Progress in the Decade of Vaccines

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World Health Organization
Goals for the Decade of Vaccines (2011-20)

- Achieve a world free of poliomyelitis
- Meet vaccination coverage targets in every region, country, and community
- Exceed the Millennium Development Goal 4 target for reducing child mortality
- Meet global and regional elimination targets
- Develop and introduce new and improved vaccines and technologies
ANNUAL GVAP MONITORING FRAMEWORK

ADMINISTRATIVE DATA
OTHER DATA
SURVEYS

COUNTRY REPORTS AND REVIEW

REGIONAL REPORTS AND REVIEW

JRF18

iERG
EB/WHA
SAGE
SAGE WG

GVAP M&A SECRETARIAT

Independent review

GLOBAL LEVEL INDICATORS E.G. R&D
REPORTS ON RESOURCES AND COMMITMENTS
ANNUAL REPORTS KEY STAKEHOLDERS

The report card: GVAP mid-point targets

- **DTP3**: All countries >90% national coverage, and >80% in every district by **end 2015**
- **Polio**: transmission stopped by **end 2014**
- **Maternal and neonatal tetanus**: eliminated by **2015**
- **Measles**: eliminated in 4 regions by **end-2015**
- **Rubella**: eliminated in 2 regions by **end-2015**
- **Introduction of under-utilized vaccines**: At least 90 low or middle income countries to have introduced one or more such vaccines by **2015**
Reported Measles Incidence Rate* and Countries with largest number of reported measles cases
Apr 2014 to Mar 2015 (12M period)

Georgia: 2,387
Egypt: 2,712
Nigeria: 3,736
Ethiopia: 14,923

Age distribution of confirmed measles cases.
Kenya (N=2230) . 2012

Age group beyond the traditional target for follow-up SIAs (55% of total cases)

Data source:
- Monthly reporting of national bulletins or other regularly keeps WHO HQ informed of measles cases or outbreaks
- Reports from sentinel sites may or may not be reliable

*Rate per 1'000'000 population

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MATERNAL AND NEONATAL TETANUS: 24 COUNTRIES YET TO ACHIEVE ELIMINATION IN 2014

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<th>10 COUNTRIES CLOSE TO ELIMINATION</th>
<th>8 COUNTRIES ARE DRASTICALLY BEHIND DESPITE RELATIVELY STABLE POLITICAL SITUATION</th>
<th>6 COUNTRIES ARE BEING SET BACK BY POLITICAL INSTABILITY</th>
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<td>ANGOLA</td>
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<td>DEMOCRATIC REPUBLIC OF THE CONGO</td>
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<td>PHILIPPINES</td>
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*Cambodia, India, Madagascar and Mauritania were validated in 2015*
DTP3 coverage change 2013 - 2014 and size of under and unvaccinated infants in 2014

### Reasons for un- and under-vaccination: remain the same…

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<th>Community demand</th>
<th>Systemic weaknesses</th>
<th>Access to services</th>
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<td>• Lack of knowledge and awareness</td>
<td>• Inadequate human resources</td>
<td>• Remote, underserved areas</td>
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<td>• Reactogenicity of vaccines not addressed adequately</td>
<td>• Inadequate financing</td>
<td>• Migrant and nomadic populations</td>
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<tr>
<td>• False perceptions and vaccine hesitancy</td>
<td>• Weak procurement and distribution</td>
<td>• Displaced populations and those affected by conflicts and crisis</td>
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<td>• Poor quality and use of data</td>
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But, there is reason for optimism and clear indications that the targets are achievable

- An increasing number of countries are reaching and sustaining DTP3 coverage goal
- Regional of Americas validated to have eliminated rubella/ CRS
- Africa polio free for 1+ year
- India eliminated MNTE
- THESE SUCCESSES HAVE TO BECOME THE NORM

Number of countries that reached and sustained ≥ 90% coverage with 3 doses of diphtheria, tetanus and pertussis (DTP) containing vaccines and global DTP3 coverage from 2000-2014
The way forward

- Strengthen health and immunization systems
  - From procurement to delivery and monitoring

- Greater country ownership and sustainable financing

- Improve the quality and use of data at all levels
  - Analysis and use of data to target efforts & maximize benefits

- Improved planning and accountability processes

- Strategies to sustain immunization during conflict and chronic disruption
Together we can make it happen!

http://www.who.int/immunization/global_vaccine_action_plan/en/