Global Action Plan for Influenza Vaccines (2011-2016)

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World Health Organization
Global Action Plan for Influenza Vaccines

OBJECTIVE 1. Increase in seasonal vaccine influenza use

OBJECTIVE 2. Increase in production capacity

OBJECTIVE 3. Further research and development
Workshops supporting GAP

GAP

Increase in seasonal vaccine use

Increase in production capacity

Further research and development

Evidence based policies 2012
Communication 2013

Technology 2010
Stakeholders 2010

Business modeling 2013

Regulatory Capacity 2011
Trained Workforce 2011
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- Recommended priority groups for seasonal vaccination
  - **Pregnant women** (highest priority)
  - Others:
    - health-care workers
    - children under 5 (in particular 6-23 mo)
    - elderly
    - underlying health conditions

- Communication challenges
  - Communication strategies for maternal immunization
  - Development of messages to address vaccine reluctance
  - Building consensus with professional organizations
Production Capacity Building
Why in LMIC?

Fig. 1. Global production capacity of seasonal trivalent influenza vaccine in 2011
Partridge & Kieny. Vaccine 31 (2013) 728-731
Aim: strengthen Vaccine Safety risk/crisis communication capacity

For: National NRA/EPI staff from Eastern Mediterranean

From Global Vaccine Safety Resource Center
  - WHO-QSS (Dr Philipp Lambach)

Content by communication experts
  - committed to promoting best communication practice in the context of vaccine safety
  - LSHTM, UNICEF, WHO (DCO and QSS)

Communicating about vaccines today
Single Overarching Communication Outcome
Audience analysis
Risk communication
New vaccine introduction
Working with the media and other ways to get the message out
Developing a communication plan
Research Agenda for Communication on Influenza Vaccination?

- WHO perspective after H1N1(2009) pandemic lesson
  - Need for robust scientific knowledge
  - Hence need for a research agenda

- Key question:
  - **What evidence needed to develop optimal vaccination messages?**