Pediatric Societies Cross Multiple GVAP Stakeholder Groups

- Individuals & Communities
- Global Agencies
- Governments
- Development partners
- Health Professionals
- Civil society & professional societies
- Academia
- Media
- Manufacturers
- Private Sector

American Academy of Pediatrics
DEDICATED TO THE HEALTH OF ALL CHILDREN®
Goal:
Strengthen National Pediatric Societies' ability to strategically support their country's health system through optimal and appropriate immunization policies, recommendations, and guidelines at the country level.

Objective 1:
Educate and strengthen capacity for pediatric leaders to be immunization advocates

Objective 2:
Support country partners to appropriately respond to immunization priorities

Objective 3:
Foster streamlined approaches to working with pediatric professionals in-country to meet global goals
PROGRAM APPROACH

PHASE 1

**Assess:**
Understand NPS’ organizational and IZ advocacy capacity and experience

PHASE 2

**Train:**
Hold advocacy workshop to train IZ champions and identify priorities

**Implement:**
Activities to implement advocacy priorities

PHASE 3

**Learn & Sustain:**
Share learning with CDC, AAP, in-country partners, and other societies, and promote institutionalization
IMMUNIZATION SYSTEM STRENGTHENING THROUGH AAP’S CURRENT WORK

- Leadership/Governance
- Service Delivery
- Information and Research
- Medical Products, Technologies
- Health Care Financing
- Health Workforce
CURRENT GLOBAL FOOTPRINT

Across all countries of engagement with the AAP’s support, 135 pediatricians have been trained as Advocates who have provided information/education and advocated for immunization issues to:

- 84 government representatives and policymakers,
- 453 health workers across the health system (pediatricians to frontline vaccinators)
- 2,130 caregivers

... and counting.
EXAMPLES: STRENGTHENING LEADERSHIP/GOVERNANCE

• Gaining buy-in and understanding for immunization from regional leadership
  – Obtained written commitment for immunization financing, HRH for routine immunization, and state commitment to polio eradication efforts from Permanent Secretaries for Health in 6 Nigerian States
  – Trained clan leaders and regional health leaders in 2 high-need/low-coverage states leading to published commitments from political and cultural leaders in Ethiopia

• Expanded leadership and governance relationships for measles elimination in Nepal
  – Leveraged expertise and relationships with vaccinators to ensure locally-owned solutions were incorporated into the National Measles Elimination plan
**Examples: Strengthening Health Workforce**

- In Kenya, supported development of a revised immunization training curriculum in coordination with the MOH, to be implemented across all levels of the health system, including private medical institutions
  - Increased engagement of pediatricians in public-sector work
  - Developed coordinated messages between public/private providers and across health system levels
- Expanded knowledge of frontline health workers by training on VPDs, AEFIs, and communication skills in Nepal
  - Developed national and regional training relationship between MOH and Pediatric Society
  - Expanded knowledge-base and skills of vaccinators to provide evidence-based information to patients
- In Indonesia and Philippines, trained private providers on data collection of public-sector vaccines
  - Increased skills around data for decision making in private sector
  - Included training on mentorship of public health workforce for recent medical graduates prior to mandatory deployment to rural areas
**Examples: Strengthening Information and Research**

- Eliminate gaps in data reporting by linking public and private sector data in Philippines, Indonesia, & Uganda
  - Implemented new reporting system across private sector, via NPS chapters (nationwide coverage) to ensure EPI vaccines provided in private sector are captured in national data in Philippines
  - Create e-MIS for non-EPI vaccines to 1) report coverage to the MOH and 2) to develop evidence for recommendations for vaccine introduction in Indonesia
  - Coordinate vaccine service delivery data collection & strengthen private-sector service delivery by non-pediatrician private providers in Indonesia & Uganda
EXAMPLES: STRENGTHENING SERVICE DELIVERY

• Providing mentorship and on-the-job support to public sector in the Philippines, Indonesia, and Uganda
  – Developed public/private partnerships in regions to provide mentorship and on-the-job support
  – Young Pediatricians provide on-the-job mentorship to vaccinators and nurses following established guidelines
  – Supplement MOH training & supervision to “approved” private sector providers to ensure appropriate care

• Utilized training opportunities to ensure coordinated care and increased patient choice in Nepal and Tanzania
  – Included non-EPI, 2nd year of life and beyond vaccines in skills-based training for frontline vaccinators to increase referrals and demand for integrated care beyond the 1st year in Nepal
  – Will train pediatric hospital managers in new vaccines