Decade of Vaccines Collaboration
Global Vaccine Action Plan
January 2010 Bill and Melinda Gates call for a “Decade of Vaccines” and pledge to commit $10 billion over the next 10 years to help research, develop, and deliver vaccines for the world’s poorest countries.
“We envision a world in which all individuals and communities enjoy lives free from vaccine-preventable diseases.

The mission of the Decade of Vaccines is to extend, by 2020 and beyond, the full benefits of immunization to all people, regardless of where they are born, who they are, or where they live.”

Decade of Vaccines vision & mission
Why is now the right time for a Global Vaccine Action Plan?

- Great progress over last 40 years
  - Estimated 2.5 million deaths averted every year by current immunizations
  - Polio eradication nearing completion

- Yet, continued unmet needs
  - Vaccine preventable diseases still account for significant mortality and morbidity (pneumonia, diarrhea, measles, meningitis)
  - Coverage deficits and delivery challenges

- We are at a unique moment - full of promise but also challenges
  - Increased country ownership, improved coordination of partners, increased resources
  - Effective new vaccines to be widely implemented and robust pipeline of new vaccines (malaria, dengue, TB, HIV)
  - Unprecedented middle-income country growth but turbulent economic environment

- Opportunity to turn a moment into global movement
  - Global health community calls for the next ten years to be "Decade of Vaccines"
  - All 194 WHO Member States endorsed the global vaccine action plan in May 2012
The aim of the DoV Collaboration is to enhance global collaboration and promote country ownership.

The global effort brings together stakeholders across the vaccine chain in an unprecedented way – including everyone involved, from researchers to local immunization programme managers.

This approach hopes to generate new outcomes to benefit individuals and communities.
Country ownership

- Countries have primary ownership and responsibility for establishing good governance and for providing effective and quality immunization services for all.

Shared responsibility and partnership

- Immunization against vaccine-preventable diseases is an individual, community and governmental responsibility that transcends borders and sectors.

Equitable access

- Equitable access to immunization is a core component of the right to health.
DoV Guiding Principles (II)

Integration
- Strong immunization systems, as part of broader health systems and closely coordinated with other primary health care delivery programmes, are essential for achieving immunization goals.

Sustainability
- Informed decisions and implementation strategies, appropriate levels of financial investments, and improved financial management and oversight are critical to ensure the sustainability of immunization programmes.

Innovation
- The full potential of immunization can be realised only through learning, continuous improvement and innovation in research and development, as well as innovation and quality improvement across all aspects of immunization.
Goals for the Decade of Vaccines

Avert hundreds of millions of cases and millions of future deaths
Gain billions of dollars of economic productivity
Contribute to exceeding MDG 4 target for reduction in child mortality

Achieve a world free of polio

By 2020 Certification of poliomyelitis eradication

Meet global and regional elimination targets

By 2020 Measles and Rubella eliminated in at least 5 WHO regions

Meet vaccination coverage targets in every region, country and community

Reach 90% national coverage and 80% in every district or equivalent administration for all vaccines in national programmes, unless otherwise recommended

Develop and introduce new and improved vaccines and technologies

By 2020 licensure and launch of vaccine or vaccines against one or more major diseases for which a vaccine does not currently exist

Exceed MDG4 target for reducing child mortality
The benefits of immunization are equitably extended to all people.

All countries commit to immunization as a priority.

Individuals and communities understand the value of vaccines and demand immunization as both their right and responsibility.

Immunization programmes have sustainable access to predictable funding, quality supply and innovative technologies.

Strong immunization systems are an integral part of a well-functioning health system.

Endorsed by the World Health Assembly on 25 May 2012, the GVAP constitutes a roadmap to prevent millions of deaths by 2020 through more equitable access to vaccines for people in all communities.
GVAP at WHA
Responses by the secretariat (I)

• Governance
  – WHO will lead the effort to facilitate regional and national action, including planning, implementation and monitoring.
  – Existing partnership and coordinating mechanisms will be enhanced for this purpose but no new structure will be established.
  – DoV secretariat and other governance structures will cease by the end of 2012.
  – Annual monitoring and reporting on GVAP progress will be WHO Governance processes (RCs, EB, WHA)
### Strategic objectives & actions (I)

#### Strategic Objectives

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#### High Level Actions

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## Strategic objectives & actions (II)

### Strategic Objectives

**Strong immunization systems that are an integral part of a well functioning health system**

**Immunization programmes have sustainable access to predictable funding, quality supply and innovative technologies**

**Country, regional and global R&D innovations maximize the benefits of immunization**

### High Level Actions

1. Develop comprehensive & coordinated approaches.
2. Strengthen monitoring & surveillance systems.
3. Strengthen capacity of managers & frontline workers.
4. Strengthen infrastructure & logistics.

1. Increase total amount of funding.
2. Increase affordability for middle-income countries.
3. Improve allocation of funding in low- and middle-income countries.
4. Secure quality supply.

1. Expand capabilities & increase engagement with end-users.
2. Enable the development of new vaccines.
3. Accelerate development, licensing and uptake of vaccines.
4. Improve programme efficiencies and increase coverage and impact.
### Strategic objective 1

#### All countries commit to immunization as a priority

| Establish and sustain commitment to immunization. | • Ensure legislation or legal framework in all countries, including provisions for a budget line for immunization, and for monitoring and reporting.  
• Develop comprehensive national immunization plans that are part of overall national health plans through a bottom-up process including all stakeholders.  
• Set ambitious but attainable country-specific targets within the context of morbidity and mortality reduction goals.  
• Scrutinise, defend, and more closely follow immunization budgets, disbursements and immunization programme activities.  
• Support local civil society organizations and professional associations to contribute to national discussions of immunizations and health. |
| Inform and engage opinion leaders on the value of immunization. | • Explore models to promote collaboration between the stakeholders that generate evidence on immunizations and those who use it to set priorities and formulate policies.  
• Develop and disseminate the evidence base on the public health value of vaccines and immunization and the added value of achieving equity in access and use of immunization.  
• Develop and disseminate the evidence base for the broad economic benefits of immunization for individuals, households, communities, and countries.  
• Include immunization in the agendas of governing body meetings at all levels and in other social, health and economic forums. |
| Strengthen national capacity to formulate evidence-based policies. | • Create or strengthen independent bodies that formulate national immunization policies (for example, NITAGs or regional technical advisory groups).  
• Develop more effective ways for national regulatory agencies (NRAs), health sector coordination committees (HSCCs), and interagency coordination committees (ICCs) to support immunization programmes as part of disease control programmes and preventive health care.  
• Create regional forums and peer-to-peer exchange of information, best practices, and tools.  
• Create expanded, more transparent mechanisms for aggregating, sharing, and using information to monitor commitments. |
### Strategic objective 2

**Individuals and communities understand the value of vaccines and demand immunization as both their right and responsibility**

| Engage individuals and communities on the benefits of immunization and hear their concerns. | • Engage in a dialogue which both transmits information and responds to people’s concerns and fears.  
• Utilise social media tools and lessons from commercial and social marketing efforts.  
• Leverage new mobile and Internet-based technologies.  
• Include immunization in the basic education curriculum.  
• Conduct communications research. |
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| Create incentives to stimulate demand. | • Create incentives to households and health workers for immunization while respecting the autonomy of beneficiaries (for example, cash or in-kind transfers, bundling of services, media recognition).  
• Conduct social research to improve the delivery of immunization services and the ability to meet the needs of diverse communities. |
| Build advocacy capacity. | • Recruit new voices, including those of educators, religious leaders, traditional and social media personalities, family physicians, community health workers, and trained immunization champions (among others).  
• Train healthcare workers on effective communication techniques, esp. to address vaccine hesitancy and to respond to reports of serious adverse events following immunization in order to maintain trust and allay fears.  
• Engage, enable, and support in-country CSOs to advocate to local communities and policymakers and in local and global media regarding the value of vaccines.  
• Create national or regional advocacy plans that involve in-country CSOs.  
• Link global, national and community advocacy efforts with professional and academic networks. |
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| Develop and implement new strategies to address inequities. | • Recast "Reaching Every District" to "Reaching Every Community" to address inequities within districts.  
• Engage underserved and marginalised groups to develop locally tailored, targeted strategies for reducing inequities.  
• Introduce appropriate new vaccines in national immunization programmes (see also Objective 5).  
• Establish a life course approach to immunization planning and implementation, including new strategies to ensure equity across the life span.  
• Prevent and respond to vaccine-preventable diseases during disease outbreaks, humanitarian crises, and in conflict zones. |
| Build knowledge base and capacity to enable equitable delivery. | • Track each individual's immunization status, leveraging immunization registries, electronic databases and national identification number systems.  
• Take advantage of community structures to enhance communication and deliver services (for example, traditional birth attendants, birth registries).  
• Involve CSOs in community outreach and planning.  
• Develop new approaches to community engagement for urban and peri-urban areas.  
• Train health workers and CSOs on how to engage communities, identify influential people who can assist in planning, organizing and monitoring health and immunization programs, identify community needs and work with communities to meet those needs.  
• Conduct operational and social science research to identify successful strategies to reduce inequities and improve the quality and delivery of immunization services. |
## Strategic objective 4

### Strong immunization systems that are an integral part of a well functioning health system

| Develop comprehensive and coordinated approaches. | • Ensure that global vaccine programmes focusing on eradication and elimination goals (for example, polio and measles campaigns) are incorporated into national immunization programmes and do not operate independently.  
• Ensure that new vaccine deployment is accompanied by comprehensive plans to control targeted diseases.  
• Ensure coordination between the public and private sectors for new vaccine introduction, reporting of vaccine-preventable diseases and administration of vaccines, and ensure quality of vaccination in the public and private sectors.  
• Consider the inclusion of vaccines (as appropriate to national priorities) to health programmes across the life course. |
| --- | --- |
| Strengthen programme safety, monitoring and surveillance. | • Improve the quality of all immunization administrative data and promote its analysis and use at all administrative levels to improve programme performances.  
• Develop and promote the use of new technologies for collection, transmission and analysis of immunization data.  
• Further strengthen and expand disease surveillance systems to generate information for decision-making, monitoring the impact of immunization on morbidity and mortality and changes in disease epidemiology.  
• Ensure capacity for vaccine safety activities, including capacity to collect and interpret safety data, with enhanced capacity in countries that introduce newly developed vaccines. |
| Build capacity of managers and frontline workers. | • Ensure that immunization and other primary health care programmes have adequate human resources to schedule and deliver predictable services of acceptable quality.  
• Increase levels of pre-service, in-service and post service training for human resources, and develop new, relevant curricula that approach immunization as a component of comprehensive disease control.  
• Promote coordinated training and supervision of community-based health workers. |
| Strengthen infrastructure and logistics. | • Innovate to improve cold-chain capacity and logistics, as well as waste management.  
• Minimise the environmental impact of energy, materials, and processes used in immunization supply systems, both within countries and globally.  
• Staff supply systems with adequate numbers of competent, motivated, and empowered personnel at all levels.  
• Establish information systems that help staff accurately track the available supply. |
Strategic objective 5

Immunization programmes have sustainable access to long-term funding and quality supply

| Increase total amount of funding. | • Establish a commitment for governments to invest in immunization according to their ability to pay and the expected benefits.  
• Engage new potential domestic and development partners and diversify sources of funding.  
• Develop the next generation of innovative financing mechanisms. |
|-----------------|--------------------------------------------------------------------------------------------------------------------------------------------|
| Increase affordability for middle-income countries. | • Explore differential pricing approaches to define explicit criteria for price tiers and the current and future prices to be made available to middle-income countries  
• Explore pooled negotiation or procurement mechanisms for lower-middle-income countries |
| Improve allocation of funding in low- and middle-income countries. | • Strengthen budgeting and financial management in country to better integrate financial and health care planning and priority setting.  
• Coordinate funding support from development partners and other external sources.  
• Evaluate and improve funding support mechanisms on the basis of their effectiveness in reaching disease goals.  
• Base funding on transparency and objectivity in order to ensure the sustainability of programmes.  
• Promote the use of cost and cost-benefit arguments in fund raising, decision-making, and defence of immunization funding.  
• Explore pay-for-performance funding systems. |
| Secure quality supply. | • Build and support networks of regulators and suppliers to share best practices and to improve quality assurance capabilities and quality control.  
• Develop tools to strengthen global standardization of manufacturing regulatory processes.  
• Strengthen national regulatory systems and develop globally harmonized regulations.  
• Ensure a forum where countries can communicate expected demand for vaccines and technologies and provide guidance to manufacturers on desired product profiles. |
## Strategic objective 6

### Country, regional, and global R&D innovations maximize the benefits of immunization

| Expand capabilities and increase engagement with end-users. | • Engage with end users to prioritise vaccines and innovations according to perceived demand and added value.  
• Establish platforms for exchange of information on immunization research and consensus building.  
• Build more capacity and human resources in low- and middle-income countries to conduct R&D and operational research.  
• Increase networking among research centres for efficient building of partnerships among high-, middle- and low-income countries’ institutions.  
• Promote collaboration between traditional research disciplines and scientists from disciplines not previously engaged in vaccine research. |
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| Enable the development of new vaccines. | • Research on the fundamentals of innate and adaptive immune responses, particularly in humans.  
• Research on immunologic and molecular characteristics of microbes.  
• Improve understanding of the extent of causes of variation in human-population response to vaccines. |
| Accelerate development, licensing and uptake of vaccines. | • Promote greater access to technology, know-how, and intellectual property for adjuvants and their formulation into vaccines.  
• Develop nonsyringe delivery mechanisms and vaccine packaging that best suit the needs and constraints of countries’ programmes.  
• Develop thermostable rotavirus and measles vaccines.  
• Develop new bioprocessing and manufacturing technologies.  
• Develop a global, regulatory science research agenda.  
• Adopt best practices in portfolio and partnership management for R&D. |
| Improve programme efficiencies and increase coverage and impact. | • Research the use of more effective information through modern communication technologies.  
• Conduct representative epidemiological, immunological, social and operational studies and investigations of vaccine impact to guide health economics analysis.  
• Perform operational research on improved delivery approaches for life course immunization and vaccination in emergency situations.  
• Perform research on interference effects and optimum delivery schedules.  
• Perform research to develop improved diagnostic tools for conducting surveillance in low-income countries. |
Aditec is a collaborative research programme that aims to accelerate the development of novel and powerful immunisation technologies for the next generation of human vaccines.

The European Vaccine Initiative (EVI) is leading European efforts to develop effective, accessible, and affordable vaccines against diseases of poverty. EVI’s vision is 'a world free of the intolerable burden of diseases of poverty within the coming decades'.
Decade of Vaccines Collaboration

Global Vaccine Action Plan: The Challenge

- The DoV brings no new money.
- Its delivery depends on the prioritisation of agencies and organisations that may not be persuaded to re-prioritise to the DoV goals.
- The success will be measured by the effectiveness of the Accountability Framework that is in the hands of WHO.