Immunization is among the most impactful and cost-effective investments a nation can make. However, immunization coverage in Uganda has stagnated in recent years; just over half of Ugandan children receive all routine immunizations, and some children receive none at all. While support from Gavi, the Vaccine Alliance, has contributed greatly to increased coverage for new vaccines, budget shortfalls have resulted in persistent stockouts of traditional vaccines in most public health facilities across the country.

Since 2009, PATH has served as a trusted partner to the Uganda Ministry of Health on a range of issues, including immunization. In recent years, PATH built on its technical partnerships to advocate for increased financing for immunization—including fostering political will. Working with the government, PATH, Clinton Health Access Initiative (CHAI), UNICEF, and the World Health Organization (WHO) highlighted stagnant funding for traditional vaccines as a root cause of reduced coverage. Thanks in part to PATH’s leadership and the combined advocacy of these partners, Uganda’s government increased funding for procurement of traditional vaccines by 90 percent in 2019, from UGX 9 billion to UGX 21 billion. This funding was vital to avoid vaccine shortages at the National Medical Stores, as well as to support a campaign against measles and rubella that immunized over 18 million children in one month in late 2019.

The challenge and opportunity

The government of Uganda has demonstrated its commitment to improving immunization coverage, most notably by endorsing the Addis Declaration on Immunization (ADI) in 2017. The government also recognizes immunization as key to achieving universal health coverage, as evidenced by its inclusion as a major strategy to achieve the Health Sector Development Plan goal of reducing vaccine-preventable diseases. Targeted efforts by PATH and partners have kept immunization high on the political agenda in the country.

A study led by the Ugandan Ministry of Health on the root causes of low immunization rates showed that vaccines co-financed by Gavi were not experiencing the same stockouts as traditional vaccines. This meant financing for procurement of older vaccines was a key bottleneck, and supply chain constraints were not the primary cause (although improvements are needed). The government had been releasing the same amount of money for traditional vaccines each year, even as the population grew and the costs of vaccines
increased. These challenges, coupled with inflation and depreciation of the shilling against the dollar, led to significant shortfalls in funding.

Armed with this evidence, PATH gathered stakeholders who were ready to act. We knew filling this financing gap was only a precursor for growing domestic resources for the immunization program, particularly with an eye toward the timeline in which it would begin to graduate from support provided by Gavi.

Implementing the strategy
PATH leveraged its decades of experience developing and implementing vaccines and its role as a trusted technical advisor to the government to keep immunization on the agenda at the national level. Building on our more technical work, including participation in the Uganda National Expanded Program on Immunisation (UNEPI) technical working group, PATH partnered with CHAI to develop an investment case and a costing model for immunization financing for the next two to three years. PATH also worked with WHO to initiate a tracking tool on EPI priorities to help internally monitor progress in the EPI workplans toward the ADI commitments. These two tools provided the key evidence and accountability needed to engage decision-makers at the right moment in the budget cycle. In partnership with UNEPI, the National Medical Stores, UNICEF, WHO, and CHAI, we organized two high-level advocacy workshops where we presented and discussed the investment case with government officials including Parliamentarians and officials from the Ministry of Finance.

Achieving the goal
As strong political will for immunization already existed, the financial evidence was the final piece needed to push the advocacy forward. It gave the Ministry of Health the tools they needed to engage with the Ministry of Finance. In the end, the budget increase took place only four months after PATH shared the investment case with the Ministry of Health.

Factors for success
• **Bringing all stakeholders together.** PATH worked to bring all relevant stakeholders to the table and ensure buy-in from all involved parties—as well as secured support from our strong immunization champions in Uganda, including the Manager of the EPI and the Minister of Health.
• **Delivering the right evidence at the right time.** PATH worked in close collaboration with partners to provide key evidence to responsive decision-makers at the right place and time to convince them to make evidence-based, smart policy. Within the Ministry, we worked with the technical committees to provide oversight and sharpen the investment case.
• **Maintaining political support.** PATH carried out sustained education of parliamentarians, supported government stakeholders on the global stage, and sparked the media’s attention.

Looking forward
As PATH works with its partners to continue ensuring immunization financing is prioritized, we also are working with the government to explore ways to drive sustainable financing initiatives, especially with Gavi transition in mind. Going forward, as Uganda pivots to a deeper focus on primary health care, it will be essential to ensure commodity procurement is integrated into broader efforts.

PATH’s 10-Part Approach to Advocacy Impact
Successful policy advocacy is guided by systematic analysis and pragmatic processes. PATH’s ten-part framework, outlined below, is a methodical approach to policy change that has helped over 600 individuals in more than 100 organizations in countries around the world achieve health policy change.

• Identify the advocacy issue
• State the policy goal
• Identify decision-makers and influencers
• Identify the interests of the decision-makers and influencers
• Clarify opposition and potential obstacles facing your issue
• Define your advocacy assets and gaps
• Identify key partners
• State the tactics you need to reach your goal
• Define your most powerful messages
• Determine how you will measure success

For more information and resources, and to find out how we can help, visit http://sites.path.org/advocacyandpolicy.