

<b>Appealing Agencies:</b>	<b>UNITED NATIONS CHILDREN'S FUND and WORLD HEALTH ORGANIZATION</b>
<b>Project Title:</b>	Expanded Programme on Immunisation (EPI)
<b>Project Code:</b>	DPRK-04/H02A-B
<b>Sector:</b>	Health and Nutrition
<b>Themes:</b>	Children / Youth, Rights of the Child
<b>Objective:</b>	Strengthen the institutional capacity of the national immunisation system (EPI) to routinely immunise 470,000 children under one with seven EPI antigens, and 480,000 pregnant women with tetanus toxin and to advance polio eradication activities.
<b>Supporting CAP Objective:</b>	Health and Nutrition Sector: Operational Objective Four
<b>Targeted Beneficiaries: (total # &amp; description)</b>	960,000 countrywide Children: 470,000 (under-one) Women: 480,000 (pregnant)
<b>Implementing Partners:</b>	Ministry of Public Health, Provincial / County Authorities
<b>Project Duration:</b>	January - December 2004
<b>Funds Requested:</b>	<b>US\$ 1,299,200 (UNICEF)</b> <b>US\$ 320,000 (WHO)</b>

### Project outputs

- Adequate quantities of vaccines and safety devices/auto-disable syringes available for the national EPI programme to vaccinate all children under-one (470,000) and all pregnant women (480,000) countrywide.
- Cold chain equipment and transport upgraded in 25 counties.
- 400 county staff and 1,000 ri level staff trained in immunisation services and cold chain.
- Knowledge and skills of the central EPI team improved for them to be able to better plan and monitor the national EPI programme and strengthen overall vaccine management.
- Standard training materials developed.
- Cold chain equipment inventory maintained and monitoring tools developed for continuous updating of the inventory. System and means for repair and maintenance of cold chain in place.
- Polio Laboratory strengthened through providing supplies and reagents, stool testing kits and training materials.
- Timely AFP case investigation enhanced.
- AFP surveillance field guide developed and updated and training workshops for its implementation conducted.
- AFP Surveillance Coordinator trained (external) in data management and handling.

### Project Description

Since 1997, UNICEF and WHO have collaborated with the government to revive routine immunisation and eradicate polio. Main support from the two agencies has been the provision of EPI vaccines, cold chain and logistic equipment, financial support for social mobilisation, capacity building and disease surveillance, as well as technical assistance. Routine immunisation coverage has increased sharply from the very low coverage levels in 1997 and 1998 when the national programme had collapsed. The 1998 national survey showed that less than 40% of children were immunised against measles and only 5% of pregnant women against tetanus. The estimated coverage of DPT3 (an indicator for EPI uptake in general) is now estimated to be over 70%. Polio eradication is on track after six years of successful polio National Immunisation Days (NIDs). No more polio immunisation days are now planned. AFP surveillance is in place and the polio laboratory in Pyongyang was accredited in 2002. The Inter-agency Coordinating Committee on EPI (ICC) and its technical working group, comprising the MoPH, UNICEF and the WHO are functioning. The continuing economic crisis means that the MoPH is unable to fund the national immunisation services. In 2003, most of the costs of the routine immunisation services were funded with external support. UNICEF and WHO funded the entire EPI vaccine requirements of the country (bundled with auto disable syringes) as well as all of the cold chain equipment and training. The DPRK's successful application to the Global Fund on Vaccines and Immunisation (GAVI) resulted in the first GAVI support to the country: US\$ 297,000 cash for immunisation system improvements, US\$ 100,000 for IEC to facilitate the introduction of hepatitis B vaccination, supply of safety devices and hepatitis B vaccine.

In 2004, a number of areas require attention:

**Ensuring uninterrupted vaccine supply:** In 2004, and for the foreseeable future, the entire vaccine requirements for the routine immunisation services will need to be provided through external support - until the economy improves and the country is able to gradually assume responsibility for funding. Confirmed funding for 2004 is essential to avoid vaccine shortages and non-interruption of the programme. Under funding of this CAP project will jeopardise continued gains in childhood immunisation.

**Strengthening the vaccine cold chain:** Funding shortfalls in past years have left some counties inadequately equipped. In 2003, priority was given to providing cold chain equipment to these counties. A UNICEF and WHO cold chain and logistics review took place in late 2001, with follow-up in May 2002. The assessment found that most requirements for refrigerators and freezers have now been met, but maintenance and repair of existing electrical cold chain equipment remain problematic. In remote areas transport of vaccines continues to be a problem. Managerial capacity regarding cold chain logistics and stock control requires improvement. Funding sought for cold chain equipment in 2004 is, therefore, significantly less than in previous appeals and emphasis will now be placed on cold chain training and technical support.

**AFP (Acute Flaccid Paralysis) surveillance:** The status of AFP surveillance in the DPRK has been a cause for concern, due to the lack of adequate information, to both the South-East Asia Region (SEAR) Technical Consultative Group (TCG) and the International Certification Commission for Poliomyelitis Eradication in the South-East Asia Region (ICCPE). The provincial and county levels need to be strengthened to meet polio certification requirements, with specific attention in ensuring timely collection, transportation and analysis of stool samples, encouraging prompt case investigation and advocating for improved documentation and prompt classification of cases.

**Increasing and improving the quality of training:** More and better quality training is needed to increase the knowledge and skills of EPI staff in all aspects of the programme. This will include overall planning and monitoring of the national programme, cold chain, vaccine handling and injection safety, AFP surveillance and the monitoring of routine coverage and vaccine preventable diseases.

**Specific activities of the project will be:**

- procuring of EPI vaccines (UNICEF) and auto-disable syringes (UNICEF and GAVI);
- strengthening cold chain and transport in all counties through technical support and supervision (UNICEF and WHO);
- upgrading of cold chain equipment in 25 counties and 1,000 ri clinics (UNICEF);
- strengthening disease surveillance systems, especially AFP and provision of equipment, technical support for the polio laboratory, improved surveillance for measles and neonatal tetanus (WHO);
- training of health staff on EPI management, cold chain, AFP surveillance, injection safety and practices (UNICEF-WHO);
- EPI coverage survey (UNICEF);
- maintaining a cold chain equipment inventory and develop monitoring tools and a system for maintenance and repair (UNICEF-WHO).

**Monitoring and Evaluation**

Support will be given to the MoPH to strengthen the monitoring of immunisation coverage, vaccine stocks management and AFP surveillance, as well as the reporting of cases of vaccine preventable diseases. Joint field visits will continue with the MoPH to monitor programme implementation as well as the distribution and utilisation of supplies. Overall programme performance will be measured by the immunisation coverage for each of the EPI antigens. Results from the national immunisation coverage survey (October 2004) will give information on provincial variations in EPI coverage and will, in 2005, enable support to be better targeted towards those provinces with low coverage. Such sub-national immunisation coverage data has never been available from surveys before.

## Prioritisation according to project funding levels

	25% funded	50% funded	75% funded	100% funded
UNICEF	Vaccines for 150,000 infants and 160,000 pregnant women	Vaccines for additional 230,000 infants and 240,000 pregnant women	Vaccines for additional 90,000 infants and 80,000 pregnant women	Cold chain equipment and transport for 25 counties
	Field monitoring	Training workshops	Cold chain equipment and transport for 1,000 ri level facilities	
	Technical assistance			
WHO	Training of local team of engineers and installation of solar equipment	Establish monitoring tools for inventory	Strengthen overall vaccine management	Strengthen overall vaccine management
	Establish inventory of equipment	Strengthen Polio Laboratory	Develop updated AFP surveillance field guide and implementation	Strengthen Polio laboratory, including supplies
	Technical assistance	Operational support for timely AFP case investigations	Certification activities	External data management training for AFP Surveillance coordinator
		External data management training for AFP Surveillance coordinator	Technical assistance	
		Technical assistance		Technical assistance

Financial Summary		
Budget Items	US\$	
	UNICEF	WHO
<b>Emergency Boosting of Routine Immunisation Coverage</b>		
Vaccines, auto-disable syringes and safety boxes for all country	640,000	
Cold Chain equipment and transport for 25 counties and 1,000 ri clinics	250,000	
Training for 1,400 central, provincial, county health staff	50,000	
Routine coverage reporting (printing report forms, health cards)	50,000	
<b>Cold Chain Strengthening</b>		
Training team of local engineers and installation of solar equipment		45,000
Establishing equipment inventory and develop monitoring tools for continuous updating of the inventory		15,000
Strengthen overall vaccine management		50,000
<b>AFP Surveillance</b>		
Strengthening of Polio Laboratory, including supplies		50,000
Operational support to enhance timely AFP case investigation and specimen transportation to ensure rapid wild poliovirus detection		10,000
Development of updated AFP surveillance field guide and implementation through appropriate training workshops		25,000
Certification activities, including quarterly National Certification Committee meeting		20,000
External Data Management Training for AFP Surveillance Coordinator		15,000
Technical expert consultants six months per year		60,000
<b>Project planning, monitoring and evaluation</b>		
Field monitoring and evaluation	50,000	
Technical assistance (international)	120,000	
Project support costs	*	30,000
<b>Sub-Total</b>	<b>1,160,000</b>	<b>320,000</b>
Cost recovery (see footnote)	139,200	
<b>Agency Specific Sub-Totals</b>	<b>1,299,200</b>	<b>320,000</b>
<b>Total</b>		<b>1,619,200</b>

(\* Denotes regular programme funding)

**Note:** Actual recovery rate on individual contributions will be calculated in accordance with Executive Board decision 2003/9 of 5 June 2003.