

EXPENDITURES 2015

In 2015, total direct expenditures for the GPEI programme were \$1.0 Billion, finishing the year approximately \$73 Million, or 7%, below budget. Details of programme expenditure by agency broken out by category appear in the table below. The patterns of expenditures were similar to trends observed in 2014, and the major drivers are largely the same. The key drivers of the overall variance to budget were:

- Large-scale shortages in supply of Inactivated Polio Vaccine (IPV) delayed introduction or deployment of the vaccine in multiple countries and drove significant underspend to budget. Additionally, some countries elected to self-fund or received non-GPEI funding for IPV introduction, reducing the overall impact on the GPEI budget.
- There was a sizeable percentage of unfilled positions across the programme, with delays in hiring and high turnover in key countries (e.g. Pakistan). The GPEI budget reflects full funding for all approved positions. Various partner agencies experience a vacancy rate that typically ranges from 5% to 15%. Given that the locations where GPEI deploys its staff are some of the most challenging, it is not unusual to observe vacancy rates of more than 20% in some geographies. This factor mostly affects the technical assistance and social mobilization elements of the budget, but also impacts campaigns, surveillance and other activities with a significant personnel component.
- Expenditures for Supplementary Immunization Activities (SIAs) campaigns and operations were higher than budget, as there was strong execution on activities to raise immunity levels in high risk and endemic countries (e.g. Pakistan, Afghanistan, Nigeria). Overspend on Campaigns / SIAs partially offset underspend in other GPEI programme areas to reduce overall variance to budget for 2015. This is contrary to the trend from the past few years, in which execution of planned campaigns was typically delayed in many key geographies, resulting in Campaigns / SIAs expenditures finishing significantly under budget.
- Starting in 2014 and carrying over into 2015, the favourable evolution of exchange rate with the US dollar, either against currencies pegged to the Euro (e.g. CFA Francs used in many west and central African countries), or against currencies of commodity exporters affected by commodity price drops (e.g. Nigeria), reduced some of the programme's operational costs in some countries.

Summary of external resource requirements and expenditure by major category of activity, 2015

(all figures in US\$ Millions)

IMMUNIZATION ACTIVITIES	Expenditure 2015				
	Total	WHO	UNICEF	GAVI	Other*
Planned OPV Campaigns (OPV)	\$191		\$191		
Planned OPV Campaigns (Operational Cost)	\$291	\$253	\$25		\$13
Planned OPV Campaigns (Social Mobilization)	\$47		\$47		
IPV in Routine Immunization	\$110			\$110	
Sub-Total	\$639	\$253	\$263	\$110	\$13
SURVEILLANCE AND RESPONSE CAPACITY					
Surveillance and Running Costs (incl. Security)	\$61	\$61			
Laboratory	\$9	\$9			
Sub-Total	\$70	\$70			
OPV WITHDRAWAL SWITCH AND IPV INTRO					
OPV Withdrawal – Switch	\$8	\$8			
IPV Introduction	\$11	\$10	\$1		
Sub-Total	\$19	\$18	\$1		
CONTAINMENT AND CERTIFICATION					
Certification and Containment	\$7	\$7			
Surveillance and Lab enhancement for Certification					
Sub-Total	\$7	\$7			
LEGACY					
	\$2	\$2			
CORE FUNCTIONS AND INFRASTRUCTURE					
Ongoing QI, surge capacity, etc...	\$21	\$3			\$18
Technical Assistance (WHO)	\$191	\$191			
Technical Assistance (UNICEF)	\$32		\$32		
Community Engagement and Social Mobilization	\$62		\$62		
Sub-Total	\$306	\$194	\$94		\$18
SUB-TOTAL DIRECT COSTS	\$1,043	\$544	\$358	\$110	\$31

(*Includes CDC, FGoN)