

Financial and administrative implications for the Secretariat of resolutions proposed for adoption by the Health Assembly

Resolution:	Strengthening immunization to achieve the goals of the global vaccine action plan
A.	Link to the general programme of work and programme budget
1.	<p>Outcome(s) in the Twelfth General Programme of Work, 2014–2019 and output(s) in the Programme budget 2016–2017 to which this resolution would contribute if adopted.</p> <p>Twelfth General Programme of Work, 2014–2019 outcome(s): Increased vaccination coverage for hard-to-reach populations and communities.</p> <p>Programme budget 2016–2017 output(s): Output 1.5.1. Implementation and monitoring of the global vaccine action plan, with emphasis on strengthening service delivery and immunization monitoring in order to achieve the goals for the Decade of Vaccines; Output 1.5.2. Intensified implementation and monitoring of measles and rubella elimination strategies facilitated; Output 1.5.3. Target product profiles for new vaccines and other immunization-related technologies, as well as research priorities, defined and agreed, in order to develop vaccines of public health importance and overcome barriers to immunization.</p>
2.	<p>Brief justification for considering the draft resolution, if there is no link to the results as indicated in the Twelfth General Programme of Work, 2014–2019 and the Programme budget 2016–2017.</p> <p>Not applicable.</p>
3.	<p>Estimated time frame (in years or months) for implementation of any additional deliverables.</p> <p>The resolution would be implemented during 2017–2021. The Sixty-fifth World Health Assembly in resolution WHA65.17 (2012) requested the Director-General to report annually, through the Executive Board, to the Health Assembly, until the Seventy-first World Health Assembly, on progress towards achievement of global immunization targets. As the Secretariat will report on the finalization of the global vaccine action plan (final assessment, monitoring and evaluation) in 2021, activities will need to be carried out until then.</p>

B. Budgetary implications
<p>1. Estimated total cost to implement the resolution if adopted, in US\$ millions:</p> <p>US\$ 258 million (from 2017 to 2021).</p>
<p>2.a. Estimated additional budgetary requirements in the current biennium, in US\$ millions:</p> <p>US\$ 7 million.</p> <p>This additional budgetary requirement is needed to cover new activities that have arisen over the course of the biennium, including: supporting the implementation of the WHO research and development blueprint for action to prevent epidemics, facilitating the implementation of malaria vaccine pilot projects; strengthening surveillance for measles and other vaccine-preventable diseases, even as resources available through the Global Polio Eradication Initiative decline; and providing support to countries not eligible for support from the GAVI Alliance in accessing new and underutilized vaccines and strengthening their immunization programmes, including the maintenance and expansion of the vaccine product, price and procurement database, and establishing a vaccine demand/supply exchange forum. The sum of US\$ 7 million includes costs for staff, procurement and consultant contracts for technical support.</p>
<p>2.b. Resources available during the current biennium</p> <ul style="list-style-type: none"> – Resources available in the current biennium to fund the implementation of the resolution if adopted, in US\$ millions: None. – Extent of any financing gap, in US\$ millions: Implementing activities as requested in the draft resolution would require an estimated amount of US\$ 7 million for the remainder of the biennium. – Estimated resources, not yet available, which would help to close any financing gap, in US\$ millions: Some fundraising activities would be implemented after adoption of the resolution to cover the funding gap. Several partners have already expressed interest in increasing their investments in the areas mentioned in the draft resolution.
<p>3. Estimated additional budgetary requirements in 2018–2019 (if relevant), in US\$ millions:</p> <p>US\$ 73 million.</p> <p>Additional budgetary requirement is needed to cover new activities, for example, in relation to the WHO research and development blueprint for action to prevent epidemics, and malaria vaccine pilot projects. Strengthening surveillance for measles and other vaccine-preventable diseases is key to achieving the goals of the global vaccine action plan and requires additional budget and resources. A plan is needed to secure the necessary investments by countries to sustain immunization during polio transition and to continue and enhance support to countries that transition out of support from the GAVI Alliance, in order to mitigate any risk to sustaining effective immunization programmes when polio funding decreases.</p> <p>Has this been included in the Proposed programme budget 2018–2019?</p> <p>As far as possible, these costs will be accommodated within the Programme budget 2018–2019.</p>
<p>4. Estimated additional budgetary requirements in future bienniums (if relevant), in US\$ millions:</p> <p>US\$ 178 million for biennium 2020–2021.</p>

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