Strengthening immunization to achieve the goals of the global vaccine action plan

Draft resolution proposed by Australia, Brazil, Burkina Faso, Colombia, Ecuador, Malaysia, Panama, Philippines, Thailand and Viet Nam

The Seventieth World Health Assembly,

PP1 Having considered the report on the global vaccine action plan;¹

PP2 Recalling resolutions WHA65.17 (2012) and WHA68.6 (2015) on the global vaccine action plan; and resolution WHA67.23 (2015) on health intervention and technology assessment;

PP3 Welcoming the declaration by the International Expert Committee for Documenting and Verifying Measles, Rubella and Congenital Rubella Syndrome Elimination, that the Member States in the Region of the Americas have achieved the interruption of endemic transmission of both rubella and measles viruses² in 2015 and 2016, respectively;

PP4 Welcoming the validation of the elimination of maternal and neonatal tetanus in all districts in all 11 Member States of the South East Asia Region;

PP5 Having considered the 2016 assessment report from the Strategic Advisory Group of Experts on immunization on the implementation of the global vaccine action plan and progress towards its stated strategic objectives and goals;³

PP6 Noting that although many countries have achieved the 2015 goals of the global vaccine action plan, and that others are making substantial progress, indicating that while the goals and targets are ambitious, they are achievable, 2016 assessment report from the Strategic Advisory Group of Experts on immunization concluded that progress is not on track and that only one of six mid-decade targets was met;

¹ Document A70/25.
² See document CD55/INF/10, Rev.1.
Noting the progress made on the introduction of new vaccines and the impact that these vaccines have at the individual level and, when high vaccination rates are achieved, at the population level, in reducing morbidity and/or mortality from vaccine-preventable diseases, such as pneumonia, diarrhoea and cervical cancer;

Concerned that at the mid-point of the Decade of Vaccines (2011–2020), progress toward the goals of the global vaccine action plan to eradicate polio, eliminate measles and rubella, eliminate maternal and neonatal tetanus, and increase equitable access to life-saving vaccines is too slow;

Noting that although Member States in all six WHO regions have measles elimination goals, and that three regions have rubella elimination goals, additional efforts should be invested to reach measles and rubella elimination;

Recognizing the important contribution of vaccines and immunization to: improving the health of populations; achieving the ambitious Sustainable Development Goals; outbreak preparedness and response, including in respect of outbreaks involving emerging pathogens; and addressing antimicrobial resistance;

Recognizing that strong health systems and integrated routine immunization programmes that are well coordinated across other relevant sectors contribute to achieving immunization goals and targets, and universal health coverage;

Recognizing the significant progress achieved towards polio eradication and the significant contribution of the polio-related assets, human resources and infrastructure, which should be transitioned effectively, to the strengthening of national immunization and health systems;

Recognizing the need for enhanced international cooperation aimed at in a sustainable manner, strengthening the capacities of developing countries to achieve the goals of the global vaccine action plan,

URGES Member States:¹

1 to demonstrate stronger leadership and governance of national immunization programmes by:

(a) increasing the effectiveness and efficiency of national immunization programmes, as an integrated part of strong and sustainable health care systems;

(b) allocating adequate financial and human resources to immunization programmes according to national priorities;

(c) strengthening national processes and advisory bodies for independent, evidence-based, transparent advice including on vaccine safety and effectiveness, such as health intervention and technology assessments and/or National Immunization Technical Advisory Groups working in collaboration with national regulatory authorities;

¹ And, where applicable, regional economic integration organizations.
(d) strengthening mechanisms to monitor and efficiently manage vaccination programme funds at all levels;

(e) making up-to-date and accurate information on the effectiveness and safety of vaccines publicly available;

(f) strengthening systems to monitor and address adverse events following immunization;

(g) promoting awareness-raising campaigns on immunization, underlining public health benefits and vaccine safety and effectiveness;

(h) strengthening the immunization systems, procedures, and policies that are necessary to achieve and sustain high immunization coverage;

(i) reviewing periodically, through the National Immunization Technical Advisory Groups or equivalent independent groups, the progress made, including immunization coverage, lessons learned and possible solutions for dealing with remaining challenges;

(j) continuing to report on progress to the regional committees, as urged in resolution WHA65.17;

(2) to ensure use of up-to-date data including where possible sex-disaggregated data on immunization coverage to guide strategic and programmatic decisions that protect at-risk populations and reduce disease burden;

(3) to strengthen and sustain surveillance capacity by investing in disease detection and notification systems, routine analysis and data reporting systems;

(4) to expand immunization services beyond infancy to cover the whole life-course, as appropriate, guided by evidence, including burden of diseases, cost effectiveness, budget impact assessment and system capacities and using the most appropriate and effective means of reaching the other age groups and high-risk populations with immunization and integrated health services;

(5) to strengthen international and national actions to ensure the application of the International Health Regulations (2005), which aim to prevent, protect against, control and provide a public health response to the international spread of diseases;

(6) to mobilize domestic financing, as appropriate, in order to sustain the immunization gains achieved through the support from the Global Polio Eradication Initiative and the GAVI Alliance;

(7) to continue to strengthen international cooperation to achieve the goals of the global vaccine action plan, including by enhancing sustainable, national and regional manufacturing capacity for affordable vaccines and technologies through collaboration and exchange, as appropriate;
REQUESTS the Director General:

(1) to continue supporting countries to achieve regional and global vaccination goals;

(2) to advocate in national and international forums in support of the urgency and value of accelerating the pace of progress toward achieving the goals of the global vaccine action plan by 2020, including, addressing the nine recommendations made by the Strategic Advisory Group of Experts on Immunization in their 2016 assessment mid-term review of the Global Vaccine Action Plan;

(3) to ensure that accountability mechanisms for monitoring global and regional vaccine action plans are fully implemented;

(4) to support Member States in strengthening National Technical Advisory Group (NITAG) or equivalent mechanisms cooperating with regulatory authorities to inform national decisions based on national context and evidence to achieve national immunization goals;

(5) to collaborate with all key partners, including civil society organizations, in order to assess how their work complements national routine immunization systems and the implementation of costed national immunization plans and targets;

(6) to continue working with all partners to support research, development and production of vaccines against new and re-emerging pathogens;

(7) to continue to strengthen the WHO prequalification programme and provide technical assistance to support developing countries in capacity building for research and development, technology transfer, and other upstream to downstream vaccine development and manufacturing strategies that foster proper competition for a healthy vaccine market;

(8) to continue working with all parties to support use of joint procurements and other mechanisms to increase efficiency, cost effectiveness and sustainability of vaccine supply;

(9) to continue working with all parties to support research and development, especially in developing countries, for supply chain innovations and vaccine–administration technologies, to increase the efficiency of vaccine delivery, as appropriate;

(10) to cooperate with, as appropriate, international agencies, in accordance with their respective mandates, donors, vaccine manufacturers and national governments\(^1\) in order to overcome barriers to timely and adequate access to affordable vaccines of assured quality for all, and to implement effective preventive measures for the protection of health workers including in public health emergencies of international concern and in the specific context of humanitarian crises;

\(^1\) And, where applicable, regional economic integration organizations.
(11) to report to the Seventy-third World Health Assembly through the Executive Board, on the epidemiological aspects and feasibility of, and potential resource requirements for, measles and rubella eradication, taking into account the assessment of the Strategic Advisory Group of Experts (SAGE) on Immunization;

(12) to continue to monitor progress annually and to report to the Health Assembly, through the Executive Board, as a substantive agenda item in 2020 and 2022 on the achievements made against the 2020 global vaccine action plan goals and targets.