

Delivering on the promise of immunization for all Kenyans

Vaccines save lives and prevent unnecessary suffering from preventable diseases such as measles, polio, and pneumonia. Immunization services routinely reach more households than any other health service and are identified as a priority intervention critical to achieving universal health coverage (UHC)—a pillar of the government's 'Big Four' agenda.

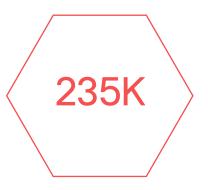
Kenya's immunization program is at a critical turning point, responding to changes brought about by devolution and planning for upcoming transition from support provided by Gavi, the Vaccine Alliance. To protect the gains made to date, expand immunization services to service the hardest to reach, and achieve ambitious UHC goals, Kenya needs a renewed focus on sustainable immunization financing and planning.



coverage of BCG*

78%

of Kenyan children are fully immunized by 12 months



Kenyan children were unimmunized in 2018



Gavi transition on the horizon

Gavi co-financing encourages governments to invest in new vaccines, fosters country ownership, and helps plan for financially sustainable immunization programs. Through co-financing, national governments cover part of the cost of Gavi-funded vaccines, effectively co-procuring a portion of their new vaccines and safe injection devises requirements. In Kenya, Gavi supports procurement of pneumococcal conjugate vaccine (PCV), rotavirus, pentavalent, yellow fever, and human papillomavirus (HPV) vaccines.

Currently, Kenya is in the preparatory transition phase. With economic growth averaging 5.8% since 2016, Kenya is one of the fastest growing economies in sub-Saharan Africa and is projected to enter the accelerated transition phase in 2022. This begins a five-year period for the government to rapidly increase co-financing payments, the goal of which is to achieve self-sustainability as seen in chart one.

In order to deliver on the country's ambitious UHC goals—including immunization for all Kenyans—the government of Kenya, through Parliament and the Ministries of Health and Finance at the national and county level, must focus on the following priorities:

Strengthen coordination and planning for immunization

In line with the rights and arrangements of the 2010 Constitution, Kenya devolved the health sector in 2013. This involved devolving several fiscal and administrative responsibilities for health service delivery, including immunization, to 47 counties. The national Ministry of Health continues to hold responsibility for standards and policy development, and management of referral hospitals. As a result of these shifts, Kenya has experienced challenges, including funding gaps for commodities and supplies. Efforts to clarify the roles and responsibilities between national and county governments have addressed many of these initial challenges. In order to strengthen coordination mechanisms, the national Ministry of Health constituted the National Immunization Interagency Coordinating Committee. Coordination for immunization must remain a priority at all levels of government to achieve

immunization targets, including long-term sustainable immunization financing and progress toward UHC.

Align budget processes with immunization priorities

Within the context of devolution, both national and county policymakers play a critical role in ensuring financing is available for robust immunization services. Planning and budgeting for immunization that is disconnected from national and county budgeting processes can lead to fragmentation and misalignment between immunization needs and budget allocations resulting in funding gaps.

Every dollar invested in vaccines in Africa returns approximately US\$41 in economic and social benefits.

More can be done to strengthen the links between programmatic plans (such as the comprehensive Multi-Year Plan and County Integrated Development Plans) and budget proposals. While the resource requirements for immunization are predictable in the intermediate term, with Gavi transition on the horizon, evidence-informed budgeting will be increasingly important to ensure immunization services are fully resourced. Anchoring

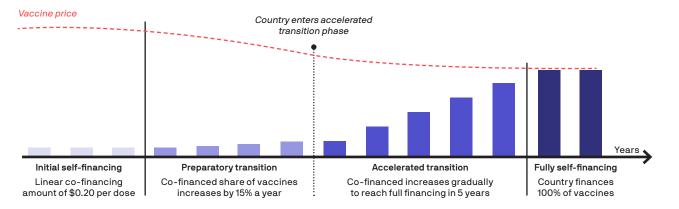
national and county budgets with technical immunization priorities will help ensure sufficient resources are allocated to achieve programmatic goals.

Increase county capacity to effectively manage immunization service delivery

While shifting roles and responsibilities for service delivery from national to county levels of government improves responsiveness to local needs and accountability for services, it also highlights capacity gaps in immunization service delivery across counties.

Expanded Programme on Immunization (EPI) managers must demonstrate a high level of leadership and management to oversee continued delivery of high-quality services and plan for a future that includes Gavi transition and new vaccine introduction. The National Vaccines and Immunization Program must provide consistent and timely policy direction, oversight, and technical support to county EPI officers who ensure that health care staff are appropriately trained and able to deliver the needed immunization services. Working collaboratively, national and county managers will ensure that all elements of the immunization program—from planning, budgeting, and procurement through outreach, vaccination, and reporting—are effectively and efficiently implemented.

Chart 1. Gavi eligibility and transition



Website: www.path.org/advocacy-policy Email: advocacyandpolicy@path.org Twitter: @PATHadvocacy

PATH is a global organization that works to accelerate health equity by bringing together public institutions, businesses, social enterprises, and investors to solve the world's most pressing health challenges. With expertise in science, health, economics, technology, advocacy, and dozens of other specialties, PATH develops and scales solutions—including vaccines, drugs, devices, diagnostics, and innovative approaches to strengthening health systems worldwide.

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Mailing Address ACS Plaza, 4th floor Lenana Road PO Box 76634-00508 Nairobi, Kenya Date Published April 2019

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