Task Force on Immunization (TFI) in Africa
14th Annual Meeting

And

Africa Regional Inter-Agency Coordination Committee (ARICC)
13th Annual Meeting

Meeting Report

Maputo, Mozambique

27 – 29 November 2006
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<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Full Form</th>
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<tbody>
<tr>
<td>AARR</td>
<td>Average Annual Reduction Rate</td>
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<tr>
<td>ADC</td>
<td>Accelerated Disease Control</td>
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<td>AFP</td>
<td>Acute Flaccid Paralysis</td>
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<td>AFRO</td>
<td>African Regional Office</td>
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<td>AMCs</td>
<td>Advanced Market Commitments</td>
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<td>ARCC</td>
<td>Africa Regional Certification Commission</td>
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<td>ARICC</td>
<td>Africa Regional Inter-Agency Coordination Committee</td>
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<td>CAR</td>
<td>Central Africa Republic</td>
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<td>CDC</td>
<td>US Centers for Disease Control and Prevention</td>
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<td>cMYP</td>
<td>Comprehensive multi-year plan</td>
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<td>DHS</td>
<td>Demographic Health Survey</td>
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<td>DQA</td>
<td>Data Quality Assessment</td>
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<td>DRC</td>
<td>Democratic Republic of Congo</td>
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<td>DTP</td>
<td>Diphtheria, Tetanus, Pertussis</td>
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<tr>
<td>EAPRO</td>
<td>Eastern Asia Pacific Regional office</td>
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<td>EMRO</td>
<td>Eastern Mediterranean Regional Office</td>
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<td>EPI</td>
<td>Expanded Programme on Immunization</td>
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<td>ESARO</td>
<td>Eastern and Southern Africa Regional Office</td>
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<td>ETTMD</td>
<td>Electronic Time Temperature Monitoring Devices</td>
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<td>GAVI</td>
<td>Global Alliance for Vaccines and Immunization</td>
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<td>GIVS</td>
<td>Global Immunization Vision and Strategy</td>
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<td>Hep B</td>
<td>Hepatitis B vaccine</td>
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<td>Hib</td>
<td>Haemophilus Influenzae type B</td>
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<td>HIV/AIDS</td>
<td>Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome</td>
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<td>HMIS</td>
<td>Health Management Information System</td>
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<td>HSS</td>
<td>Health System Support</td>
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<td>ICC</td>
<td>Inter-Agency Coordinating Committee</td>
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<td>ICST</td>
<td>Inter Country Support Team</td>
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<td>IDSR</td>
<td>Integrated Disease Surveillance and Response</td>
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<td>IFFIm</td>
<td>International Finance Facility for Immunization (IFFIm)</td>
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<td>INS</td>
<td>Injection Safety Support</td>
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<td>IPV</td>
<td>Inactivated Polio Vaccine</td>
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<td>ISS</td>
<td>Immunization Services Support</td>
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<td>IPT</td>
<td>Intermittent Preventative Treatment</td>
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<td>ITN</td>
<td>Insecticide treated nets</td>
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<td>IVD</td>
<td>Immunization and Vaccine Development</td>
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<td>LGA</td>
<td>Local Government Authority</td>
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<td>LLINs</td>
<td>Long Lasting Impregnated Nets</td>
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<tr>
<td>M&amp;E</td>
<td>Monitoring and Evaluation</td>
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<td>MDG</td>
<td>Millennium Development Goal</td>
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<td>MNT</td>
<td>Maternal Neonatal Tetanus</td>
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<td>MNTE</td>
<td>Maternal Neonatal Tetanus Elimination</td>
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<td>mOPV</td>
<td>Monovalent Oral Polio Vaccine</td>
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<td>NGO</td>
<td>Non-governmental Organization</td>
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<td>NPI</td>
<td>National Program on Immunization</td>
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<td>NRA</td>
<td>National Regulatory Authority</td>
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<td>NVS</td>
<td>New Vaccine Support</td>
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<td>ORT</td>
<td>Oral Rehydration Therapy</td>
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<td>OPV</td>
<td>Oral polio vaccine</td>
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<td>PBM</td>
<td>Pediatric Bacterial Meningitis</td>
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<td>PEI</td>
<td>Polio Eradication Initiative</td>
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<tr>
<td>RED</td>
<td>Reaching Every District</td>
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<td>REW</td>
<td>Reaching Every Ward</td>
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</table>
RH  Reproductive Health
RI  Routine Immunization
ROSA  Regional Office Southern Asia
RSP  Regional Strategic Plan
SIAs  Supplemental Immunization Activities
STOP  Stop Transmission of Polio
TFI  Task Force on Immunization
TNA  Training Needs Assessment
tOPV  Trivalent Oral Polio Vaccine
TOR  Terms of reference
TT  Tetanus Toxoid
UNF  United Nations Foundation
UNICEF  United Nations Children’s Fund
VDPV  Vaccine Derived Polio Virus
WCARO  Western and Central Africa Regional Office
WHA  World Health Assembly
WHO  World Health Organization
WPV  Wild Polio Virus
YF  Yellow Fever
II. TFI RECOMMENDATIONS

Routine Immunization

The Reaching Every District (RED) Approach is not being optimally implemented in some countries of the Central African block (particularly Chad, Equatorial Guinea, and Gabon).

1. TFI recommends that:

WHO/AFRO should ensure that Central African countries are working toward improving routine immunization coverage and are supported to implement RED strategies.

Funding

2. TFI recommends that:

• WHO/AFRO should evaluate the establishment of a revolving fund for vaccine procurement, in view of the experience of PAHO and the Vaccine Independence Initiative in West Africa, and the costs of introduction of new vaccines.

Resource Mobilization

3. TFI recommends that:

• WHO/AFRO and partners should provide technical assistance to countries to develop appropriate country-specific resource mobilization plans.
• WHO/AFRO should enhance its resource mobilization capacity by supporting countries to explore the possibility of allocating debt relief funding for immunization.

Integration

4. TFI recommends that:

• WHO AFRO should finalize and disseminate to countries the integration framework, guidelines and tools, which it has produced.
• WHO AFRO should continue efforts to encourage operational research on integrated child survival activities, and to document and disseminate these experiences.

New Vaccines

In view of their demonstrated safety and efficacy,

5. TFI recommends that:

• Hib conjugate vaccines should be included in all routine infant immunization programmes in the African Region. Countries are encouraged to use existing and innovative mechanisms for funding of Hib vaccines.
• WHO/AFRO should develop an inventory of recent and ongoing studies in the Region related to diseases preventable from new vaccines (Hib, pneumococcal, HPV, rotavirus, etc) and encourage further studies to generate Regional evidence on burden of disease, and cost-benefit analyses on vaccine introduction.
Polio

6. TFI recommends that:

- Polio-free countries should implement the full range of activities needed to protect the investments made so far including:
  - Maintain AFP operational surveillance rates >2.0/100,000 children less than 15 years of age;
  - Accelerate RED and other strategies to ensure routine OPV3 coverage >80%; and
  - Rapidly respond to importations and sustain campaigns until confirmation of interruption of imported virus.
- In view of the recent polio outbreak in Namibia, WHO/AFRO should advocate for synchronized SIAs for future rounds between Angola, DRC, Namibia, and bordering provinces of South Africa.
- Countries with OPV3 routine immunization below 80% should implement at least one annual SIA using the appropriate OPV as a safeguard to limit spread of importation should this occur.

Nigeria

TFI notes with appreciation the efforts made by the Nigerian Government with the support of WHO and other partners to increase coverage of routine immunization and recognize the substantial resources required for further activities.

7. TFI recommends that:

- The Government of Nigeria should establish a 24-month SIA plan, with substantial provision for “mop-ups” to facilitate partner and government resource mobilization and allocation.
- To further increase routine immunization coverage and reduce the number of children with zero doses of OPV.

Measles Control

8. TFI recommends that:

- WHO and partners should support countries to address gaps in routine EPI coverage, with emphasis on performance at sub-national levels, as a means to sustain the gains in measles mortality reduction.
- At the 2007 TFI, WHO/AFRO should provide a report on the status of implementation of the 2005 Measles TAG recommendations.

MNT Elimination

9. TFI recommends that:

- All Countries in the Region should make efforts to comply with the 2009 MNT Elimination Goal.

Yellow Fever

10. TFI recommends that:
• WHO and partners should continue fund raising and give adequate support for yellow fever surveillance and YF vaccination coverage.
• WHO/AFRO should gather evidence and policy on vaccination against yellow fever beyond the current EPI schedule for preventive immunization.

Meningitis

In view of the fact that there may not be adequate vaccine in the event of a major meningitis epidemic,

11. TFI recommends that:

• WHO/AFRO should make every effort to secure adequate vaccine stock. Countries in the meningitis belt should develop preparedness plans.

Capacity Building

12. TFI recommends that:

• WHO/AFRO and partners should develop a more-comprehensive integrated training package on EPI and child health and increase technical and financial support to build individual and institutional capacity for the EPI training network institutions.

Logistics

13. TFI recommends that:

• WHO/AFRO, Bioforce and partners should urge countries to create positions of health logistic officers in health management teams, coordinate their efforts and mobilize necessary resources to initiate adequate training in logistics.

Communication

14. TFI recommends that:

• WHO, UNICEF and partners should support countries to regularly collect, analyze and use communication data for accelerated disease control, routine immunization and integrated child survival activities.