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Experts push for immunisation fund

By Gloria Nakajubi

With the Government spending less than 1% of the entire health sector budget on immunisation, child health experts are calling for the operationalisation of the immunisation fund.

Provided for in the Immunisation Act (2017), the fund that shall be managed by the health ministry will have parliamentary allocations, donations and voluntary contributions as its source of funding.

"The object of the fund is to purchase vaccines and related supplies, cold chains, and funding of immunisation outreach activities," reads the Act.

Health economist Charlotte Muheki of HealthNet Consult, speaking during a public seminar on the sustainability of the Uganda Immunisation Programme following new vaccine introductions last week, said though immunisation is a key health sector priority, it took up just 0.21% funding of the entire sector's budget.

The country according to Muheki is currently heavily relying on the Global Alliance for Vaccines and Immunisations (GAVI), a trend, which according to the expert may not be entirely sustainable.

"Once GAVI funds are excluded from the available resources, we note a 90% financing gap, which represents \$487.5m for the resources required over the five-year period (2016-2021)," she said, adding that "without donor support, the Government is unable to sustainably finance the

immunisation programme, especially in light with the adding of new vaccines."

The manager of the Uganda National Expanded Program on Immunisation (UNEPI), Dr Bernard Opar, who is also the focal person on the matter concerning the immunisation fund at the health ministry, said they were currently working on the regulations that will guide its operationalisation.

Currently the routine immunisation schedule covers a total of 12 diseases with five new others up from introduction starting this year.

The experts noted with concern the dismal performance of some vaccines uptake among the children. The introduction of multiple new vaccines in quick succession according to Gilbert Asimwe from GAVI, has had several effects on the entire immunization system.

According to an evaluation carried out by GAVI for the last two years, the children who go for the old vaccine miss out on the new one.

"Two years later, the Human Papilloma Virus (HPV) second dose is still at 20% uptake," Asimwe said.

According to their evaluation, the trend was attributed to limited clarity on HPV delivery model, inadequate training of health workers, low awareness and knowledge among carers and schools.

The seminar that was organised by the Makerere University School of Public Health was premised on the role of research in policy decisions.



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