



17th TechNet Conference

Panama City, Panama | October 16-19, 2023

Immunization Programmes That Leave No One Behind

www.technet-21.org

Immunization Programs That Leave No One Behind

Perspectives on the challenge, progress, and opportunity of implementing the IA2030 global strategy to Leave No One Behind

Chair: Nora Rodriguez (WHO PAHO)

Panellists

Ann Lindstrand (EPI Unit Head, WHO headquarters)

Olamide Folorunso (Health Specialist, UNICEF Programme Group)

Karan Sagar (Head, Comprehensive Vaccine Management, Gavi)

Kelly Hamblin (Senior Program Officer, Immunization, Bill & Melinda Gates Foundation)

Daniel Salas (Executive Manager, Comprehensive Immunization Program, PAHO)



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Immunization programmes that leave no one behind

Ann Lindstrand, Unit Head Essential
Programme on Immunization (EPI).
Department of Immunization, Vaccines &
Biologicals (IVB). WHO Geneva

1. The framework: IA2030

2. The present: The Big Catch-Up

3. Looking ahead



IA2030 SETS A UNIFYING VISION FOR THE DECADE ALIGNED WITH SDGs WITH CLEAR IMPACT GOALS



Vision

A world where everyone,
everywhere, at every age...

...fully benefits
from vaccines...

...for good health
and well-being



Impact Goals

Reduce mortality and morbidity from vaccine-preventable diseases across the *life course*.

Leave no one behind, by increasing equitable access and use of new and existing vaccines.

Ensure good health and well-being for everyone by strengthening immunization **within primary health care and contributing to universal health coverage and sustainable development.**



IA2030 CO-DEVELOPMENT & PARTNERSHIP

2019-2020

Co-development of the Strategy and Vision across partners

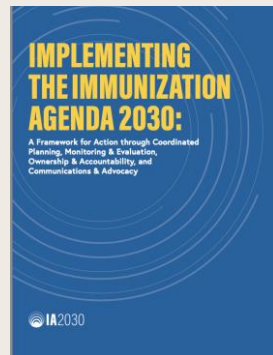


WHA 73 – August 2020
Member States endorse IA2030



2020-2021

Implementation planning, design of architecture



WHA 74 – May 2021
Member States endorse IA2030 Framework for Action



2021-2022

Activating operational levels and providing first global report



WHA 75 – May 2022
Member States receive first global report for IA2030



2022-2023

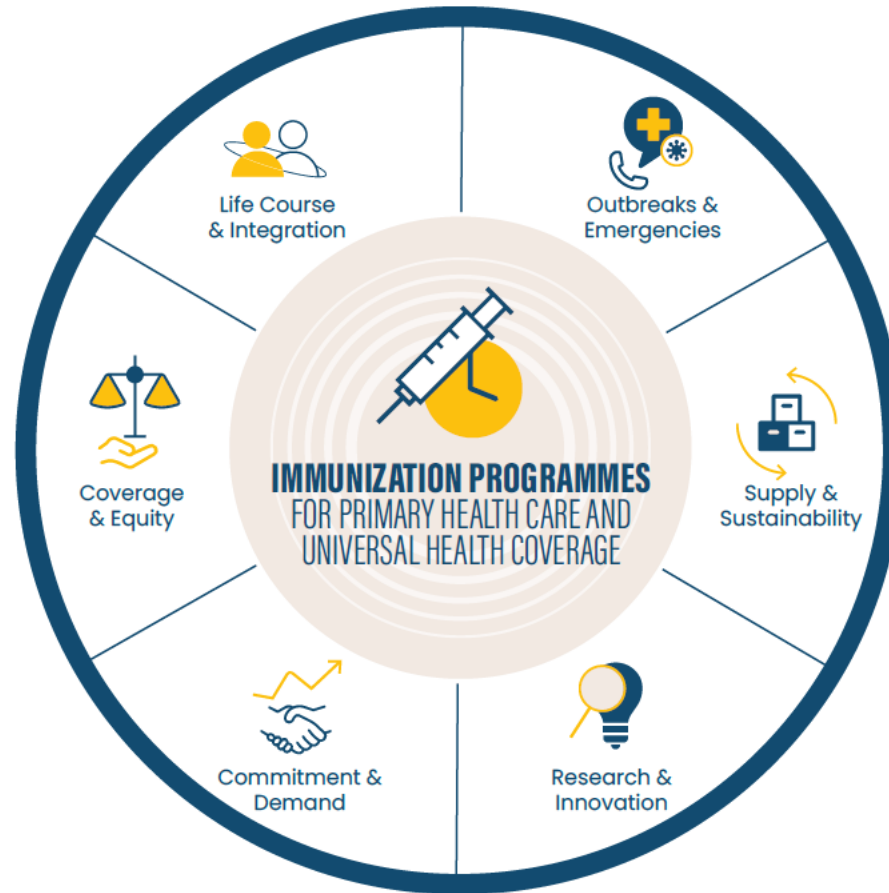
Intensification of immunization recovery: catch-up, restore and strengthen



World Immunization Week – April 2023
Launch of IA2030 “The Big Catch-up” communications and operational push

RECAP: IA2030 STRATEGIC FRAMEWORK

Strategic Priorities



Core Principles



7 Strategic Priorities



informed by

4 Core Principles
for action



RECAP: IA2030 GOALS AND TARGETS

All countries contribute to progress towards these 7 Impact Goal targets

Impact Goals

1 Prevent disease

2 Promote equity

3 Build strong immunization programmes

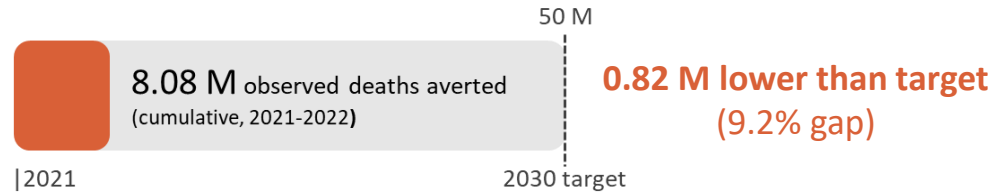
Targets

- 1.1 50 million future deaths averted globally
- 1.2 All countries achieve endorsed VPD control, elimination and eradication targets
- 1.3 All selected VPDs have a declining trend in the number of large or disruptive outbreaks
- 2.1 50% reduction in the number of zero-dose children
- 2.2 500 vaccine introductions in low- and middle-income countries
- 3.1 90% global coverage for DTP3, MCV2, PCV3 and HPVc
- 3.2 Improve Universal Health Coverage

PROGRESS AGAINST IA2030 IMPACT GOALS (1 of 3)

GOAL 1: Prevent disease

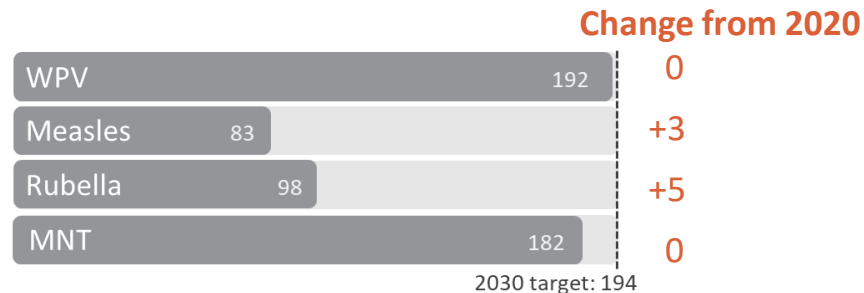
1.1 50 million future deaths averted globally



Annual target was not reached in 2021 and 2022. As a result, an estimated 816,000 additional future deaths from vaccine-preventable diseases will occur than projected.

OFF Track
to reach 2030 target

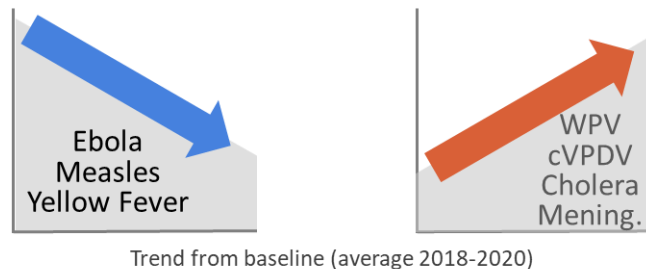
1.2 All countries achieve VPD control, elimination and eradication targets



Modest progress has been made towards global and regional eradication and elimination targets since 2020.

OFF Track *
to reach 2030 target

1.3 All selected VPDs have a declining trend in the number of large or disruptive outbreaks by 2030



Three VPDs showed a downward trend from baseline (average 2018-2020), 2021 and 2022. Trend decreased for measles, but 2022 count was significantly higher than in 2021. Four VPDs showed an upward trend.

4 VPDs currently OFF Track
3 VPDs currently ON Track

* Indicator does not have a mid-decade target, therefore progress towards 2030 achievement is not quantifiably measured.

LOOKING AHEAD TO 2024: IA2030 ACTION AGENDA

The action agenda sets out a series of short-term and high-level priorities to align the efforts of countries, regions, global partners and other stakeholders

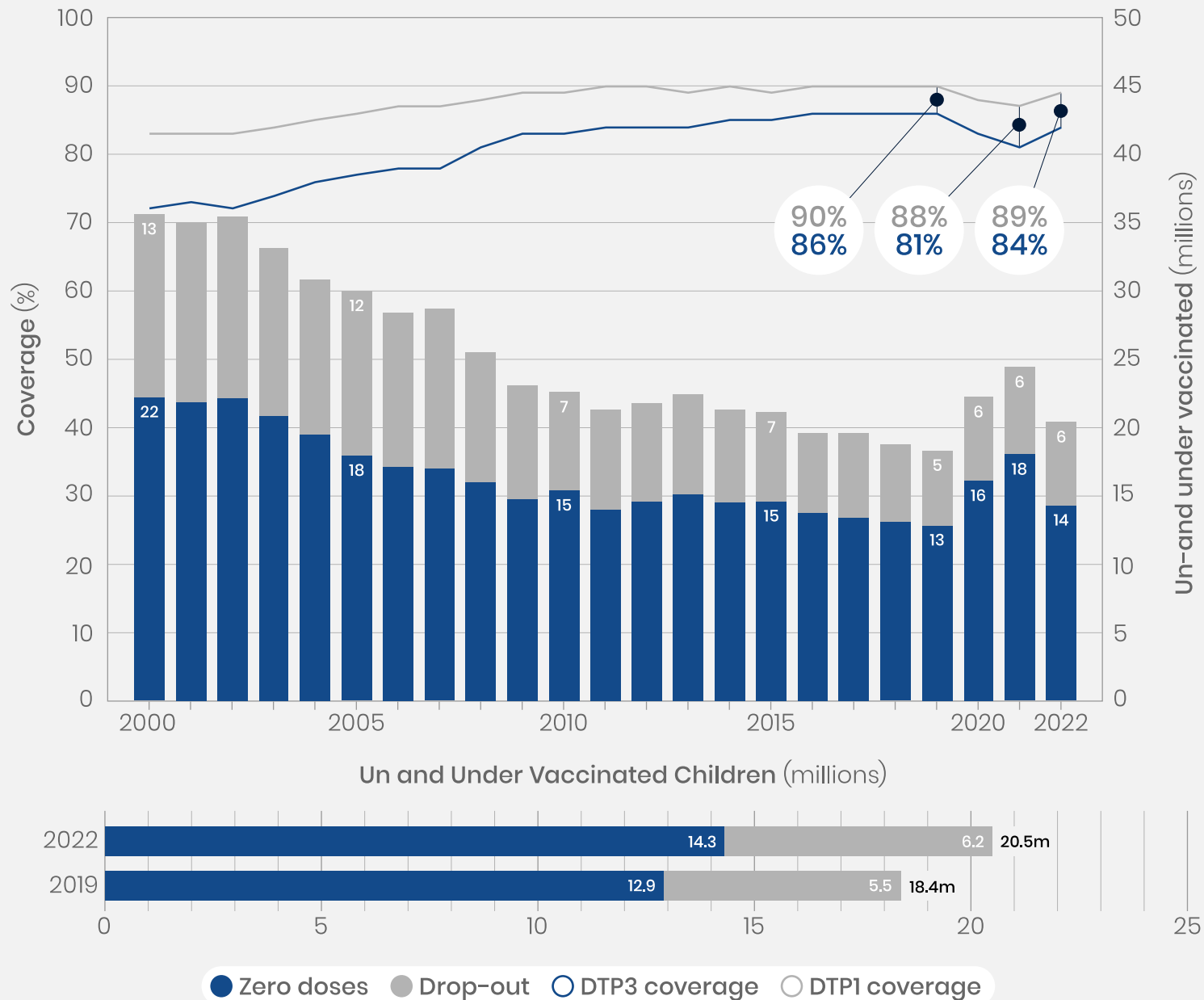
- 1. Catch-up and strengthening**
- 2. Promoting equity**
- 3. Regaining control of measles**
- 4. Making the case for investment**
- 5. Accelerate new vaccine introductions**
- 6. Advance vaccination in adolescence**

1. The framework: IA2030
- 2. The present: The Big Catch-Up**
3. Looking ahead



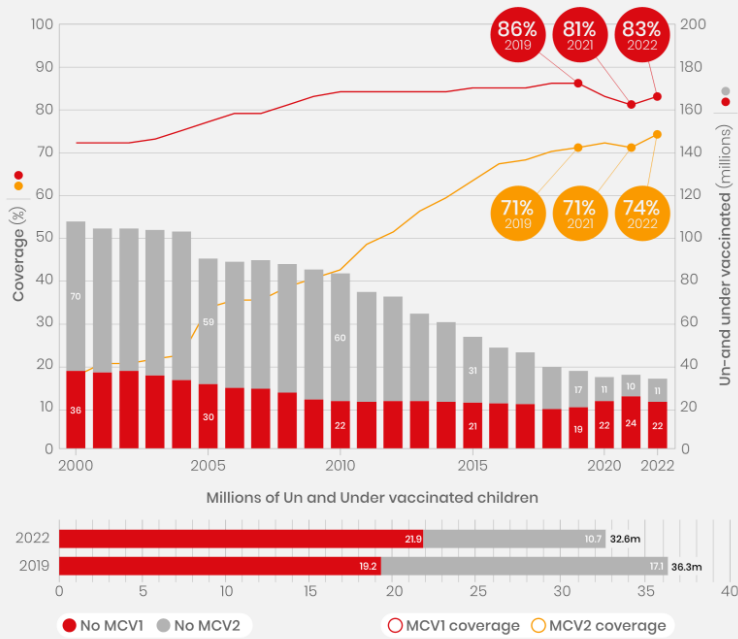
DTP global immunization coverage in 2022 partially recovered to 2019 levels

The number of “zero-dose children” – **improved from 18.1 in 2021 to 14.3 million**. However, this is **above pre-pandemic level of 12.9 million (2019)**.



Measles containing vaccine (MCV) coverage shows less recovery than DTP vaccination

Measles, because of its high transmissibility, acts as a “canary in the coalmine”, quickly exposing any immunity gaps in the population. The coverage of measles containing vaccine is thus often used as a leading tracer for protection.



IVB Directors Report to SAGE

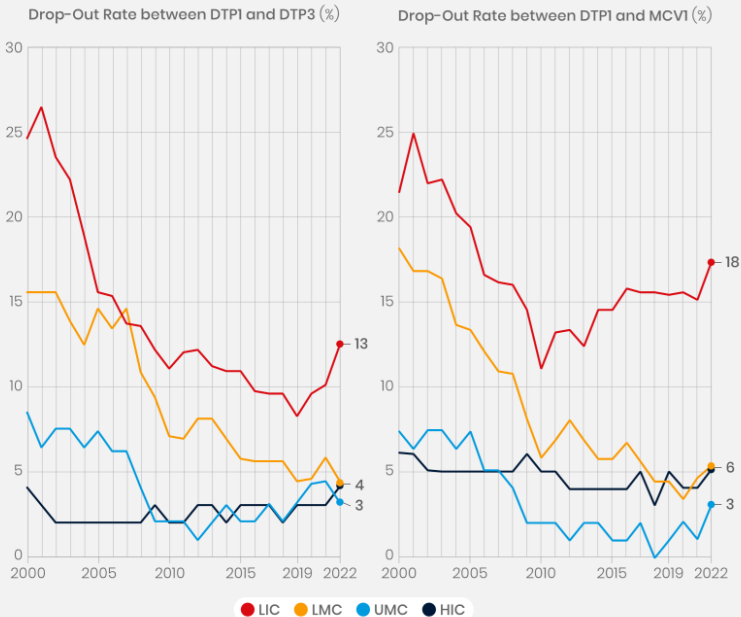
LICs show high drop-out rates after a child receives DTP1

Drop-out rates between DTP1 and DTP-3 and especially to MCV1 are very high in low-income countries.

In Low-Income Countries, 13% of children who receive a first dose of DTP do not receive a third dose, and 18% do not receive a measles vaccine.

Drop-out analyses are one in a series of monitoring metrics which should inform country investments.

Fully vaccinated child objectives need increased focus and attention



IVB Directors Report to SAGE

Low-income countries (LICs) are lagging in the recovery – DTP1 and even more so MCV1

LICs showed limited signs of recovery rising only 1% for DTP1, well below other World Bank income groups.

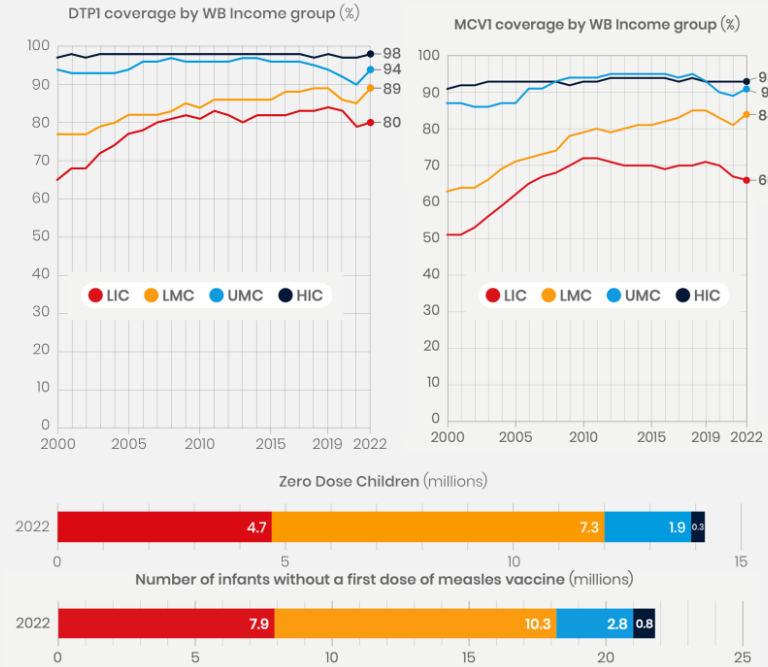
18% of all infants reside in LICs, but 33% of zero dose children reside in LICs.

Low-income countries are trailing behind MCV1 coverage levels achieved in 2019, showing no signs of recovery, but instead falling another 1% compared to 2021.



3 of 31

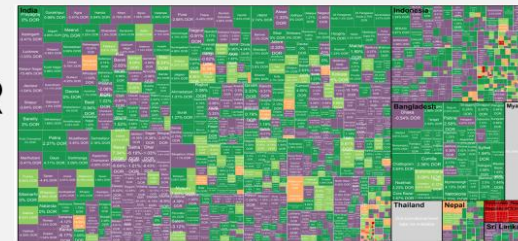
IVB Directors Report to SAGE



Subnational heterogeneity emphasizes that equity in coverage is achievable --- essential for reducing outbreaks

2nd level administrative level dropout rate between DTP1 and MCV1

SEAR

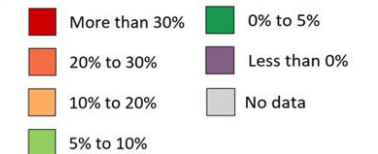


AFR



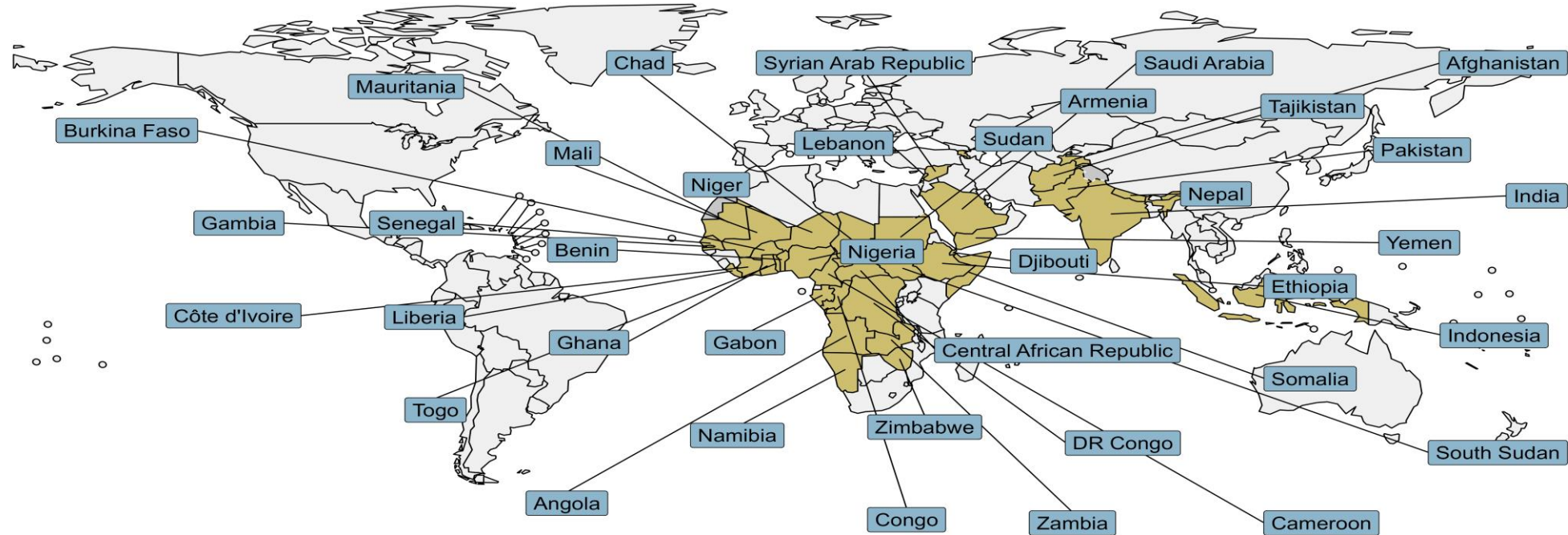
We want purple & green quilts... with no holes (absent data)...

and fewer red patches (low coverage)



>40 Countries experienced large or disruptive measles outbreaks in past year

Countries provisionally meeting the large and disruptive outbreaks definition - Data from 2022-04 to 2023-03 included



Map production: World Health Organization, 2023. All rights reserved
Data source: IVB Database

Disclaimer: The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement.

0 875 1750 3500 Kilometers

- In the frame of tracking progress towards the goals of Immunization Agenda 2030 (IA2030), an indicator has been developed by a working group in order to represent large and disruptive measles outbreaks. This indicator is defined as an incidence equal or greater than 20 reported measles cases per million population over a period of 12 months. It is important to note that measles outbreak definitions vary between countries and regions according to local context and level of progress towards regional elimination goals. This definition of large and disruptive outbreaks aims to complement and not replace the national and regional definitions, while also providing a degree of global standardization and permitting tracking of progress against a common metric.

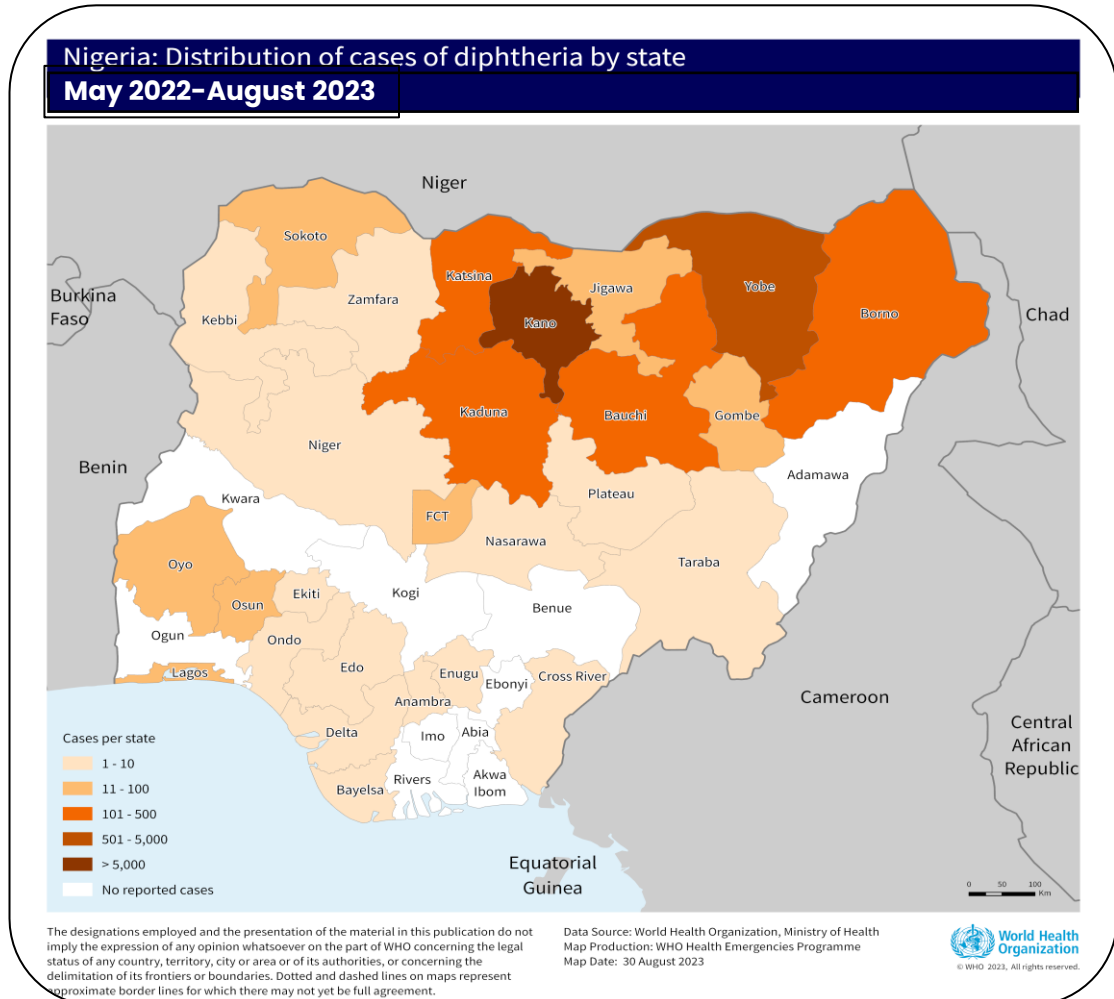
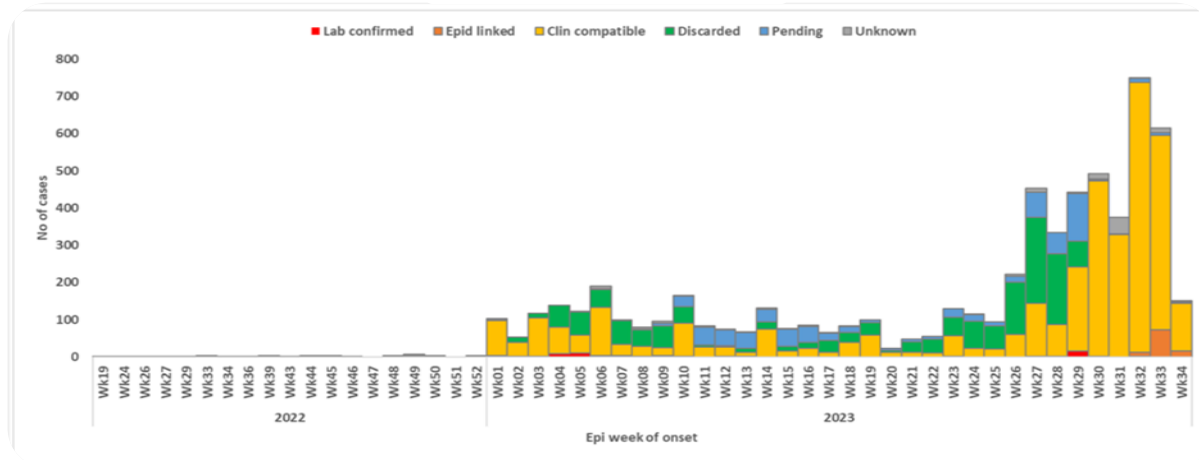
Diphtheria – ongoing outbreak response

- WHO is actively tracking increased Diphtheria cases in a growing number of countries. Specifically, WHO is providing a **3-level response** to outbreaks in both Nigeria and Guinea

Nigeria
(May 2022 to Aug 2023)
8,353 suspected cases
301 deaths (CFR: 6.1%)

Guinea
(July to August 2022)
117 suspected cases
37 deaths (CFR 32%)

Nigeria



The Big Catch-Up: A multipartner initiative for immunization intensification 3-prong approach

1 Catch-up missed children

Reach children who missed vaccination during 2020-2022, some of which was due to the pandemic (this includes the 2019 zero-dose and under-immunized children as part of the accumulated susceptible cohort)

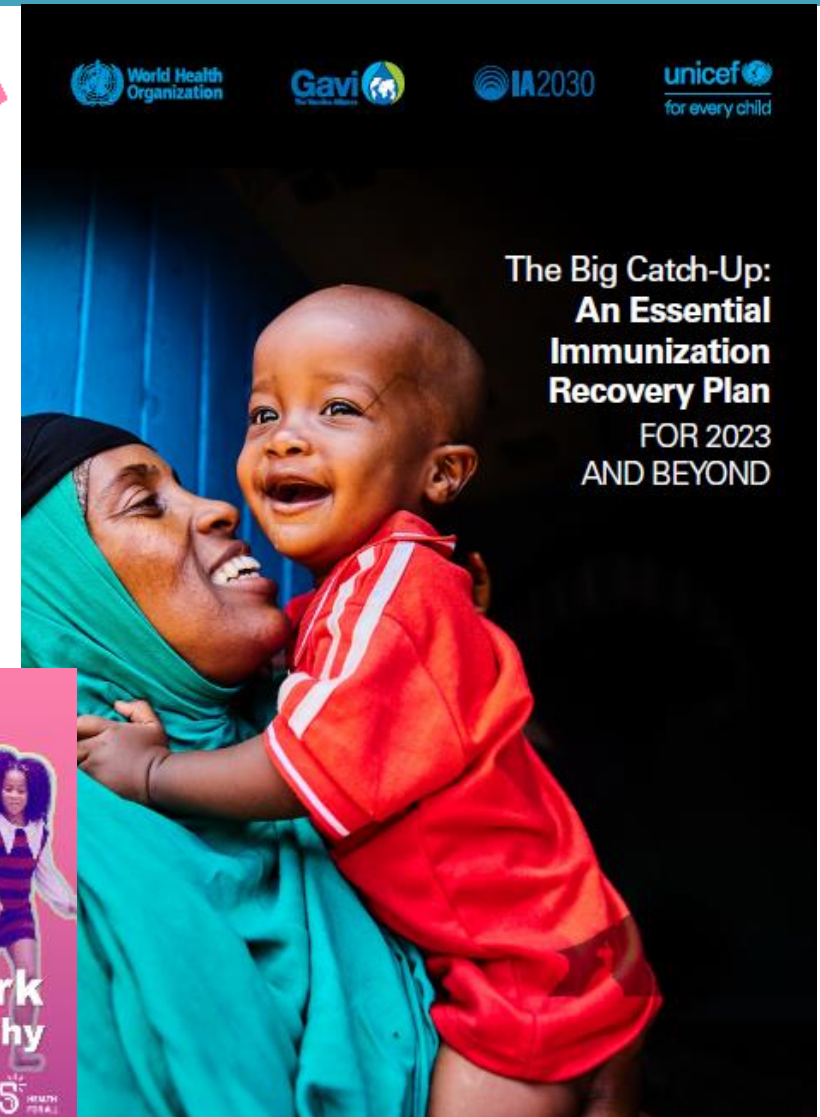
**THE BIG
CATCH-UP!**

2 Restore immunization programmes

Restore vaccination coverage in 2023 back to at least 2019 coverage levels

3 Strengthen immunization programmes

Strengthen immunization systems within Primary Health Care, to improve program resilience & resume the trajectory of the IA2030 goals & targets



HPV vaccines: Increasing adolescent vaccination

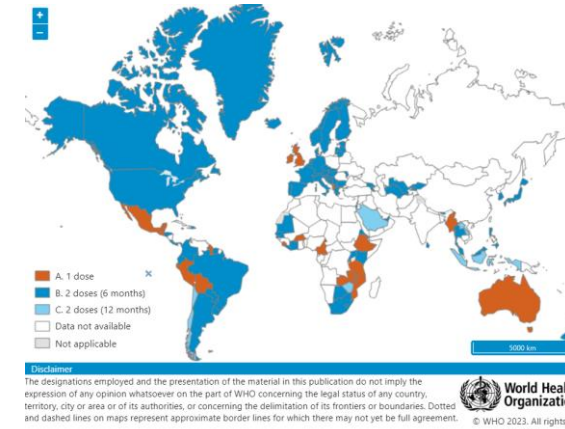
WHO Position Paper (Dec. 2022) recommended 1-dose schedule on HPV vaccine as an alternative option

HPV Policy setting

Set global policy and supporting countries on decision making of HPV vaccination through GNN workshops

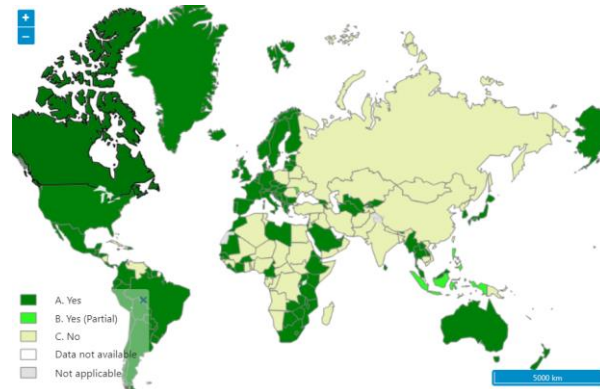


26 countries adopted to 1-dose schedule on HPV vaccination (orange)

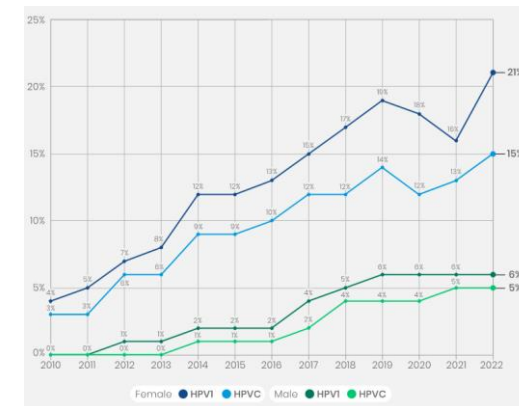


HPV Vaccine Introduction

135 countries have introduced HPV vaccine, 19 countries have newly joined in 2022-23.



Global HPV coverage has recovered to pre-pandemic levels (WUENIC 2022)



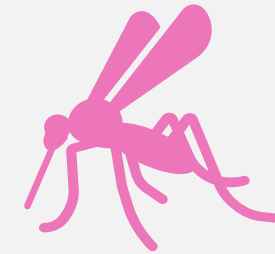
1. The framework: IA2030
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Opportunities: Roll-out of malaria vaccines

- 488,000 child deaths due to malaria
- In high burden areas, a child may get **sick with malaria multiple times per year**
- If untreated, an episode can **rapidly lead to severe malaria or death**

- **Malaria vaccination provides additional protection by reducing the number of malaria episodes – acting as a life insurance when access to prompt treatment is compromised**
- Important lessons from pilot implementation in Ghana, Kenya and Malawi:
 - High community demand and acceptance, resulting in high uptake
 - Resilient delivery platform, with good coverage despite external shocks such as COVID-19 pandemic, tropical storms, and floods
- Unprecedented demand by countries:
 - 17 countries approved to receive Gavi support – first introductions expected in Q1 2024
 - A second vaccine R21 available in large volumes



FLORIDA

Florida malaria cases baffle experts

"We regularly had this happen every couple of years before [2003]. So it's almost like, why hasn't this happened?" asked one expert.



It's possible someone contracted malaria while in a foreign country and then unwittingly spread it in America after a local mosquito bit them and then infected someone else. | James Gathary/CDC via AP Photo

By MIA MCCARTHY
08/20/2023 07:00 AM EDT



Locally transmitted malaria cases have been essentially non-existent in the United States for 20 years. Then a case popped up in Florida.

Strides in novel, game-changing delivery approaches: First clinical proof of concept for measles-rubella micro-array patches (MR-MAPs) in Gambian infants

- MR-MAPs could **dramatically improve equitable coverage** while simultaneously **reducing the carbon footprint** of immunization by:



Easing delivery, administration and disposal of MR



Reducing cold chain through improved thermostability



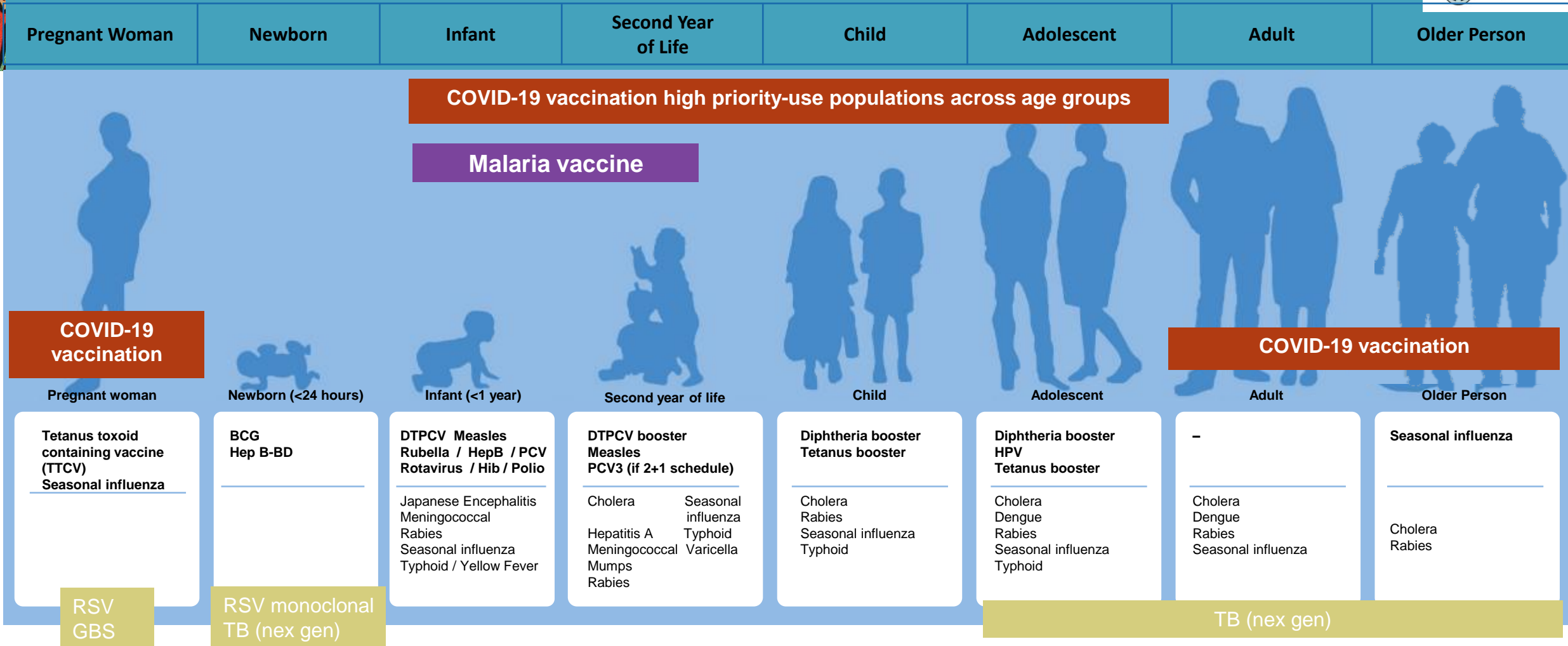
Minimizing environmental waste (lower ancillary supplies)

- In Gambian infants, immune responses to MR-MAP were **robust & comparable** to those generated by **subcutaneous injection**
- Countries** are strongly **interested** in MR-MAPs because their attributes can **overcome MR immunization barriers**
- Additional **investment** in clinical studies & manufacturing **is needed**



<https://micronbiomedical.com/micron-biomedical-announces-positive-measles-and-rubella-vaccination-results-from-first-clinical-trial-of-microarray-injection-free-vaccine-delivery-in-children/>
<https://www.who.int/news-room/events/detail/2023/06/21/default-calendar/development-for-vaccines-advisory-committee-june-2023>

COVID-19 vaccine as life-course immunization approach for existing and future vaccines



Vaccines recommended by WHO for all immunization programmes

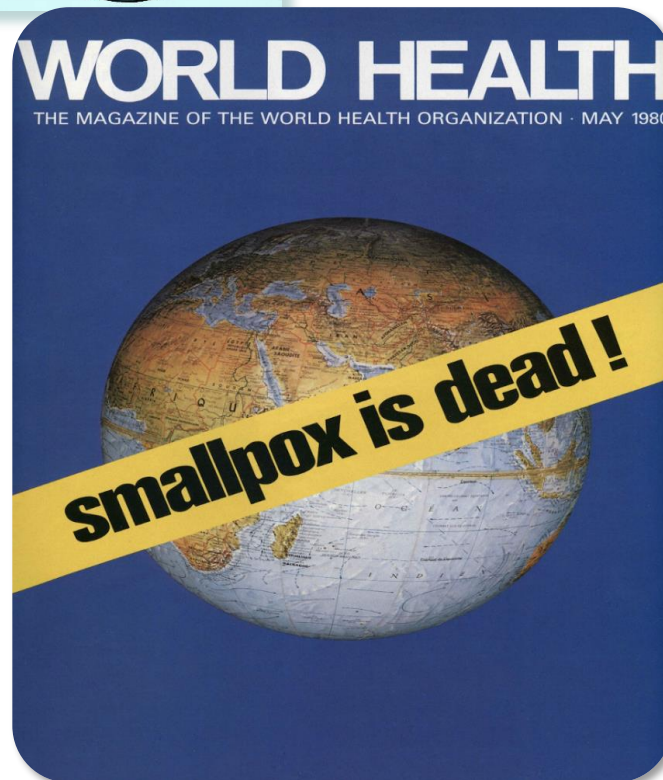
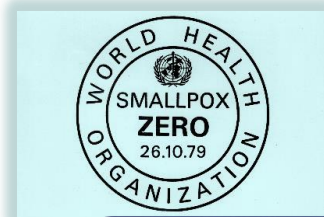
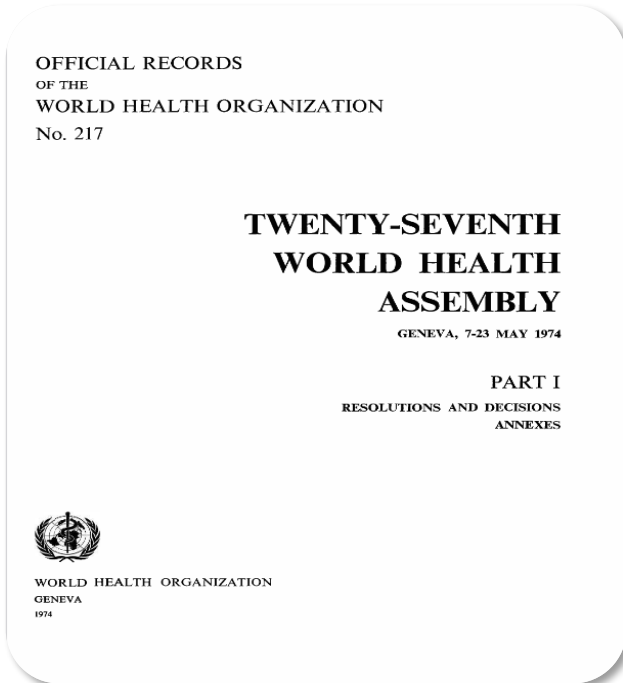
Vaccines recommended by WHO for certain regions/ high risk populations/ immunization programmes with certain characteristics

Vaccines in the pipeline RSV: Respiratory Syncytial Virus vaccine/monoclonal antibody, GBS: Group B Streptococcus vaccine, TB (nex gen): next generation of Tuberculosis vaccine

COMING SOON50 years since founding of EPI on 23 May 1974

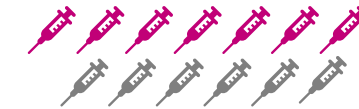
How will you celebrate in your country?

WHA Resolution 27.57



Context/ specific character istics

- Dengue
- Yellow Fever
- Typhoid
- Rabies
- Mumps
- Varicella
- JE
- Meningococcal disease
- Tick-borne encephalitis
- Cholera
- Hep A & E
- Influenza
- Malaria
- Smallpox/MPX
- Ebola



Universal

- HPV
- Rubella
- PCV
- Hib
- Rota
- Hep B
- Covid-19 (for adults)

Universal 1974

- BCG
- Diphtheria
- Tetanus
- Pertussis
- Measles
- Polio

Universal 1974

-
- BCG
 - Diphtheria
 - Tetanus
 - Pertussis
 - Measles
 - Polio
 - Smallpox



Thank You!

Ann Lindstrand MD, MPH, PhD

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UNICEF's Immunization Supply Chain Initiatives

Olamide Folorunso. Health Specialist, UNICEF Programme Group

October 17, 2023

UNICEF's Programmes and Supply Chain: Background









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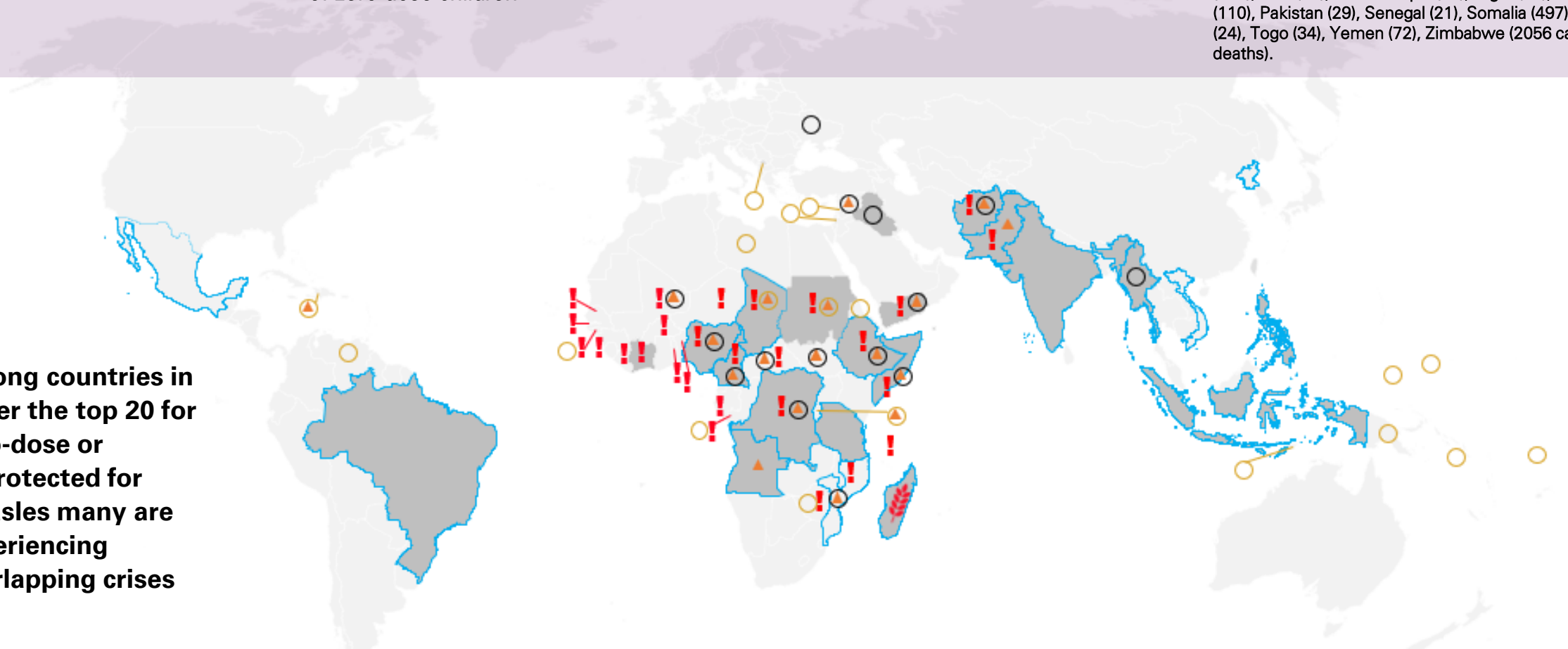
CHILD SURVIVAL CRISIS

Countries are facing overlapping crises including measles outbreaks, food, conflicts, humanitarian emergencies and climate change

-  Major food crisis²:
-  Institutional and Social Fragility⁴:
-  20* Countries with highest number of Children unprotected for measles¹
-  Conflict⁴:
-  20 Countries with highest number of zero-dose children¹
-  Reporting large measles outbreak (Rate/M)

Afghanistan (67), Benin (20), Burkina Faso (29), CAF (41), Cameroon (63), Chad (34), Comoros (24), Côte d'Ivoire (79), Congo (59), DRC (44), Ethiopia (37), Gabon (67), Gambia (39), Guinea (59), Guinea-Bissau (71), Liberia (340), Mali (70), Mozambique (21), Niger (41), Nigeria (110), Pakistan (29), Senegal (21), Somalia (497), Sudan (24), Togo (34), Yemen (72), Zimbabwe (2056 cases, 157 deaths).

Among countries in either the top 20 for zero-dose or unprotected for measles many are experiencing overlapping crises



¹ WUENIC Estimates <https://data.unicef.org/resources/immunization-coverage-estimates-data-visualization/>

² Food Security Information Network (FSIN); and Global Network Against Food Crises. 2022. 2022 Global report on food crises. Rome, Italy: Food and Agriculture Organization (FAO); World Food Programme (WFP); and International Food Policy Research Institute (IFPRI).

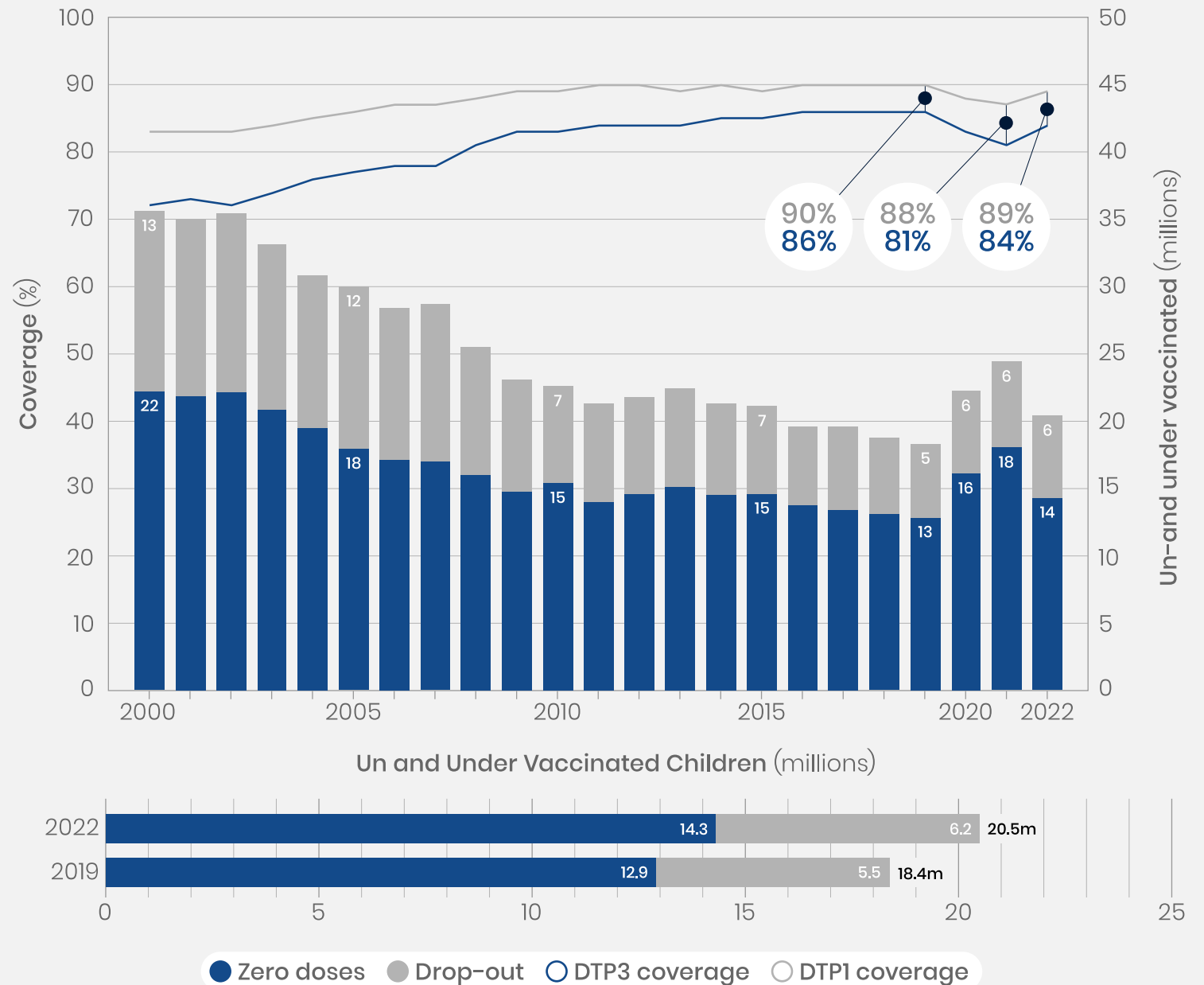
³ Source: IVB Database Based on data received 2022-06 - Surveillance data from 2021-05 to 2022-04 - Incidence: Number of cases / population * 1,000,000 - Population data: World population prospects, 2019 revision

⁴ Classification of Fragile and Conflict-Affected Situations, FY23 FCS List: <https://www.worldbank.org/en/topic/fragilityconflictviolence/brief/harmonized-list-of-fragile-situations>

* United States of America omitted from top 20 unprotected for measles

DTP global immunization coverage in 2022 partially recovered to 2019 levels

The number of “zero-dose children” – **improved from 18.1 in 2021 to 14.3 million**. However, this is **above pre-pandemic level of 12.9 million (2019)**.

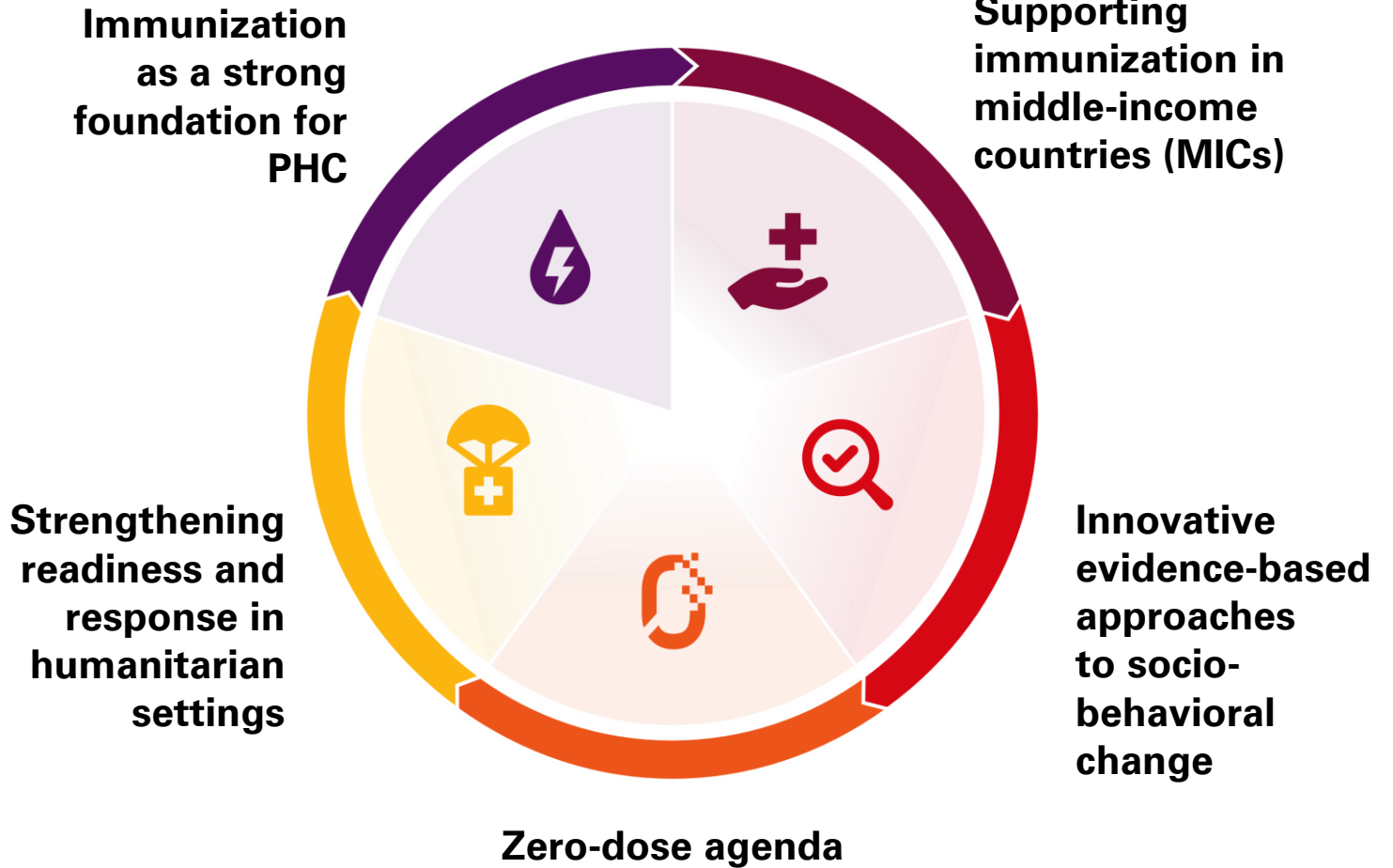


UNICEF's Immunization Roadmap



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UNICEF Immunization Roadmap to 2030 emphasizes 5 strategic shifts



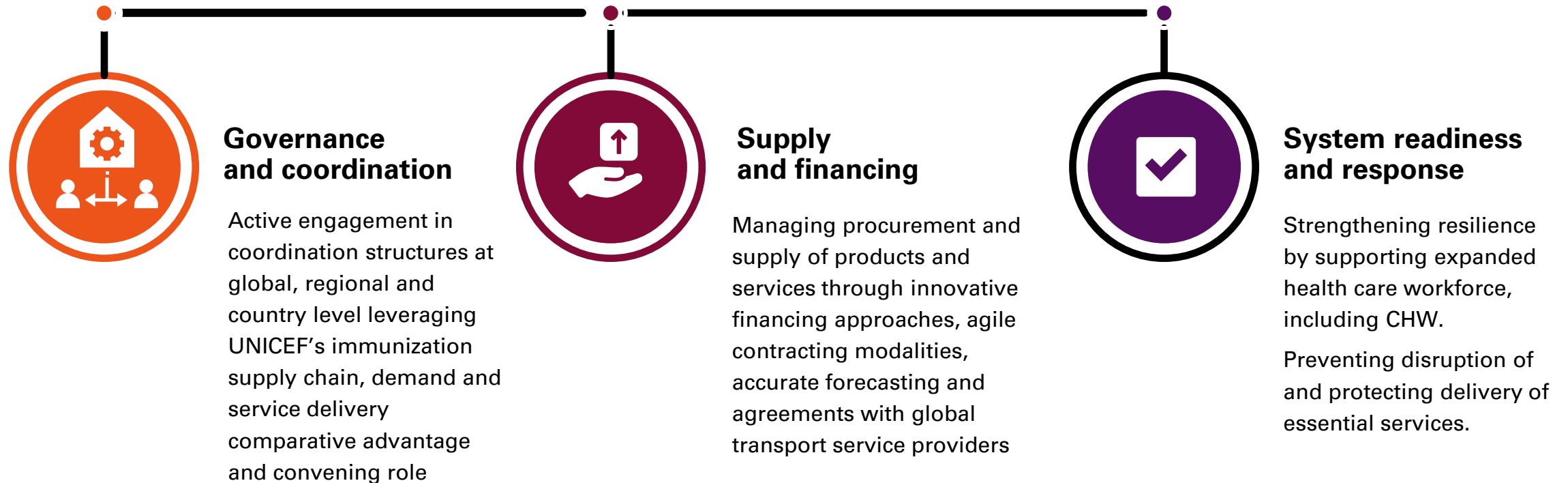
MULTI-SECTORAL APPROACHES

UNICEF will capitalize on its multi-sectoral nature to offer more integrated programming with immunization

WASH	Joint social behavior change communication in communities; Climate-resilient health facilities
EDUCATION	School-based health platforms, including Immunization, deworming, IFA, hygiene promotion
SOCIAL POLICY	Advocacy for expansion of domestic budgets for immunization and PHC, and cash/cash plus programmes encouraging vaccination
RMNCH, POLIO	'Multi-antigen' campaigns, Integrated outreaches
CHILD PROTECTION	Civil registration during immunization campaigns
NUTRITION	Integrated delivery of immunization and nutrition services

RESILIENCE BUILDING & PANDEMIC PREPAREDNESS

UNICEF will emphasize and employ efforts to prepare and respond to pandemics, outbreaks, and other types of disasters



UNICEF's Immunization Supply Chain Key Interventions



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The Big Catch-Up: Three-prong approach to immunization intensification

1 Catch-up missed children

Reach children who missed vaccination during 2020-2022, some of which was due to the pandemic (this includes the 2019 zero-dose and under-immunized children as part of the accumulated susceptible cohort)

2 Restore immunization programmes

Restore vaccination coverage in 2023 back to at least 2019 coverage levels

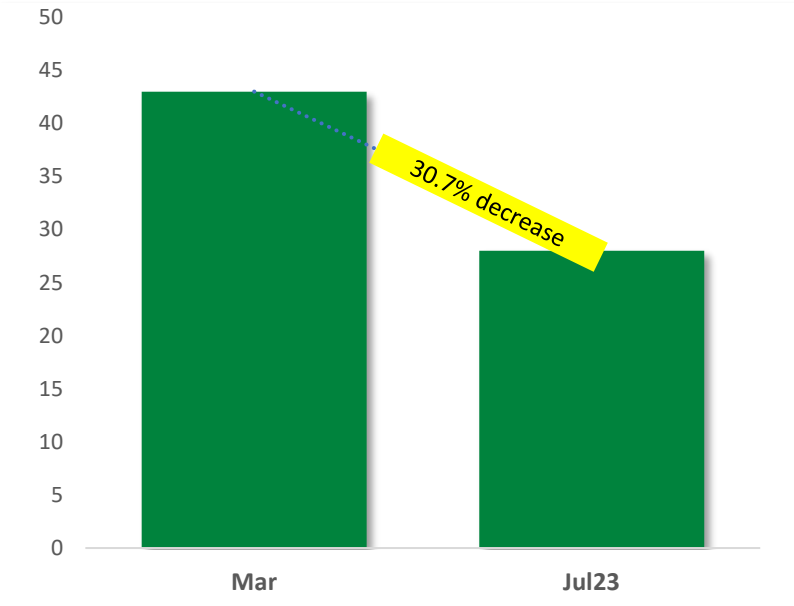
3 Strengthen immunization programmes

Strengthen immunization systems within Primary Health Care, to improve program resilience & resume the trajectory of the IA2030 goals & targets



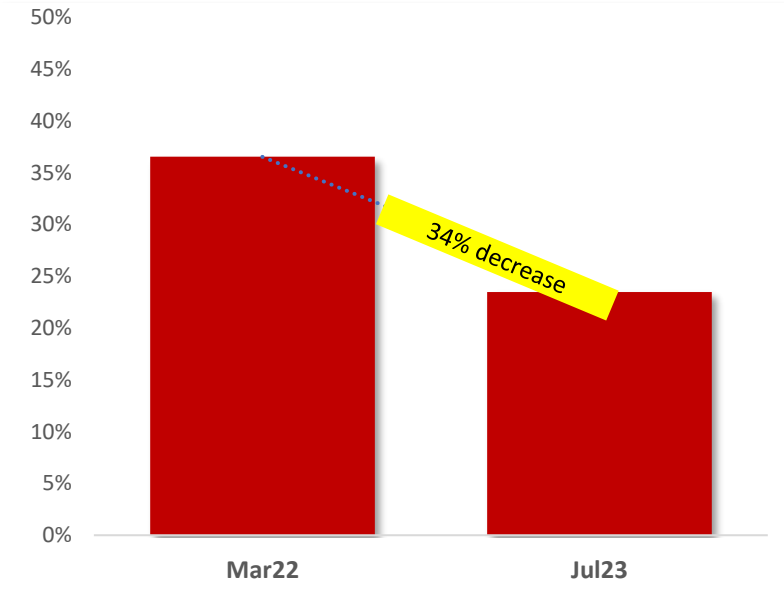
Investments in supply chain visibility is driving action at all supply chain levels to reduce stockouts

National Level



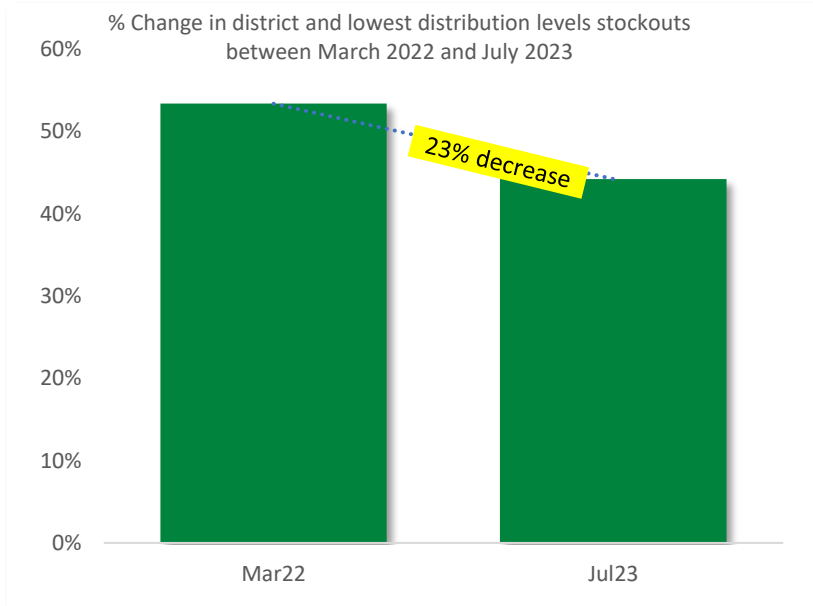
- As a result of increased data visibility, feedback loops, and responsive CO actions, the National stockouts decreased by over 30% between March 2022 and July 2023.
- The Number of countries reporting stockout of at least one routine antigen also decreased by over 30%.
- VMSs proactively supported NLWGs with data mgt, distribution, monitoring, supportive supervision and resolution of operational challenges.
- The decrease is despite tracking of additional vaccines (Malaria, HPV)

Regional Level



- RI Stockouts at the first subnational level declined by more than a third between March 2022 and July 2023
- Meanwhile, stock reporting at the first subnational level increased by 68% in the same period.
- Stock under stress and overstock incidents also decreased during this period.

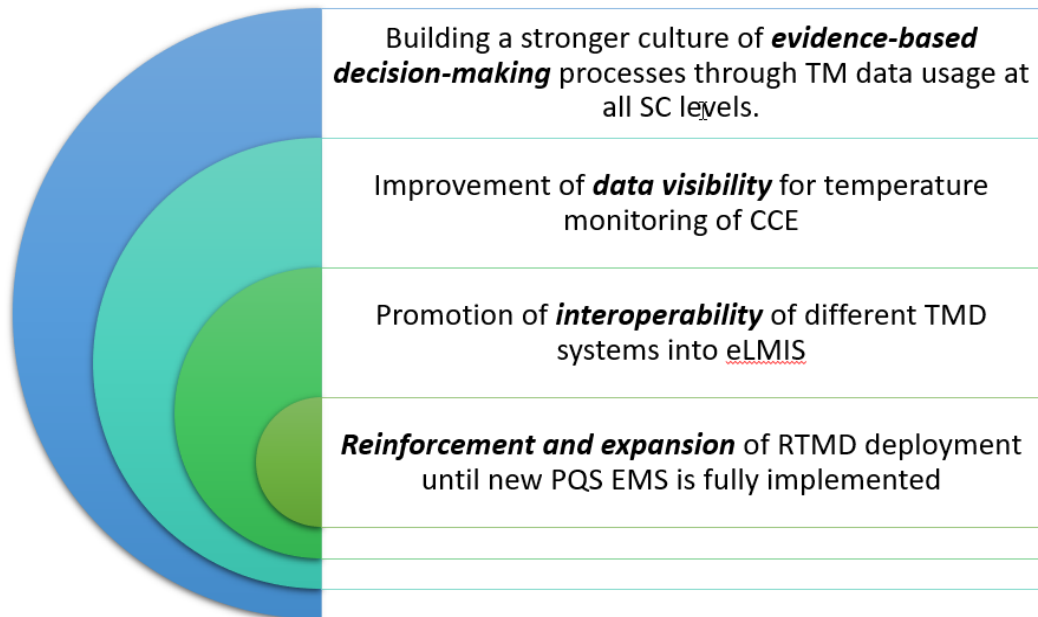
District Level



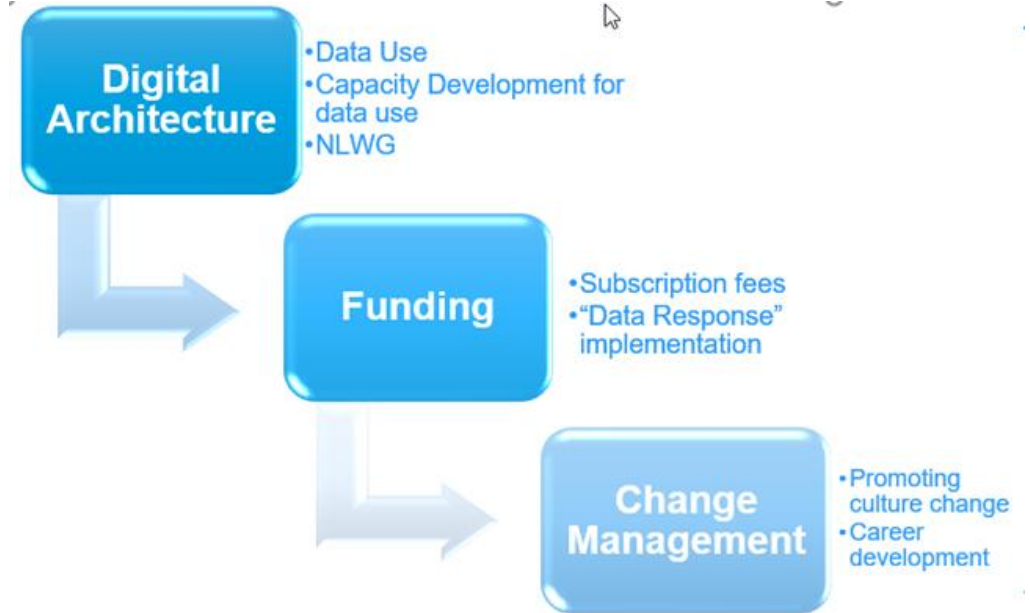
- District and LD stockouts decreased by over 23% between March 2022 and July 2023.
- Over 450% increase in the district and lowest distribution level reporting during the same period.
- Focus on expanding to additional stores, tracking reporting rates against targets.
- Increase data use in planning and decision making

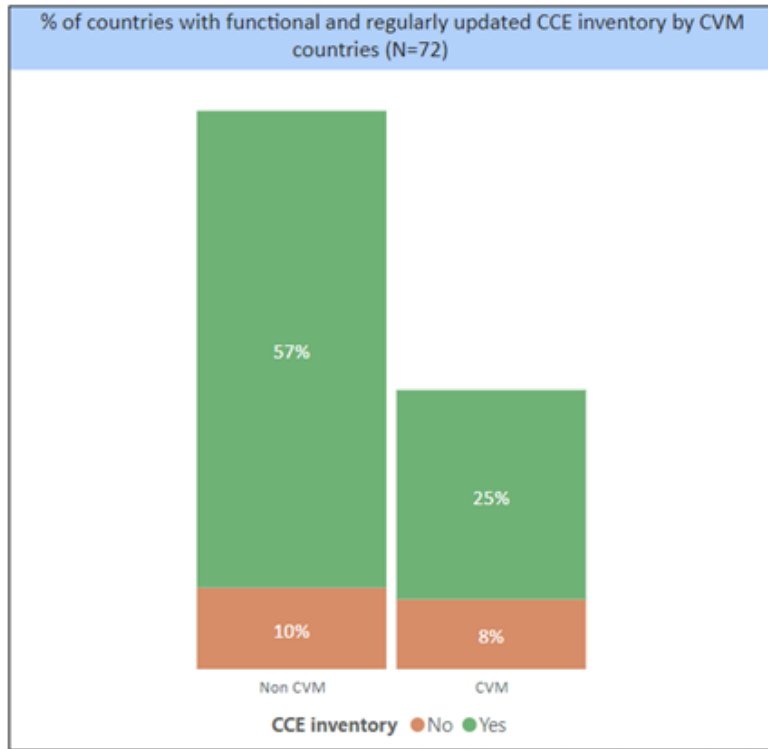
New CCE Performance Monitoring and Temperature Monitoring Strategy

CCE Data Integration and Temperature visibility central to new strategy



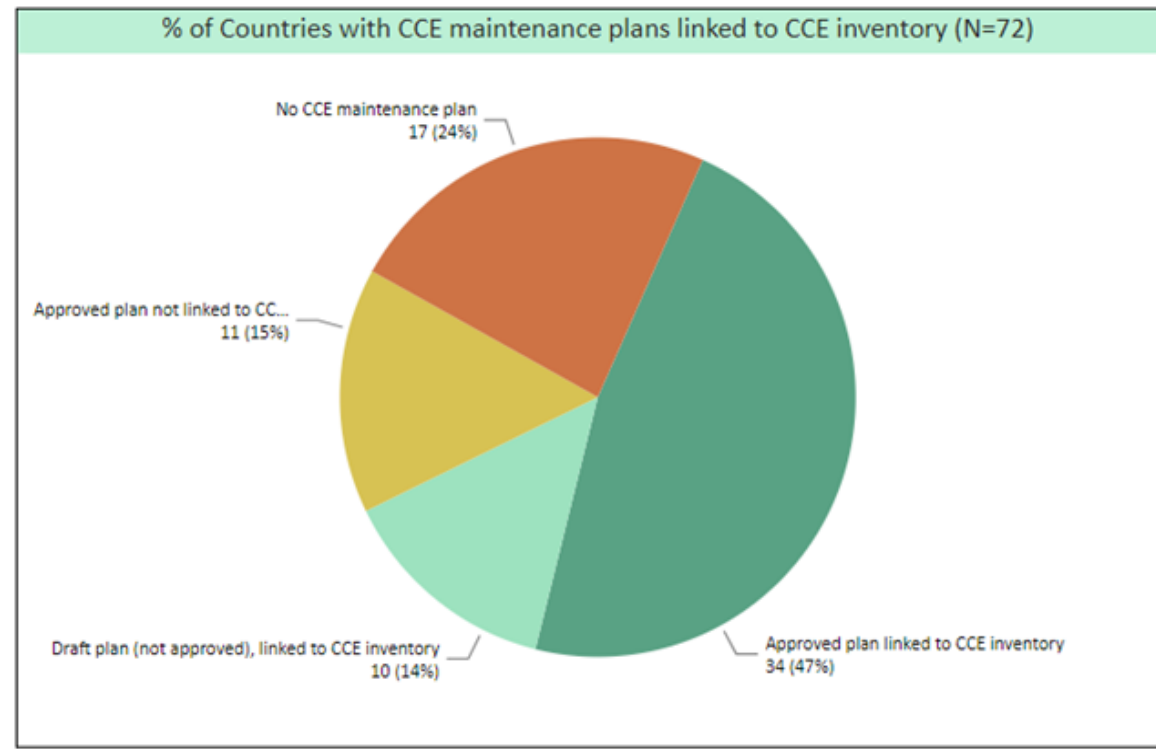
To strengthen temperature monitoring and consistent data usage, 3 fundamentals are key (Support will align with country's RTMD Maturity level)





80% of countries have functional CCI

- 85% of functional CCI are Excel based
- 60% of functional CCI only updated on yearly basis.



60% of countries have a maintenance plan linked to CCI, 15% have a plan (unlinked to CCI) while 24% have no plan

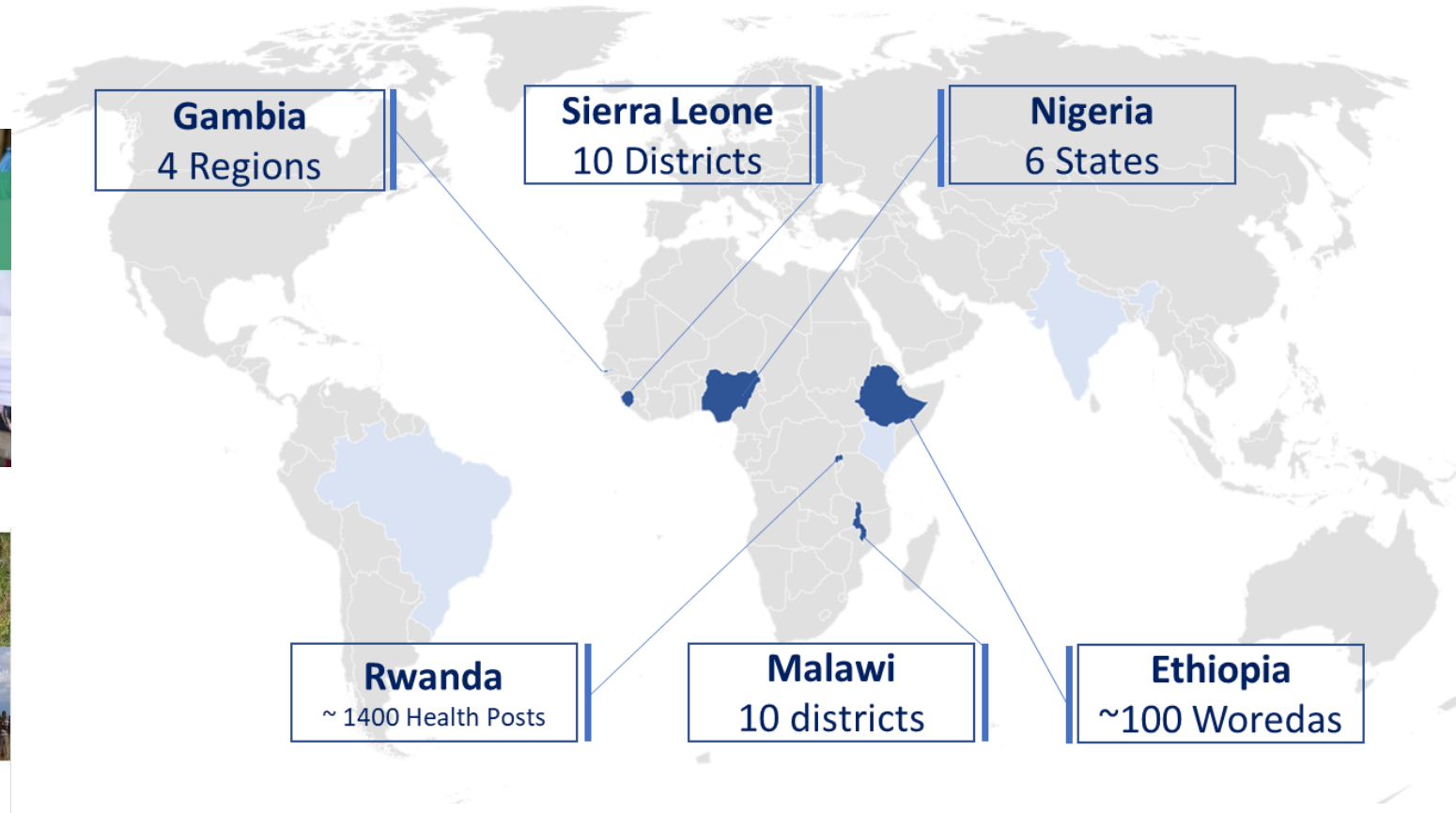
Optimal CCE Inventory tools and Digitalization
and critical to strengthening quality and efficiency of immunization programmes

Direct delivery of Routine Immunization Vaccines for EQUITY (DRIVE)

Sierra Leone



Nigeria



Implementation Final planning on-going
Early country engagements
India
Brazil
Kenya

“Low hanging fruits” for reduction of emissions by **70%**

Operations

Solarization / use of Renewable Energy hybrids can reduce total emissions by **25%**



Transportation

77 folds reduction in emissions for shipping vaccines by sea as compared to air, i.e., total emissions reduced by **20.5%**



Disposal

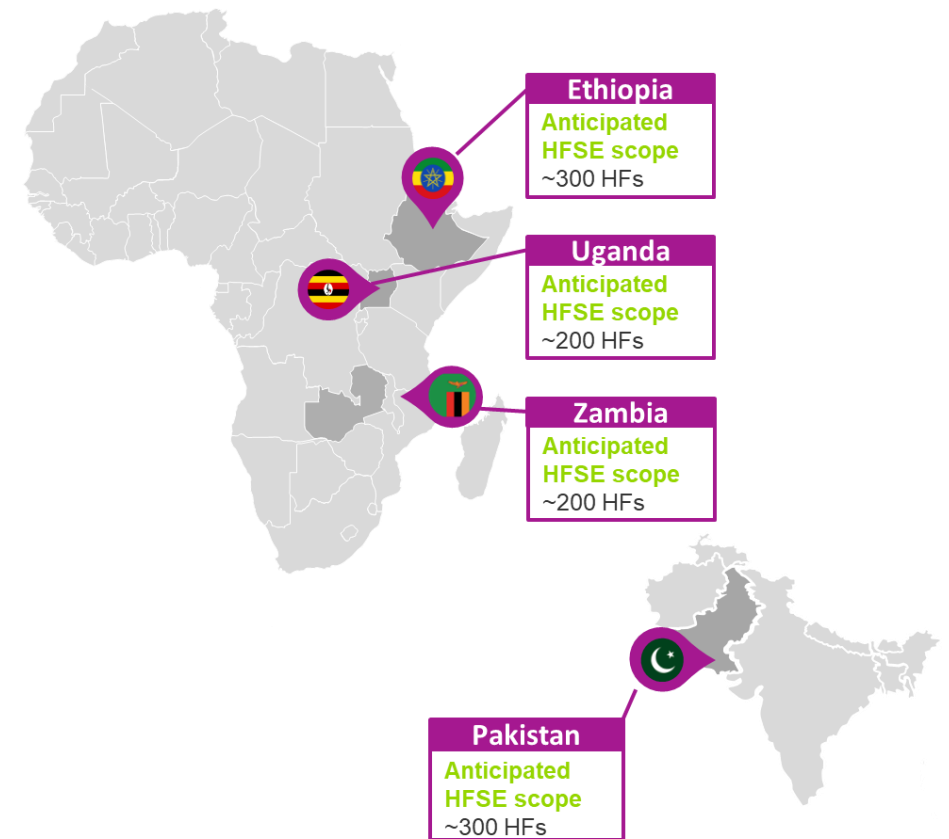
Upcycling of plastics as against incineration, into useful products, reduces total emissions **25%**



Progress on Health Facility Solar Electrification (HFSE) Learning Agenda

UNICEF has captured a solarization potential demand of about **30,000 PHC facilities** in 7 regions across 47 countries. UNICEF has set a target to solarize 30,000 primary healthcare facilities by 2030.

- UNICEF is working with WHO and partners to implement **HFSE Learning Agenda** in 4 countries
- With **30M USD funding** from GAVI, about **1,000 health facilities** are to be provided with reliable electricity through solar PV systems **by 2025**.
- Currently, country engagement are in progress to initiate the ground implementation activities
- HFSE Learning Agenda Kick-Off Meeting held





Thank You!

Olamide Folorunso, ofolorunso@unicef.org



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Panama City, Panama | October 16-19, 2023

Immunization Programmes That Leave No One Behind

www.technet-21.org

Immunization programmes that leave no one behind

Karan Sagar (Head, Comprehensive Vaccine
Management, Gavi)

Gavi Alliance Supply Chain Strategy 2021-25



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GAVI 5.0 IMMUNIZATION SUPPLY CHAIN STRATEGY (2021–2025)

TO ADDRESS THIS...

The Challenge

Inconsistent availability of high-quality vaccines and limited reach of vaccine supply chains in underserved populations threaten access as well as immunization coverage and equity outcomes, and put vaccine investments at risk



WE FOCUS ON...

Investment Priorities & Expected Outcomes



Data Visibility & Use

▶ to make real time data available at all levels of the SC and encourage data use by decision makers to improve SC performance



Strategic Planning

▶ to a country-led strategy informed by people's needs, that is adequately financed



System Optimization & Segmentation

▶ to design and optimize supply chains that reach everyone and minimize cost and waste



Capacity Development & Professionalization

▶ to adequately staff all levels of iSC with motivated and competent workforce



Fundamental Infrastructure

▶ to ensure vaccines are stored and transported in well-functioning equipment to ensure quality;



Smart Integration & Harmonization

▶ to intergrate and harmonize iSCs with other public health supply chains, program functions and overall health system to maximize resources



TO ACHIEVE...

Impact Goals

- ▶ Extended Reach
- ▶ Vaccine Availability
- ▶ Efficiency
- ▶ Resilience
- ▶ Responsiveness
- ▶ Sustainability



SUPPORTED BY...

Enablers

Country Leadership, Governance & Stewardship

Domestic & International Funding

Partner Alignment & Coordination

Innovation

Private Sector Engagement

AND FULFILL...











Vision

Strong supply chains enable **DELIVERY OF LIFE-SAVING VACCINES TO EVERY PERSON** when needed, no matter where they are



What are practical approaches for the strategy to get implemented into action?

Investment Priorities & Areas of Opportunity within the Investment Priorities

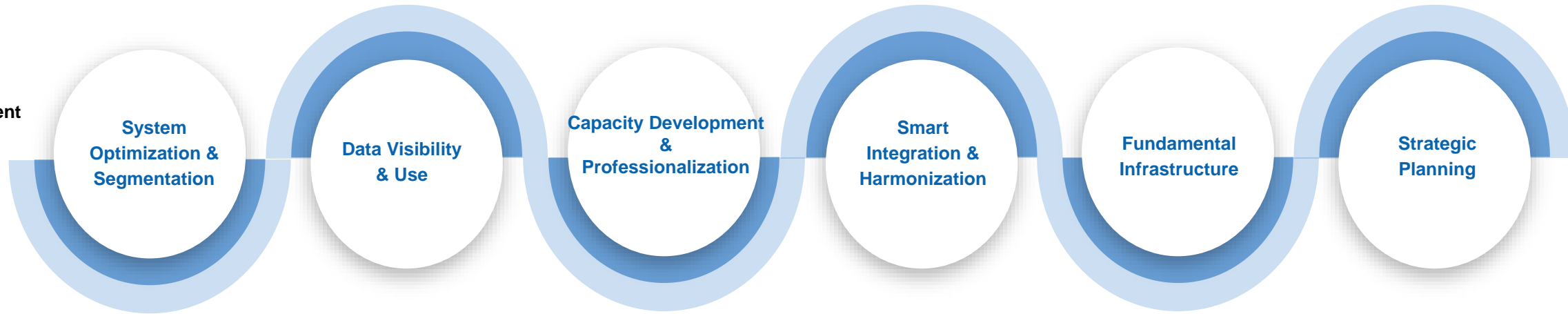
Data visibility and use	Capacity development and professionalization	Fundamental infrastructure	Strategic planning	System optimization and segmentation	Smart integration and harmonization
Digitize and integrate information systems (eLMIS, Barcoding, Track & Trace) 	Supply chain competencies and structures	Continue support to maintain adequate CCE capacity 	Conduct comprehensive supply chain planning 	Continuously review and optimise existing systems	Conduct analysis and identify opportunities for integration
Collect, analyse, and use data 	Strengthen and apply skills 	Integrate temperature and other SC data	Consider various financing approaches	Improve processes, from forecasting to waste management 	Develop guidance and evidence for integration
Active vaccine & syringe stock management, including wastage tracking & mitigation 	Identify effective incentives & motivators	Invest in appropriate SC resources, either building capacity or outsourcing	Strengthened national and subnational governance mechanisms 	Apply approaches from other settings and sectors	Connect broad community of SC actors at national and sub-national levels 
Establish a monitoring & accountability framework	Create healthy work environments			Strengthen data-driven forecasting and agile supply planning 	

 The comprehensive vaccine management approach supports attainment of the iSC 5.0 strategic vision, and emphasizes a few areas of focus for targeted strengthening within the investment priorities

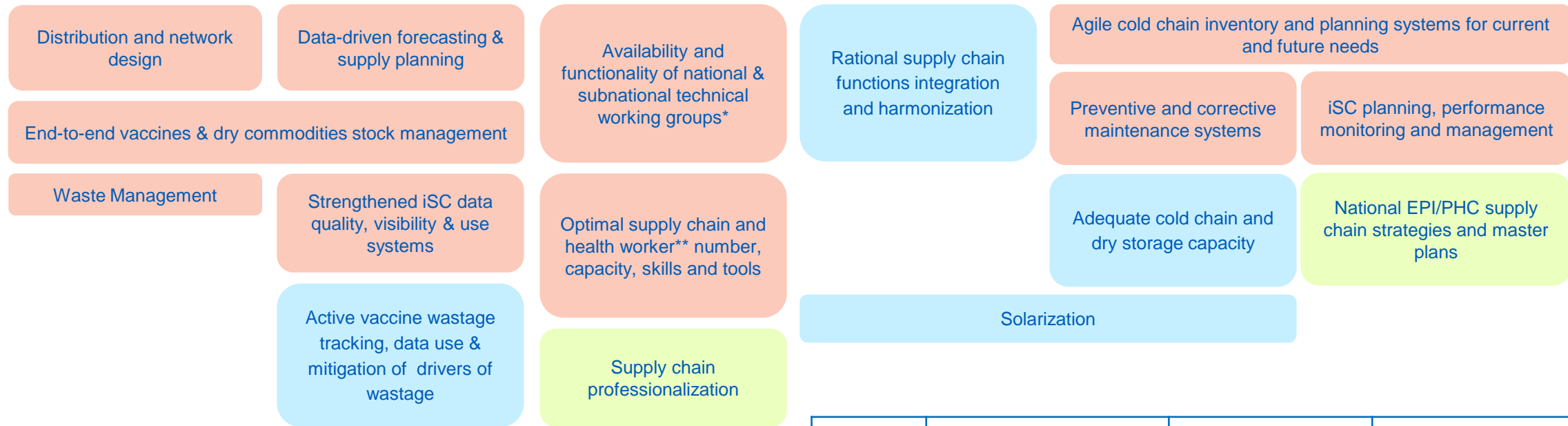
Please Note: Practical actions for each of the investment priority areas are included in the longer version of this deck.

The CVM approach pivots delivery of all investment areas for Gavi 5.1 and contributes to the achievement of the Alliance strategic goals

iSC Strategy Investment Areas



CVM Approach Prioritization



	Priorities	Potential contribution to availability, ZD reach	Potential contribution to vaccine quality	Potential contribution to supply chain efficiency
	CVM Priority One	Priority One	High	High
	CVM Priority Two	Priority Two	Medium	Medium
	CVM Priority Three	Priority Trois	Low	Low

* Including oversight on annual work planning and supportive supervision

** Represents all vaccine handling and management staff



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Immunization programmes that leave no one behind

Kelly Hamblin (Senior Program Officer,
Immunization, Bill & Melinda Gates
Foundation)

Where we're going

Our investments in immunization are rigorous in tracking toward our desired results by 2030

16.2_m

Future deaths averted

50%

Reduction in zero-dose children



Eradication of Polio

How we are going to get there

How BMGF is working to address these challenges and where we think we can have the greatest impact



Reach Zero Dose Children

Accelerate HPV vaccine coverage

Improving coverage for measles vaccine

Routine Immunization strengthening in high-risk polio areas

We have a responsibility
to use our resources to create a
world where everyone has the
opportunity to lead a healthy
and productive life.



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Immunization programmes that leave no one behind

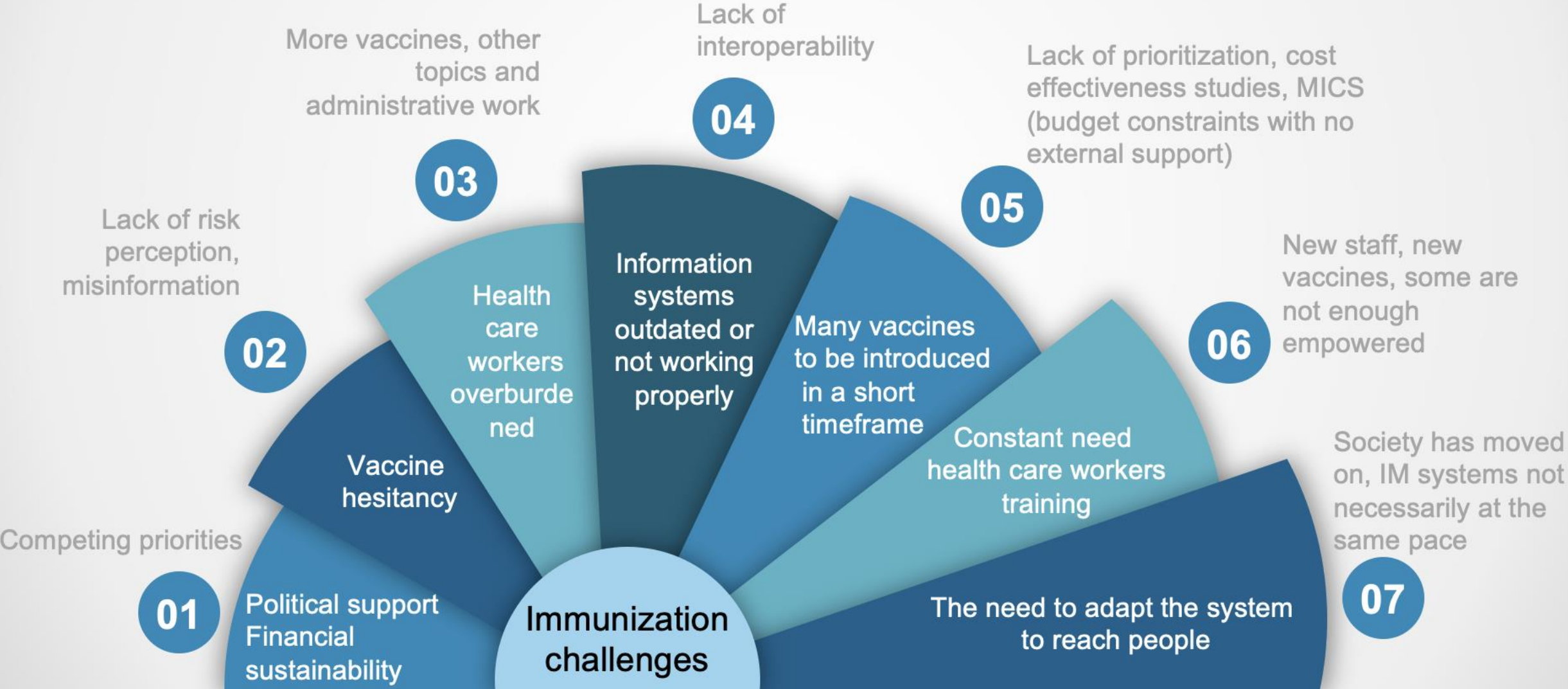
Daniel Salas (Executive Manager,
Comprehensive Immunization, PAHO)

Challenges and what is needed

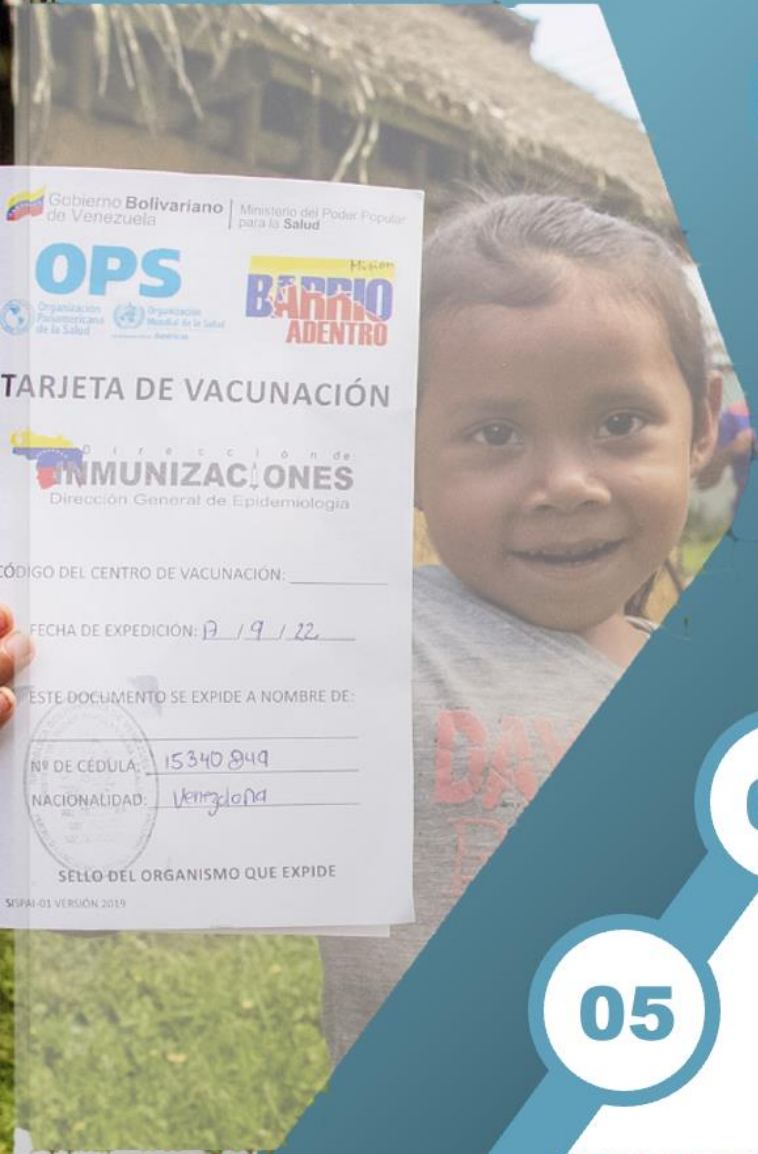


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Current Immunization challenges in the Americas



What we need Inside the Immunization Program



01

Strong governance / partnership integration

02

Information systems, logistics and EVM continuous quality improvement

03

Timely and effective communication / misinformation / behavioral change

04

VPD and ESAVIs surveillance integration

05

Personnel constantly trained, and empowered to positively advocate

What is the Region of the Americas
working on?



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Progress towards REGIONAL specific targets



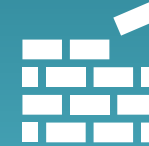
Improve management of the EPIs through trainings and workshops

Courses:
7 available
6 upcoming



Include NITAGs in the decision-making process to strengthen operations of EPI

4 ongoing activities and self-assessment in several countries



Strengthen the infrastructure of EPIs (bolstered by COVID-19 vaccine roll-out)

Including electronic registries, cold chain, ESAVI surveillance network, others

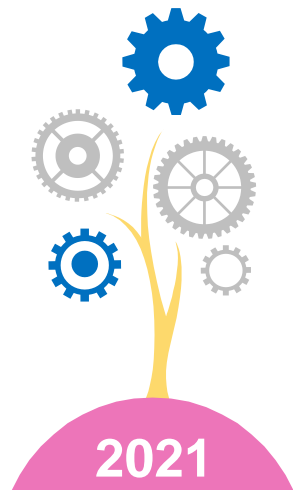


Integrate COVID-19 immunization into the EPI

4 ongoing actions including EPI monitoring performance tool and dashboard

01 AMRO GB Resolution adapting IA2030

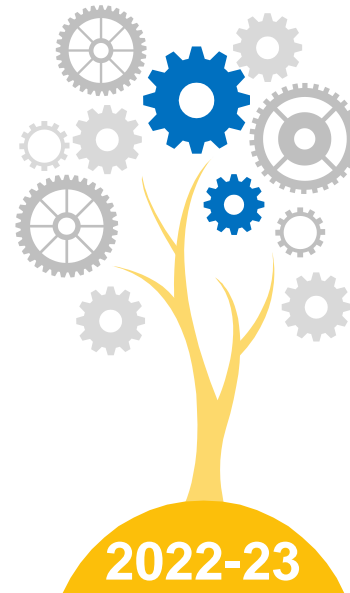
“Reinvigorating immunization as a public good for universal health”



Pandemic hiatus

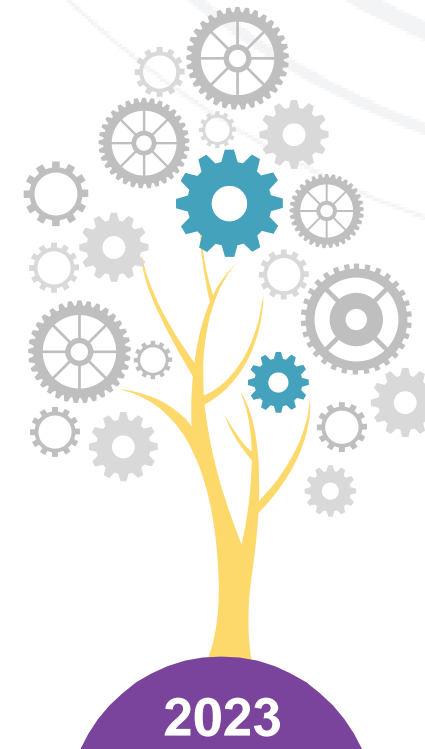
02 Developing of the new RIAP – aligned to the IA and AMRO resolution

Definition and validation of objectives, indicators and lines of action by 3L



03 RIAP ready (4th Q-23)

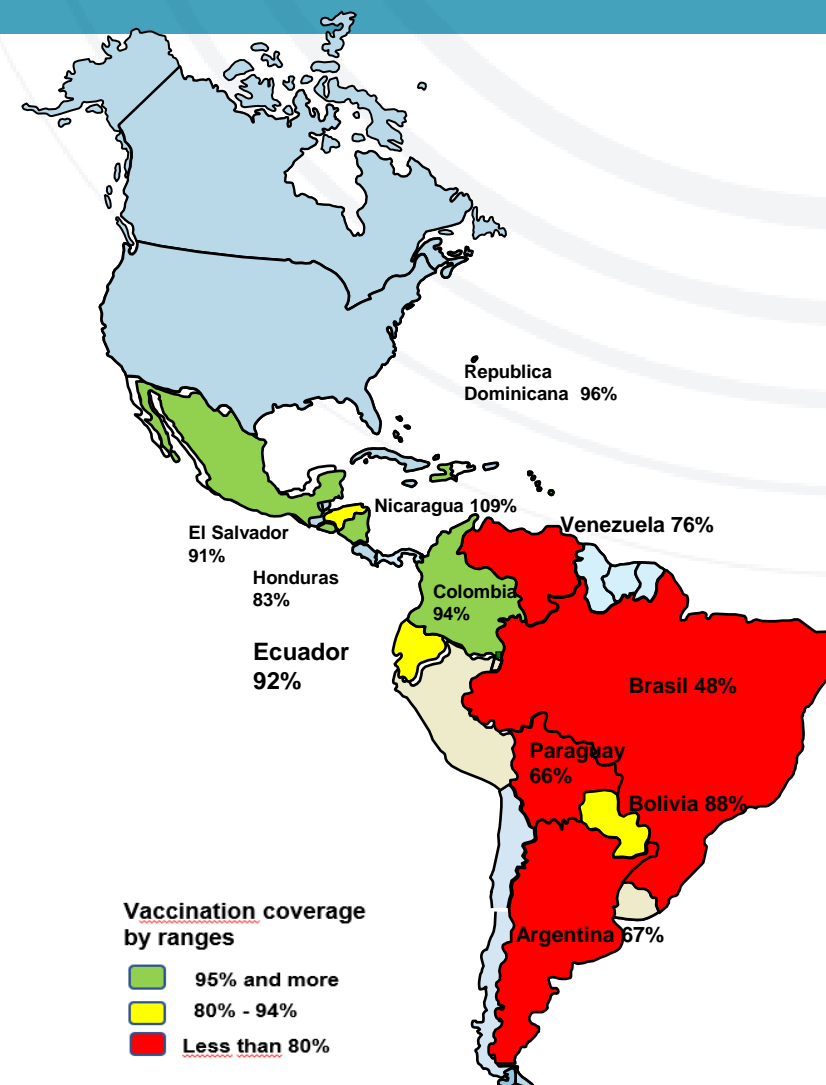
Constant follow-up starting in 2024 and onwards



Key activities to support the big Catch-up

Follow-up campaigns to sustain measles/rubella, and polio elimination in the Americas, 2021-2023.

Year	# of countries	Millions vaccinated	Age (years)
2021	4	19.9	1 to 10
2022	7	12.9	1 to 6
2023	1	3.2	1 to 12



In total, **more than 36 million** children were vaccinated against measles/rubella and polio in the period 2021-2023.

55 million people vaccinated, with 60 million doses applied*

Reached over (people):

46 million for FLU

Including pregnant women, health workers and older adults, in 21 countries

2.8 million for MR

Including children and adults

2.8 million for polio

Children

2.6 million for DPT

Including pregnant women, and children

4 million for COVID-19

*Based on 26 national reports

NEXT STEPS: Regional PRIORITIES for 2023 and 2024

Support member states to the:

01

- Implementation and follow-up of the **RIAP (IA2030)**.

02

- Implementation the **new performance monitoring tool – action plan**

03

- Implementation of strategies and modern tools to find the unvaccinated and increase the coverage.



Thank You!