



# Support the MOH in Operationalizing Routine Immunization Micro- plans in Pakistan

## Project Information

- ◆ Department: Public Health Programs
- ◆ Unit: Polio & Routine Immunization

## OBJECTIVES

This project goal is to support Pakistan in achieving an increased and equitable immunization coverage through improved Routine Immunization (RI) microplanning. In specific, the project will strengthen the knowledge and capacity of the Expanded Immunization Program (EPI) staff at selected state to generate updated micro-plans.

## PROJECT PHASES

This project involves three phases as follows:

Phase I – Planning: Planning and coordination with Pakistan MOH officials and stakeholders to present project activities, reach consensus and gain support on implementation. Situational analysis of the current EPI data at the health facility level.

Phase II – Development of materials: Based on the situational analysis findings and the micro-planning training curriculum, a manual and materials will be developed.

Phase III – Implementation: TOT workshop to train EPI staff as master trainers to train on updating the RI micro-plans. Training health facilities vaccinator to update the micro-plans to expand the coverage of immunization and overcome the limitations in accessing immunization services plan for operationalizing of the micro-plans to ensure the opt.

## PROJECT DESCRIPTION

Building on GHD experience in the country in other areas of public health and drawing from the experience in Iraq in rolling out microplanning, GHD will conduct a situational analysis in Pakistan. This situational analysis will be conducted in the area where the polio cases are reported, and frequent outbreak of VPDs are reported. Based on the findings, the micro-plans will be updated at the health facilities level. A set of criteria will be developed to select low coverage targeted districts. A series of training activities will take place to train vaccinator of health facility at poor performing and high-risk union councils at selected districts. Further, field monitoring visits by provincial and district level EPI staff will take place to monitor that RI micro-plans are updated to respond to the immunization coverage enhancement requirements. Once the micro-plans are updated, the next subject to be considered is supporting the MoH in developing a plan for operationalizing of the micro-plans to ensure the optimal delivery of the equitable immunization services.

<b>Project Start and End Date</b>	<b>October 1<sup>st</sup>, 2019 – April 30<sup>th</sup>, 2021</b>
<b>Funded by</b>	<b>Centers for Disease Control and Prevention (CDC)</b>
<b>Collaborators</b>	<b>Ministry of Health (MoH), Pakistan; National Institute of Health (NIH); World Health Organization (WHO); the United Nations International Children's Emergency Fund (UNICEF) and National Integrated Development Association (NIDA-Pakistan)</b>

## BENEFICIARIES

The targeted beneficiaries are EPI staff at province, district, and health facility levels.

## REGIONS OF WORK

The project will be implemented in Pakistan, at Khayber Pakhton Khwa province, specifically targeting high risk and poor performing districts.



## Currently . . .

Immunization coverage in Pakistan has stagnated over the last decade. Pakistan Demographic and Health Survey (PDHS) findings indicate that the increase in coverage rate between 1999 and 2008 was only 12%. The current vaccination coverage varies between 47% to 88%. The most common cause for the poor performance of EPI Pakistan, is the limited access to the immunization service. EPI services to the public are provided mostly through the public health delivery network through fixed centers and outreach services. There are more than 6000 fixed centers for vaccination all over the country i.e. one in each Union Council (UC) which also has an attached outreach services at most places. The immunization campaigns for Polio and other VPDs also utilize the same infrastructure to implement their activities nationwide.

Currently large parts of immunization services are delivered via outreach (extending from a fixed site), a lesser part by fixed sites, and a small part by mobile teams in remote areas. The most common strategy in the rural areas is outreach, whereas urban areas rely more on fixed centers.

## What's next . . .

Continued efforts for universal immunization of under five children against vaccine-preventable diseases is one of the best practices contributing towards preventing neonatal, infant and child mortality. The access to each child is ensured by using the Reaching Every District (RED) Strategy. The project will contribute to this key strategy to increase immunization coverage at high-risk union councils of Khyber Pakhtunkhwa province and increase delivery of the equitable immunization services at sub-national level to reach and immunize every child.

The EPI staff at health facilities will be able to develop, regularly update RI microplans to support EPI team in reaching target population with immunization services targeting areas where the polio cases are reported, and frequent outbreak of VPDs are reported.

### By the Numbers

**35.53 million**

Population of Khyber Pakhtunkhwa province

**25**

EPI provincial staff trained as RI Microplanning master trainers

**300**

Health Facilities Targeted to update RI micro-plans

**+600**

EPI vaccinator targeted by RI Microplanning trainings

### GHD and EMPHNET: Working together for better health

Global Health Development (GHD) is a regional initiative created to support countries in the Eastern Mediterranean Region strengthen their health systems in response to public health challenges and threats. GHD was initiated to advance the work of the Eastern Mediterranean Public Health Network (EMPHNET) by building coordination mechanisms with Ministries of Health, International Organizations, and other institutions to improve population health outcomes. As an implementing arm to EMPHNET, GHD aligns its strategies with national policies and directions, while serving as a collaborative platform dedicated to support national efforts in promoting public health policies, strategic planning, sustainable financing, resource mobilization, public health programs, and other related services.

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