



In the name of God, the Compassionate, the Merciful

**Opening Remarks to the
16th MEETING OF THE GAVI ALLIANCE REGIONAL WORKING GROUP
Cairo, Egypt, 6–7 September 2009**

Dear colleagues

It is my pleasure to welcome you to the 16th meeting of the GAVI Alliance regional working group. It is indeed my special privilege to welcome the country representatives of the immunization programme as well as health systems departments, along with their WHO and UNICEF counterparts. Together you all make a great team to help the respective countries in achieving the goals laid down, with the ultimate objective of assuring the best health possible for the population of your countries.

I am very pleased to note that in this endeavour the partners are working hand in hand with the country teams with great dedication and enthusiasm. The presence of colleagues from WHO and UNICEF regional and country offices, GAVI Alliance secretariat, CDC Atlanta and World Bank is a testimony for their commitment to support countries and I wish to extend a very warm welcome to them.

Dear colleagues

You will agree with me that in the lower income countries in the Eastern Mediterranean Region, as in any other region, despite the best intentions of the respective governments, financial constraints often impede the implementation of crucial health-related activities. We are thankful to the GAVI Alliance which is supporting the eligible countries in a multiple pronged approach, through the various GAVI windows, to bridge the financial gap to the extent possible within the resources available to the Alliance.

Dear Colleagues,

As you all know there have been considerable achievements in the immunization programmes in the most of the countries in the Region receiving GAVI support. The coverage with a third dose of DPT-containing vaccine, which is an indication of general

immunization coverage, increased in 2008 compared to 2007 in Afghanistan, Djibouti and northern Sudan. It remained the same in Yemen and declined in Pakistan and Somalia. I am sure that we will hear from the representatives from Pakistan and Somalia the reasons for this decline, and deliberate on how the regional working group on GAVI can help these countries to improve immunization coverage. We also look forward to hearing from the representative of southern Sudan the status of the immunization programme in 2008.

It is also encouraging to note that all the countries in the Region eligible for GAVI support have introduced Hib vaccine and are well on their way to introducing pneumococcal as well as rotavirus vaccines in the near future. With regard to evaluation of introduction of new vaccines, the introduction of Hib vaccine was recently evaluated in Sudan and Djibouti. This is a very welcome sign of countries' commitment to continuously improving and strengthening the various components of the immunization programme. I am glad that the opportunity of post-introduction evaluation of new vaccines was also used to build the capacity of colleagues from other countries receiving GAVI support who were invited to join this exercise.

I note it with great satisfaction that three out of the four countries receiving GAVI support which were required to co-finance the introduction of new vaccines have paid their share of the co-financing scheme. Unfortunately, Pakistan has defaulted on its share but we understand that this was mainly because of procedural issues and that the Government of Pakistan is committed to paying its share of co-financing within the shortest possible time.

Dear colleagues,

By the end of 2005, the Alliance had recognized that health system constraints also needed to be addressed and, again in January 2008, the GAVI Alliance Board decided that a share of GAVI Alliance resources would be devoted to investment in health system strengthening. This includes addressing the issue of poorly motivated health workers, inadequate management skills and unpredictable financing in the periphery. Such system constraints impede progress towards improved immunization coverage, health care delivery for mothers and children and other health outcomes. Eligible countries in the Region were encouraged to use GAVI health system strengthening funding to target the "bottlenecks" or barriers in the health system that impede progress in improving the provision of and demand for immunization and other child and maternal health services.

In all the eligible countries GAVI health system strengthening support is complementary to and in coordination with the support of other development partners, and involves key stakeholders from civil society and representatives from marginalized groups (including hard-to-reach population groups) in joint efforts to strengthen the health system.

There is increasing consensus among national health policy-makers and programme managers in the Eastern Mediterranean Region, especially in low-income countries, that health systems matter a great deal in achieving better health outcomes. Well functioning health systems are essential for the efficient and effective implementation of health programmes. In addition, health systems should be accessible, equitable and able to provide quality services to their users. Many countries in the Region are thus undertaking a wide range of organizational, management and financing reforms to improve the overall functioning of the health system and to monitor its performance.

The Regional Office for the Eastern Mediterranean conducts regular orientation sessions for WHO Representatives and country staff on health systems, including GAVI health system strengthening and the Global Fund. Key partners, such as UNICEF and the World Bank are co-opted to support these meetings. The Regional Office also conducts regular health systems capacity-building courses for WHO and national staff and has a well-institutionalized process for peer review of proposals. In development of all applications for GAVI support, and implementation and follow-up of joint health system strengthening missions, the success was due to the ONE harmonized and participative team at all levels.

Ladies and Gentlemen,

The GAVI Alliance has adopted a Transparency and Accountability Policy (TAP) for cash-based support, including health system strengthening, which took effect as of 1 January 2009. The Transparency and Accountability Policy outlines a set of minimum requirements for the financial management of GAVI health system strengthening support. Funding should be used for objectives stated within a proposal and must be managed in a transparent manner. The Regional Office, in collaboration with concerned partners, is coordinating the provision of requested support to the policy requirements and achieve the objectives.

It is indeed a pleasure to acknowledge the coordinated efforts of all the partners to assist the countries in strengthening their immunization programmes and health systems. While the partners do their best to provide the required technical support, it is heartening to

note that the countries are taking this opportunity to build their national capacities simultaneously, and this is now showing up. I strongly suggest that whenever international technical support is requested it must be linked with national capacity-building, so that the need for such support is gradually diminished and the country becomes more self-sustaining in technical issues.

In order to make best use of this forum, we have to be open to discussions. While sharing the achievements is crucial, particularly for others to learn good lessons, it is also crucial that any impeding factors hindering the achievement of set goals are also discussed openly. This is a unique forum where the countries, as well as the partners, are available to help each other in order to improve the health of people. I hope that any constraint which is discussed in this meeting is resolved by the time we meet again. Please take this opportunity to seek any clarifications you need with the representatives of partner agencies, especially GAVI, while here. We and all partners are here to provide an update on the recent policies related to our work and to respond to your queries. I look forward to the discussions during the course of these two days.

We have proposed an agenda which takes into consideration the circumstances of Ramadan. Once again, I would like to thank all of you for your efforts in travelling long distances to be here and preparing for this meeting, especially in the holy month of Ramadan. I wish you a very successful outcome of this meeting and a pleasant stay in Cairo.

Thank you.