



Analysis of indicators used in Financial Sustainability Plans submitted to GAVI

Marty Makinen, PhD, Abt Associates, Inc.
Raj Gadhia, MPH, Emory University
Partners for Health Reform *plus* project



The PHR *plus* Project is funded by U.S. Agency for International Development and implemented by:
Abt Associates Inc. and partners, Development Associates, Inc.; Emory University Rollins School of Public Health; Philoxenia International Travel, Inc. Program for Appropriate Technology in Health; SAG Corp.; Social Sectors Development Strategies, Inc.; Training Resources Group; Tulane University School of Public Health and Tropical Medicine; University Research Co., LLC.

URL: <http://www.phrplus.org>

The logo for Abt Associates, consisting of the word "Abt" in a white serif font centered within a blue square.

Organization of Presentation

- ▲ Purpose
- ▲ Background of GAVI
- ▲ Financial Sustainability
- ▲ The Financial Sustainability Plan (FSP)
- ▲ Indicators countries submitted in 2002
- ▲ Conclusions
- ▲ Recommendations

Purpose

- ▲ Understand indicators used by countries
- ▲ Learn about how appropriate the indicators are
- ▲ Assess recommendations for GAVI

Global Alliance for Vaccines and Immunization (GAVI)

- ▲ PPP to increase children's access to vaccines
- ▲ Partners: national governments, UNICEF, WHO, The World Bank, Gates Foundation, the vaccine industry, public health institutions and NGOs.
- ▲ Financing arm: the Vaccine Fund
- ▲ Financial Sustainability requirement

GAVI Definition of Financial Sustainability

The ability of a country to *mobilize and efficiently use domestic and supplementary external resources on a reliable* basis to achieve current and future target levels of immunization performance in terms of access, utilization, quality, safety and equity.

The Financial Sustainability Plan (FSP)

- ▲ Describes the government's approach to mobilizing and effectively using financial resources to support medium- and long-term program objectives
- ▲ Submit at 2 year mark
- ▲ Prepared by ICC: Donors, MOH, MOF, NIP, GOX
- ▲ Focus here: the use of indicators in the FSPs submitted in 2002

Eleven FSPs reviewed – use of recommended indicators

- ▲ GAVI recommended twenty-three indicators total
- ▲ Indicators grouped into four categories
- ▲ Classified four of the total twenty-three indicators as global
- ▲ What did countries use

Categories are Key Elements of Financial Sustainability

- ▲ Mobilization and use of adequate resources
- ▲ Reliability of resources
- ▲ Efficient use of resources
- ▲ Self sufficiency

Four Global indicators recommended

- ▲ National operating expenditures on immunization as a share of GDP
- ▲ National capital expenditures on immunization as a share of GDP
- ▲ Vaccine wastage rate
- ▲ Donor expenditures vs. donor pledges

Findings

- ▲ Uniform choice of indicator
- ▲ Use of global indicators
- ▲ Use of national indicators

Indicator choices were not uniform

- ▲ Total number of indicators
 - ▲ Process indicators
- ▲ Uneven in capturing elements of FS
- ▲ Uneven use of GAVI recommended indicators

Use of global indicators

- ▲ Proportion using them
- ▲ Most popular indicator
- ▲ Least popular indicator
- ▲ Donor performance indicator usage

Use of national indicators

- ▲ Proportion using them
- ▲ Most popular category
- ▲ Least popular category

Conclusions

- ▲ Development of M&E plans
- ▲ Utility and breadth of indicators
- ▲ Under-representation of key elements of financial sustainability

Recommendations

- ▲ Training on practical value of indicators
- ▲ Move beyond process indicators
- ▲ Investigate and focus on indicators of donor performance

List of Country FSPs reviewed

- ▲ Cambodia
- ▲ Cote d'Ivoire
- ▲ Ghana
- ▲ Kenya
- ▲ Kyrgystan
- ▲ Laos
- ▲ Malawi
- ▲ Mali
- ▲ Mozambique
- ▲ Rwanda
- ▲ Tanzania

Nineteen national Indicators

- ▲ Program-specific recurrent expenditures paid for with national resources within the past fiscal year divided by total program-specific expenditures
- ▲ Program-specific capital expenditures paid for with national resources within the past fiscal year divided by total program-specific capital expenditures
- ▲ Plan of Action for Demand Generation (Communications Plan) implemented
- ▲ Share of caretakers (mothers, fathers and in-laws) knowledgeable about at least one benefit of immunization services
- ▲ Share of caretakers (mothers, fathers and in-laws) knowledgeable about at least one benefit of immunization services
- ▲ Plan to set aside or allocate funds to replace or upgrade capital items essential to the immunization program (e.g. cold chain)
- ▲ Well established Financial Planning process involving all financiers
- ▲ % of districts with access to services within five kilometers or travel of twenty minutes or less, irrespective of travel mode
- ▲ Share of actual total expenditures (domestic and international together and separately) to amount budgeted for program within the last fiscal year
- ▲ Share of actual domestic expenditures on recurrent costs of immunization program/amount budgeted for recurrent costs within the last fiscal year
- ▲ Share of actual domestic expenditures on capital costs of immunization program/amount budgeted for capital costs within the last fiscal year
- ▲ Share actual district recurrent expenditures to amount budgeted
- ▲ Existence of laws, statutes, regulations and/or official decrees specifying amounts or allocations to be dedicated to immunization programs
- ▲ Purchase of quality vaccines with use of international procurement mechanism or direct procurement with price differential of less than ten percent from international one for which the country is eligible
- ▲ Existence of a Training Plan (that includes training in both (1) conducting financial assessments and (2) efficient use of resources) that has been used to conduct training sessions during past 1-2 years
- ▲ Existence of an accounting system for the immunization program or a broader accounting system where expenditures can be disaggregated by program
- ▲ Trends in wastage rates over time, by antigen, particularly for OPV, DTP and TT which can be reused
- ▲ Trends of vaccine stock-outs, by region

GAVI Partner Roles

- ▲ **WHO:** To develop global policies and strategies
- ▲ **UNICEF:** To advocate and mobilize leaders from all levels to recognize this priority
- ▲ **The Bill & Melinda Gates Foundation:** To invest and raise awareness
- ▲ **Vaccine industry:** supply high quality vaccines to the poorest populations, R&D
- ▲ **NGOs:** provide technical advice and staff to government programs, additional financial support.

GAVI Decision process

- ▲ Independent Review Committee & GAVI Board review 3 conditions:
 - ▲ ICC
 - ▲ A recent review (within 3 years) of immunization services
 - ▲ A multi-year plan
- ▲ Requests go to Vaccine Fund Board

GAVI is Distinct

- ▲ How it is different from other immunization groups
- ▲ Support countries get

FTF subgroup

- ▲ What partners helped develop the annex indicators for GAVI? What groups?
 - ▲ FTF subgroup: (WHO), (PHR_{plus}), (World Bank), (University of Nairobi), (PAHO)