Breaker



**Jamboard demo:**

[https://jamboard.google.com/d/17L1Ajsp\\_5UOPI1thyijm43rop9bzcgVo0qtg2tbciPg/edit?usp=sharing](https://jamboard.google.com/d/17L1Ajsp_5UOPI1thyijm43rop9bzcgVo0qtg2tbciPg/edit?usp=sharing)

# Coverage, Equity and Gavi Transition in Decentralized Contexts: Challenges and Opportunities





# Coverage, Equity and Gavi Transition in Decentralized Contexts

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## Challenges and Opportunities

April 2021

Leah Ewald, LNCT Network Coordinator

# Defining Decentralization

- What is being decentralized?
  - **Political decentralization**: policy-making authority is transferred to citizens and their representatives
  - **Administrative decentralization**: responsibility and financial resources for public services are transferred to lower levels of government.
  - **Fiscal decentralization**: authority to make decisions about expenditure is transferred to lower levels of government.
- To what degree is it decentralized?
  - **Deconcentration**: Responsibilities are transferred from Ministry staff working in the capital to those stationed in subnational offices, with ultimate authority staying at the national level.
  - **Delegation**: Some responsibility and decision-making authority is transferred to semi-autonomous sub-national entities.
  - **Devolution**: Decision-making, financing and management responsibilities are transferred to subnational governments who have legally recognized geographic boundaries over which they hold authority.



Increasing  
subnational authority

## **Poll: Where do you think your country falls on the spectrum of decentralization?**

- A) Deconcentration – we've shifted some responsibility to Ministry staff stationed subnationally, but everyone ultimately answers to the national level.
- B) Delegation – we've shifted some decision-making to the subnational governments, but it's limited.
- C) Devolution – we've shifted substantial authority to the subnational governments, and subnational governments act autonomously.

## **Sondage : Où, selon vous, votre pays se situe-t-il dans le spectre de la décentralisation ?**

- A) Déconcentration : nous avons transféré une partie de la responsabilité au personnel du ministère en poste au niveau infranational, mais tout le monde dépend en fin de compte du niveau national.
- B) Délégation : nous avons transféré certains processus décisionnels aux gouvernements infranationaux, mais cela est limité.
- C) Dévolution : nous avons transféré une bonne partie de l'autorité aux gouvernements infranationaux, qui agissent de manière autonome.

Decentralization is usually a broad reform initiated outside the health sector.

*It may be done by fiat, without significant consultation with the health sector or sufficient attention to the process by which it will be rolled out.*

*Immunization programs are affected by this process but can also help shape it.*

**Poll: What do you think is generally the impact of decentralization on immunization coverage?**

- A) It improves coverage.
- B) It has no impact on coverage.
- C) It makes coverage worse.
- D) There's no clear trend.

**Sondage : Selon vous, quel est généralement l'impact de la décentralisation sur la couverture vaccinale ?**

- A) Elle améliore la couverture.
- B) Elle n'a aucun impact sur la couverture.
- C) Elle nuit davantage à la couverture.
- D) Il n'y a pas de tendance claire.

## Decentralization's impact on immunization coverage – there's no clear trend!

- India: Decentralization in Kerala State improved access to immunization and increased DPT coverage by improving infrastructure and accountability.
- Indonesia: Fiscal decentralization has no statistically significant association with child immunization outcomes.
- Papua New Guinea: BCG and DPT1 coverage decreased over the decade in which decentralization took place.

*It is **difficult to discern** the impact of decentralization on immunization coverage and equity given the variety of other factors, such as economic trends and other health system reforms, that may be happening at the same time.*

*The impact on immunization also depends on **how** decentralization is implemented and what **support** is offered to subnational governments taking on new responsibilities....*

# Decentralization impact on immunization programs

- Shifts in program management responsibilities
  - Subnational level takes on new responsibilities for activities like service delivery, human resources, and logistics, while the national level's attention shifts to overarching responsibilities like planning, technical guidance, policy design, capacity building, and coordination.
  - These shifts result in a change in skills and capacities needed at both levels of government.
- Shifts in budgeting and financing processes and authority
  - Subnational governments gain increased authority over budgets with a varying degree of legal requirements for spending on health and immunization.
  - Ministries of Health may advise on the budgeting process or may not be directly involved.
- New actors and stakeholders in immunization
  - Ministries of local government, pass-through agencies, and other subnational authorities begin to play a role in immunization and may prioritize it differently.
  - Private sector actors may play an increased roll at subnational levels.
- Changes in financial flows and resources for immunization
  - Finances may flow through different entities, potentially complicating or slowing down the process.
  - Financing may come from new sources, like locally generated revenue

# Impact of Decentralization on Immunization Coverage

- Opportunities:
  - Flexibility to pursue innovation and learning
  - Ability to rapidly respond to local challenges or crises
  - Greater local accountability
- Common challenges:
  - Lack of immunization program / financial management capacity at subnational levels and/or support from national level
  - Decentralization of service delivery far away from EPI Managers
  - Transfer of responsibility without corresponding transfer of resources
  - Under-prioritization of immunization by subnational governments
  - Unclear divisions of responsibility or accountability
  - Funding delays caused by fragmented/complex funding flows
  - Difficulty coordinating national policies and strategies
  - Loss of economies of scale
  - Difficulty mounting a coordinated, rapid response to national emergencies



## Discussion:

In your country, what opportunities does the decentralized structure provide to increase immunization coverage?

What challenges does decentralization present for coverage?

# Impact of Decentralization on Immunization Equity

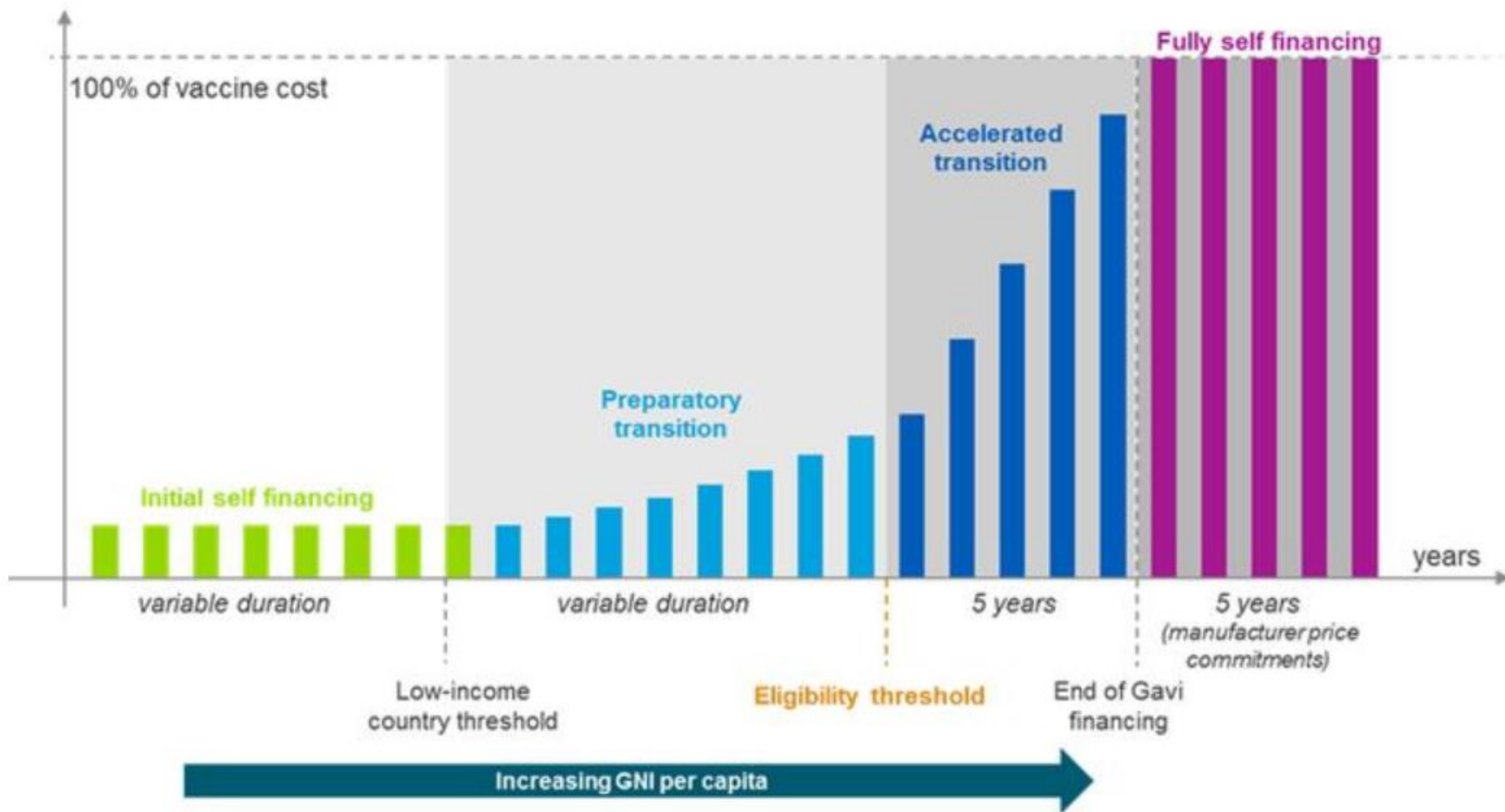
- Opportunities:
  - Flexibility to tailor strategies to local contexts, such as accessing hard-to-reach populations or providing services in conflict zones
  - Greater opportunities for local community engagement, representation of minority groups, and self-government
- Common challenges:
  - Re-enforcement of existing inequities in available resources and spending on immunization
    - Funding allocation formulas based on historical spending, staffing, or level of subnational contribution rather than equitable distribution of resources
    - Variation in states' abilities to raise their own revenue
    - Gravitation of human resources to areas with bigger cities and higher salaries
  - Lack of a mechanism for redistributing resources to places that need them most

## Discussion:

In your country, what opportunities does the decentralized structure provide to increase immunization equity?

What challenges does decentralization present for equity?

# What is Gavi Transition?



# Gavi Transition Status of Countries Attending this Workshop (as of 2019)

- Accelerated Transition
  - India
  - Nigeria
  - Vietnam
- Preparatory Transition
  - Cote d'Ivoire
  - Pakistan
  - Republic of Congo
- Country transition status was frozen in 2020 in light of the expected economic consequences of the pandemic.

# Decentralization and Gavi Transition

- While immunization continues to rely heavily on external resources that are managed at the national level, it may not be decentralized as much as other health programs
- The Gavi transition process may have a wide impact on what immunization programs look like nationally and sub-nationally:
  - Transition from a vertical to more integrated program
  - Mobilization of domestic resources at all levels
  - Potential loss of external technical support for functions such as procurement, training, and learning
  - Transfer of further immunization responsibilities to subnational level with declining reliance on external resources
  - Need for coordination among key stakeholders

**Poll: In your country, how has Gavi transition changed the role of subnational governments in immunization? (Check all that apply)**

- A) Subnational governments have had to take on additional responsibilities for immunization service delivery and program management.
- B) Subnational governments have greater authority to make decisions about immunization policy and program implementation.
- C) Subnational governments have needed to find more resources for immunization within their own budgets.
- D) There has been no change in the roll of subnational governments in immunization so far.
- E) Something else – I'll explain in the chat!

**Sondage : Dans votre pays, comment la transition hors du soutien de Gavi a-t-elle changé le rôle des gouvernements infranationaux dans la vaccination ? (Cochez toutes les réponses applicables)**

- A) Les gouvernements infranationaux ont dû assumer des responsabilités supplémentaires pour la prestation des services de vaccination et la gestion des programmes.
- B) Les gouvernements infranationaux ont une plus grande autorité pour prendre des décisions concernant la politique de vaccination et la mise en œuvre des programmes.
- C) Les gouvernements infranationaux ont dû trouver plus de ressources pour la vaccination dans leurs propres budgets.
- D) Il n'y a eu aucun changement dans le rôle des gouvernements infranationaux en matière de vaccination jusqu'à présent.
- E) Autre chose — je vais vous l'expliquer via le chat !

Discussion: In your country, what has been done to engage subnational governments in the Gavi transition process?



Thank you!

**10-MINUTE BREAK**

# **Facilitated discussion: Emergency response in decentralized contexts: the example of COVID-19**

# Facilitated discussion: Emergency response in decentralized contexts: the example of COVID-19

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With remarks from Vietnam and Congo

April 2021

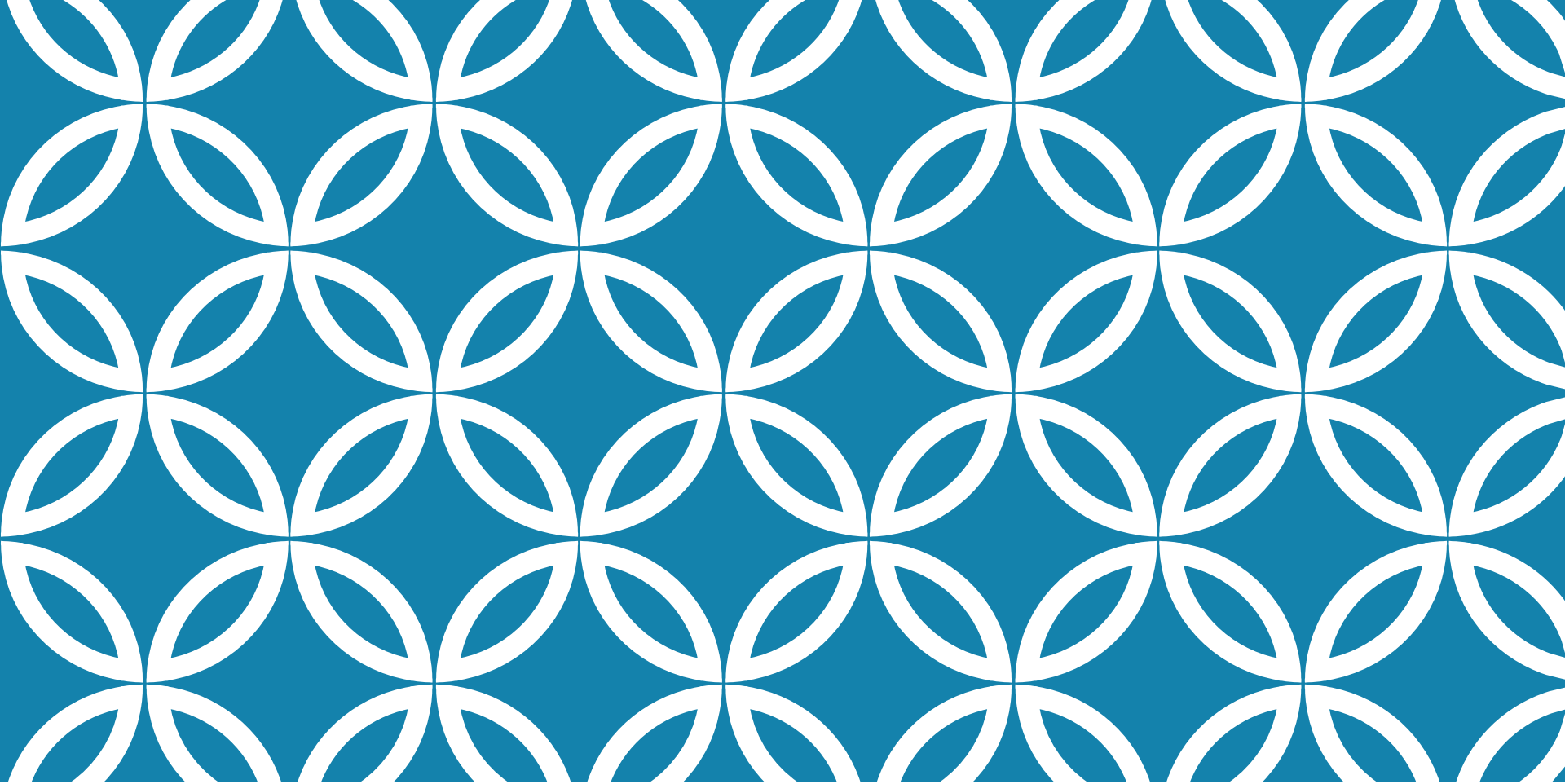
Miloud Kaddar

# Emergency response in decentralized contexts: The example of COVID-19

- When might it be helpful to allow decisions to be made at the subnational level in an emergency?
  - When is it important for decisions to be made at the central level?
  - How might this differ in an emergency vs for routine immunization?
- 
- How has decentralization helped or hindered COVID vaccine roll out planning and implementation processes?
  - What were/are the main challenges? How are you managing them?
  - What are your best practices or lessons learned so far?

**Congo**

**Vietnam**



# DECENTRALIZATION IN VIETNAM

LNCT WORKSHOP, APRIL 20, 2021

EPI, Vietnam

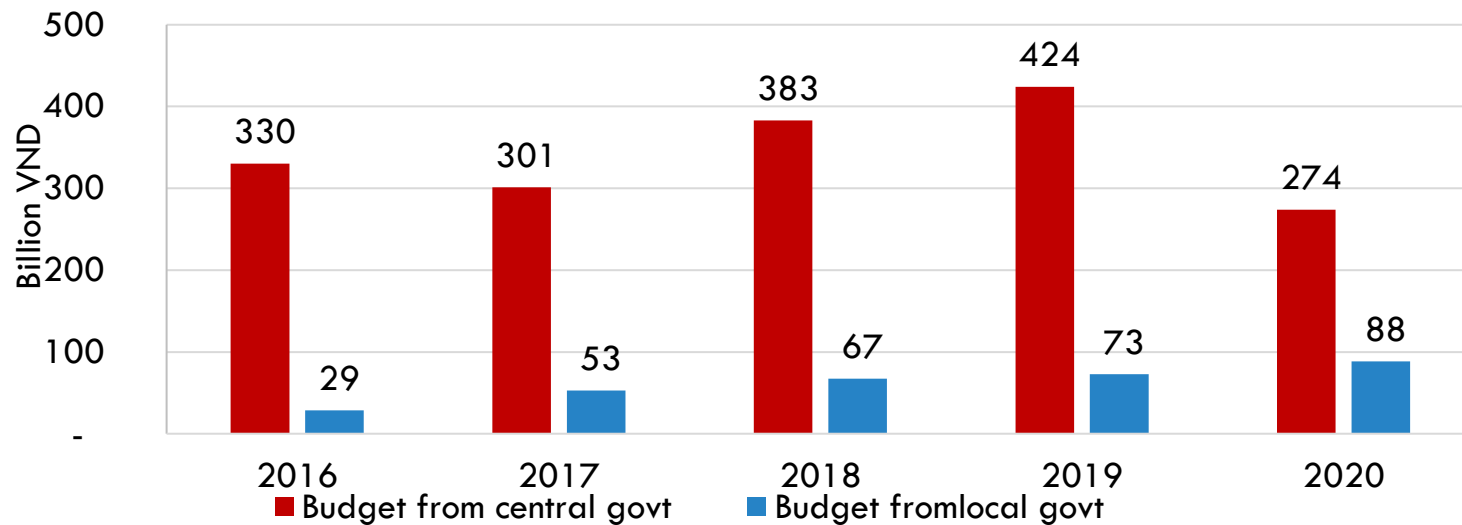


# NEW FUNDING MECHANISM IN THE LAST PERIOD 2016-2020

- ❖ Decision 1125/QĐ-TTg issued by Central Govt. in 2017 stated that fund from central govt. covers following items:
  - Maintain routine immunization service and conduct SIAs
  - Vaccine and logistic supply for children and PWs and testkit, consumable for laboratory surveillance of VPDs surveillance
  - Supervision
  - National Immunization Information System
  - Maintenance, improvement of the cold chain system
  - ***Fund from sub-national govt. covers other costs including other logistics, allowance for HCWs, vaccine transportation of vaccine, training, monitoring, communication, ect***

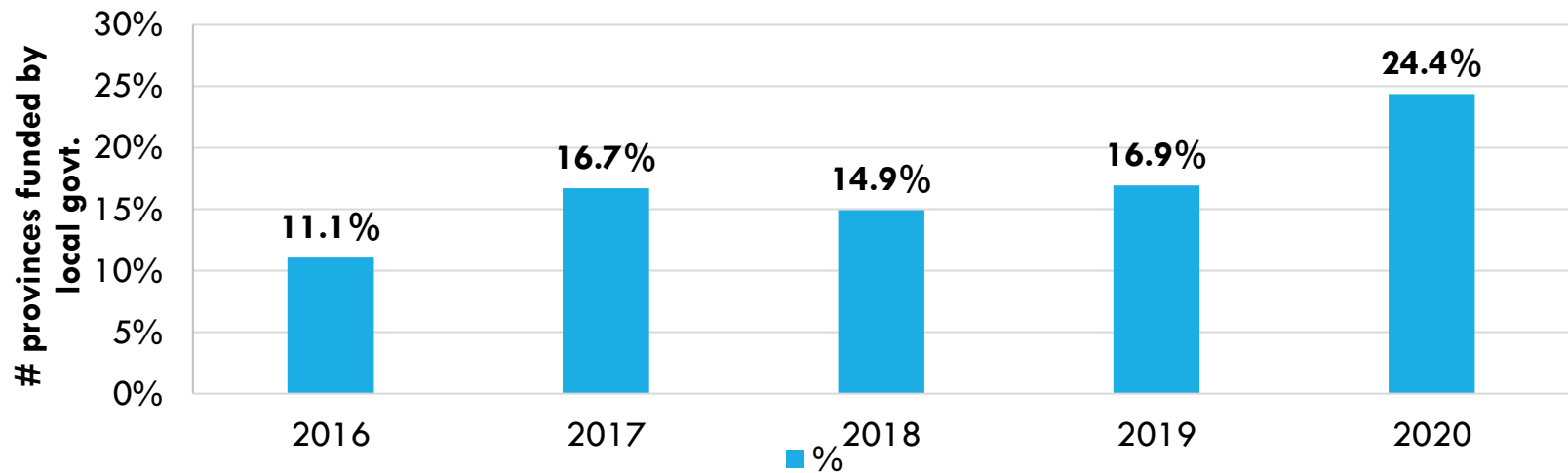
# FUNDING FROM CENTRAL GOVT. VS LOCAL GOVT.

2016-2020

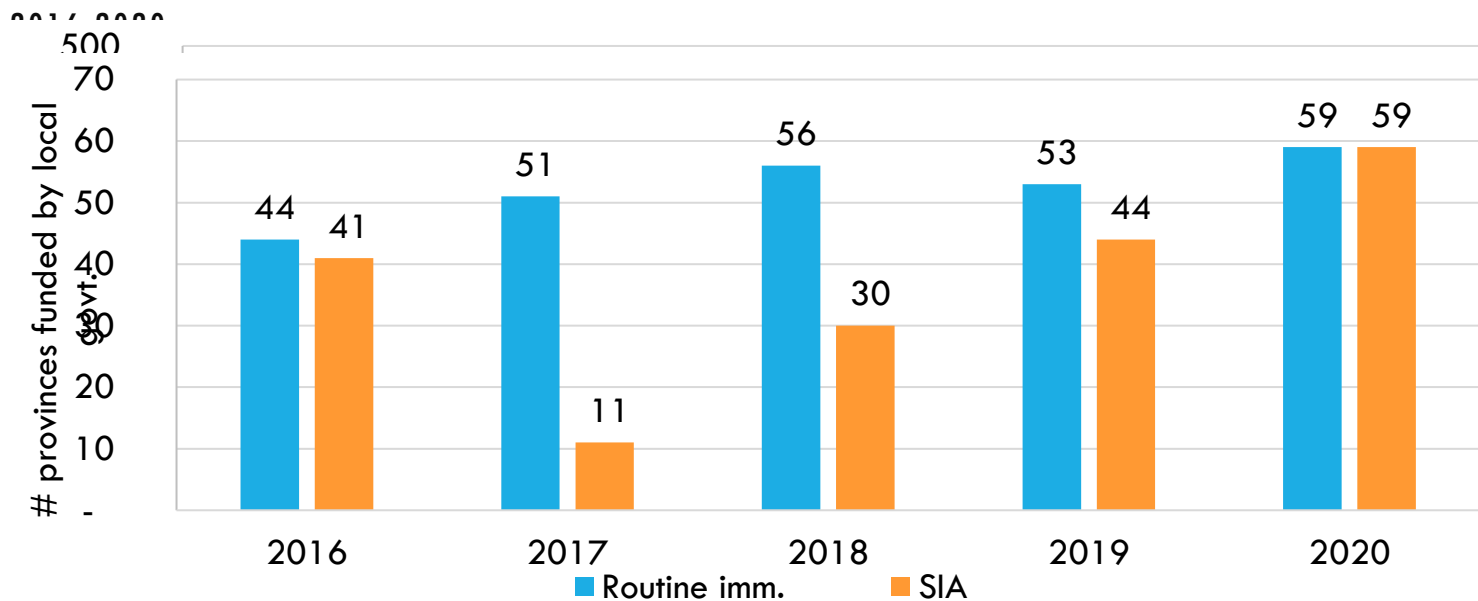


# COST BY CHILD INVESTED BY LOCAL GOVT. VS CENTRAL GOVT.

2016-2020



# FUNDING FROM LOCAL GOVT. BY ROUTINE IMM. VS SIA



# MORE DECENTRALIZATION IN VIETNAM FROM 2021

- ❖ Decision 1125/QĐ-TTg issued by Central Govt. in 2021 mentioned that fund from central govt. covers only vaccines
- ❖ The remaining costs will be funded by local govt.
  - Syringes and safety boxes
  - Cold chain system Supervision
  - National Immunization Information System
  - Maintenance, improvement of the cold chain system

# CHALLENGES

- ❖ Difficulty provinces: investment from central govt. reduced
- ❖ Limited investment from local govt.
- ❖ Less outreach immunization posts
- ❖ No incentive for village HWs that impacts on communication

# THANK YOU FOR YOUR ATTENTION!



**Small group discussion**



## One-on-one country warm-up discussions

- In a moment, you will be automatically placed in a Zoom breakout session with another country and a LNCT facilitator:
  - Group 1: Congo and Cote d'Ivoire
  - Group 2: Nigeria and Pakistan
  - Group 3: India and Vietnam
- Please discuss the questions on the following slide as a group.
- Post your answers to your country Jamboard (see link in the chat).
- After 30 minutes, you will be automatically returned to the Zoom plenary session for a brief wrap-up of the day.

# Country team facilitators

Country	Facilitators
Congo	Jhoney Barcarolo
Côte d'Ivoire	Miloud Kaddar
India	Amanda Folsom
Nigeria	Elizabeth Ohadi
Pakistan	Anuji Gamange
Vietnam	Cristiana Toscano

# Group discussion questions

- What are your key challenges related to decentralization? Do you have any in common?
- What are 1-2 lessons learned or successful experiences related to managing or financing immunization programs in decentralized contexts from your countries?
- What are 1-2 decentralization challenges that both of your countries are concerned about for COVID vaccine roll out?
- What are 1-2 things you are hoping to learn from this workshop?

# Help us improve LNCT activities!

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**Before you go,  
please fill out a  
short feedback  
survey!**

**We will use this  
to improve  
future LNCT  
activities.**



## **Reported on a scale of 3-Agree 2- Neither Agree nor Disagree 1- Disagree**

1. The content of the sessions was relevant to my work and presented in an engaging way.
2. There were opportunities for participants to discuss and share thoughts.
3. There was a good balance between country examples, partner presentations and interactive sessions (Q&A, polls, country work, etc).

## **Rapporté sur une échelle de 3- D'accord 2- Ni d'accord ni en désaccord 1- En désaccord**

1. Le contenu des sessions était pertinent pour mon travail et présenté de manière intéressante.
2. Les participants ont eu l'occasion de discuter et d'échanger leurs points de vue.
3. Il y avait un bon équilibre entre les exemples de pays, les présentations des partenaires et les sessions interactives (questions-réponses, sondages, travail des pays, etc.).

**Day 1 wrap-up and closing**