PUBLIC PRONOUNCEMENTS ON ROUTINE IMMUNIZATION FINANCES IN NIGERIA

NATIONAL, BAUCHI, KADUNA, KANO & NIGER STATES

COMMUNITY HEALTH AND RESEARCH INITIATIVE

President Muhammadu Buhari during polio campaign in Katsina state 2016

2ND EDITION
JAN. - JUNE 2016
**CHR VISION**
A leading NGO stimulating all levels of government to respond to the quality of health care needs and the development of women and children in Nigeria

**CHR MISSION**
To work with stakeholders to stimulate collective response in Nigeria to address the need for improved quality health care services for women and children through Advocacy, Accountability, Mobilisation, Training, Research & Information sharing that influence evidenced based policies and programmes.
Background to PACFaH

The Partnership for Advocacy in Child and Family Health Project (PACFaH) Nigeria is a pilot project supported by the Gates foundation as an innovative initiative to learn about the potential for engaging Nigerian Civil Society Organizations (CSOs). The project is implemented by eight Nigerian civil society groups working together to encourage government to plan for and increase funding to four important areas in child and family healthcare in Nigeria. The four areas are:

1. Routine Immunization
2. Family Planning
3. Amoxicillin as first line treatment (FLT) for Pneumonia and ORS-Zinc as treatment of childhood diarrhoea diseases
4. Nutrition

It is designed as evidence based advocacy intervention which aims to increase government effort at national and state levels to comply with pledges in the area of funding, administrative/regulatory procedures, and public health policy. Community Health and Research Initiative (CHR) is implementing the Routine Immunization component of the project, which is to advocate for increased political commitment by Nigerian government to meet its Routine Immunization (RI) obligation. It is leading in advocacy for adequate and timely release of RI funds, budget tracking, and mobilization of RI CSOs for strengthened advocacy at national level, and in Bauchi, Kano, Kaduna and Niger State.

CHR's advocacy aims to achieve the following:

- Increased budget at both the national and state level to ensure adequate funding for vaccine procurement in line with Country Multi Year Plan and Forecasting.
- Value-added budget tracking for effective and timely release of funds dedicated for RI vaccines at national and state levels
- Improved leadership commitment and capacity to identify and plan for sustainable sources of funding for RI in project timeline and beyond

Below are the project outcomes:

- Increased the government's commitment to fully fund RI
- Adequate budgetary allocation for RI finances
• Timely release of allocated RI funds
• Well-articulated medium and long term RI funding strategy developed by the Nigerian government
• Strengthened partnership of indigenous CSOs around RI.

CHR's strategic advocacy objective in the project is to achieve Government of Nigeria's increased leadership, commitment and capacity to identify and plan for sustainable sources of funding for Routine Immunization, develop a medium to long term funding strategies. Also make public pronouncements on commitment to RI funding increases, linking Routine immunization to broader development goals and increased strategic government functionaries' leadership capacity for RI program management. These public pronouncements and commitments are tracked, documented and used to engage the policy makers in advocacy, as well as hold them accountable to their commitments.

The first edition of the pronouncements tracked, published and documented in November 2015 helped CHR's advocacy activities in 2016, the reports were used as tools for evidence based advocacy both at national and state.

Methodology:
In tracking public pronouncements and commitments of policy makers in RI funding and program implementation, CHR documented and reviewed political actors speeches and pronouncements in public events related to RI resource mobilization activities.

Objective of the report:
• To document public pronouncements on government commitment to RI funding increases and linking RI to broader development goals.
• Track effects of commitment made in RI program implementation.
• Disseminate these pronouncements to broader audience which further holds government to account.
**Brief on RI**

Nigeria is the most populous country in Africa with an estimated population size of 180 million and a birth cohort of 7.4 million. Typical of countries with high fertility rates, Nigeria's population is relatively young and is expected to rise to 210 million by 2020 with a corresponding birth cohort of 8.4 million. The pressure exerted by population growth comes with immense implications in the need for increase of health interventions, as demands for maternal and child services continue to grow. In 2013, it was estimated that more than 800,000 children under the age of five died in Nigeria. Most of the leading causes of death among under-fives such as pneumonia, diarrhoea, meningitis, and measles are vaccine preventable (Figure 1). Malaria and neonatal causes were other significant causes of death among this group.

Reducing child mortality will require strengthening health systems to support access to and delivery of crucial PHC
services, such as routine immunization (RI). The RI program offers a primary prevention strategy in the global fight and management of vaccine preventable diseases especially in reducing under-five mortality.

The Nigeria’s RI system is a concurrent responsibility of the three tiers of government. The federal government pays fully for traditional vaccines, and co-pays for new vaccines with Gavi support. Through the National Primary Health Care Development Agency (NPHCDA), the federal government develops policy for PHC, provides vaccines, immunization guidelines, and technical support to the State Primary Health Care Development Agency (SPHCDA) and the local government area (LGA); while the funding and actual implementation of immunization programs is dependent at the state and LGA levels. The key strengths in Nigeria’s RI systems are clearly seen at higher levels of government. Strong support for RI is evident from the NPHCDA and the FMoH, and funds for vaccine procurement have been consistently included in the federal budget. Political actors at state level have also signed several agreements for resource mobilization to enrich country’s funding for implementation of immunization programs at states. There is also a demonstrated ability to disseminate pro-immunization messages and increase demand for vaccines. However, the need to advocate for increased funding for immunization in Nigeria is eminent, following the graduation process from GAVI support, and need for the Nigerian government at all levels to take ownership of funding immunization programs.

“Delighted to have esteemed visitors including Mr Bill Gates and Alhaji Aliko Dangote. We are committed to reach 80% coverage of Immunization and to sustained delivery of quality and safe vaccines to our children. We are committed to be responsible and responsive partners in this MoU and Kaduna state has already paid its counterpart funding of N180 million to the tripartite Basket fund for Immunization.”

**Where?**
6 MoU State Governors Forum in Kaduna State to review progress in Kano, and Bauchi and witness signing up of contracts for Borno, Kaduna, Yobe and Sokoto States

**When?**
20th January 2016

**Effects**
Improved Immunization coverage in Kaduna State through strengthened coordination and partnership (Source: mid-year MoU review report)
Public Pronouncement

“We are committed to saving lives of our children and to demonstrate such, we have allocated 15% of our total budget to health sector in line with Abuja 2001 declaration and we have also launched a 5 point health agenda tagged 'Lafiya Garkuwa' and one of its pillars is to improve coverage of Routine Immunization. Last year we have paid full our counterpart funding and we will pay 50% of this year’s requirement before end of February.”

Effects

Release of N120 million (75%) total commitment as part of the 2016 funding requirement (Source: mid-year MoU review report)

Where?

6 MoU State Governors Forum in Kaduna State to review progress in Kano, and Bauchi and witness signing up of contracts for Borno, Kaduna, Yobe and Sokoto States

When?

20th January 2016

http://healthreporters.info/wp-content/uploads/2016/01/dangote-and-bau4-300x160.jpg
http://healthreporters.info/2016/01/26/immunization-holding-6-governors-to-account/
Public Pronouncement

“We are committed to pay our counterpart funding for this year before end of this month and we are committed fully to Routine Immunization. As Kano state is the pilot for the MoU we are delighted that we have gotten one year extension to improve the gains of previous years and we remain resolute in doing what is needed to ensure all eligible children are fully immunized.”

Effects
Release of N100 million (40%) total commitment as part of the 2016 funding requirement (Source: mid-year review report)

Where?
6 MoU State Governors Forum in Kaduna State to review progress in Kano, and Bauchi and witness signing up of contracts for Borno, Kaduna, Yobe and Sokoto States

When?
20th January 2016

Dr Abdullahi Umar Ganduje
Executive Governor of Kano State.
“Personally I am committed to seeing that Nigeria has a sustainable plan for financing immunization, to achieve this I will move a motion on the floor of the senate.”

Effects
He has demonstrated commitment for immunization finances by his utterances and appearances in immunization related activities (Source: media reports)

Where?
Anglophone Peer Review Workshop for Sustainable Immunization Financing in Nigeria, at Sheraton Hotel, Abuja

When?
20th April 2016

Senator Mao Ohuabunwa
Senate Committee Chairman on Primary Health Care (PHC)
Public Pronouncement

“Talking about Kano state we have a road map we have drafted which is helping us finance immunization services... we are already looking at ways that we can sustain this immunization financing, if it is not reversed. Part of what we are doing is to increase budget for RI services in the state, we are also looking at how we can partner with other organizations and philanthropists so that we can have more funds to manage these programs.

Effects
Facilitated the release of second tranche of RI funds (N50million), and has ensured state Routine Immunization Working Group Meetings are done monthly. (Evidence: Minutes of meeting)

Where?
Anglophone Africa Peer Review Workshop organized by Sabin Vaccine Institute and Nigeria Immunization Financing Task Team (NIFT), at Sheraton Hotel, Abuja

When?
20th April 2016

Dr. Kabiru Ibrahim Getso
Kano State Commissioner of Health

http://healthreporters.info/2016/06/05/kano-has-road-map-to-finance-routine-immunization-dr-getso/
“My attendance in this Anglophone Peer Review Workshop gives me a good understanding of immunization funding needs and the impetus to inform my state governor of what I have learnt about immunization financing. I can tell the significance of releasing or financing the health sector generally with particular reference to immunization of our children.”

**Effects**
After April, he contributed to the release of N40million as the second tranche of state immunization funds,
(Source: Mid-year MoU review report)

**Where?**
Anglophone Peer Review Workshop for Sustainable Immunization Financing in Nigeria,
at Sheraton Hotel, Abuja

**When?**
20th April 2016
Public Pronouncement

“I can assure you that the moment funds are budgeted for immunization and it is brought to my ministry, I will issue the warrant for the amount to be released, I will champion this cause for health care delivery and sustainable immunization financing in Kano state. I will see to it that if the country will form a group for advocacy for sustainable immunization, I will make sure Kano state is really involved.”

Effects
After April, he contributed to the release of N50million as the second tranche of state immunization funds, (Source: Mid-year MoU review report)

Professor, Kabiru Isa Dangado
Kano State Commissioner of Finance

Where?
Anglophone Africa Peer Review Workshop organized by Sabin Vaccine Institute and Nigeria Immunization Financing Task Team (NIFT), at Sheraton Hotel, Abuja

When?
19th to 21st April 2016

http://healthreporters.info/2016/05/17/kano-committed-to-pay-its-counterpart-funding-on-routine-immunization-finance-commissioner/
**Public Pronouncement**

“in line with all the presentations you have made today I will like to assure you that I am committed to promote immunization and also be holding a quarterly meeting with CSOs on Immunization and Primary Health Care to improve accountability and transparency”

**Where?**

Ministerial Conference on Immunization in Africa side meeting between Nigeria's Minister of Health Professor Isaac Adewole and Nigeria's Civil Society Organizations (CSOs) under the auspices of National Immunization Financing Task Team (NIFT), Addis Ababa, Ethiopia

**When?**

24th-25th February 2016

**Professor Isaac Adewole**

Minister of Health

Public Pronouncement

“the Nigerian Government and the NPHCDA are committed to Universal Health Coverage as demonstrated by our commitment to finance immunization and also improve primary health care by establishing one functional PHC per ward all over the country”

Effects
Created an enabling environment for NPHCDA collaboration with Civil Society Organizations through NIFT that is strategically advocating sustainable immunization financing in Nigeria

Where?
67th World Health Assembly, Geneva, WHA: Panel on progress with UHC and sustainable development

When?
27th May 2016

http://healthreporters.info/2016/06/03/highlights-of-the-just-concluded-69th-world-health-assembly/
Public Pronouncement

“We are committed to providing active leadership of polio eradication and routine immunization activities in the state by releasing State and LGA counterpart funds in quarterly trenches for polio campaigns and 6 months trenches for routine immunization and directing LGA chairmen to release fortnightly and quarterly trenches for polio campaigns and routine immunization respectively.”

Where?

Renewal and adoption of Commitment to Polio Eradication, following meeting with His Excellency, President Muhammadu Buhari, President, Federal Republic of Nigeria with the Nigeria Governors Forum and Mr. Bill Gates, Co-Chair, Bill and Melinda Gates Foundation, at Aso Villa, Abuja

When?

20th January 2016

Source: Communique

Effects

More states have shown commitment to funding immunization, example is the six MoU states in Northern Nigeria.
“Despite the huge commitment of this administration, government still requires the collaborative efforts of well-meaning friends and partners to function. Thus the Bauchi State Standing Committee on Corporate Social Responsibility is established to coordinate the general public, corporate organizations, wealthy individuals and philanthropist towards supporting the health sector to ensure a healthy society and adequate Immunization Financing.”

**Efforts**
A committee is inaugurated to explore alternative source of financing for health including immunization in the state (Evidence: media publications)

**Where?**
Inauguration of a 19-man standing committee on corporate social Responsibility, for Health Care Financing at Bauchi State Government House

**When?**
30th May 2016
**Public Pronouncement**

“we are sure that vaccines will be available and no more stock out stories in the state that is PUSH and we will commence in the month of May. We have signed the contract award and the MoU.”

**Where?**

Anglophone Africa Peer Review Workshop on Sustainable Immunization Financing, at Sheraton Hotel, Abuja

**When?**

20th April 2016

**Effects**

Ensures monthly meeting of Routine Immunization working Group holds in the state, and CSOs participation in the meetings. He catalyze the establishment of the PUSH system of state vaccine delivery logistics to health facilities (Evidence: minutes of RIWG meetings,

**Dr Aliyu Shehu Yabagi**

Executive Secretary Niger State Primary Health Care Development Agancy

What CHR/PACFaH sets to accomplish

- Increased political commitment by Nigerian government to increase health budget allocation
- Ensure adequate and timely release of Routine Immunization funds
- Mobilization of CSOs for effective advocacy at national level, and in Bauchi, Kano, Kaduna, and Niger States
- Increase capacity of government functionaries to take leadership for adequate RI program implementation
- Budget tracking, strengthening accountability and transparency in budget expenditure