

Global vaccine action plan

Defeating meningitis by 2030 Meningitis prevention and control

Report by the Director-General

INTRODUCTION

1. The Executive Board at its 146th session considered a report on the global vaccine action plan.¹ The Board adopted decision EB146(6) (2020) on meningitis prevention and control, in which it requested the Director-General to finalize, in consultation with Member States and relevant stakeholders, the development of a draft global strategy to defeat meningitis by 2030 to be submitted for consideration by the Seventy-third World Health Assembly.

2. The Board also decided to take note of ongoing discussions on the draft resolution contained in the Annex to decision EB146(6), and to encourage Member States to finalize this work, in order for the draft resolution to be duly considered by the Seventy-third World Health Assembly.

EXECUTIVE SUMMARY

A CALL FOR ACTION

3. Meningitis is deadly and debilitating, striking fast with serious health, economic and social consequences, and affecting people of all ages in all countries of the world. Bacterial meningitis can cause epidemics, lead to death within 24 hours, and leave one in five persons affected with lifelong disability after infection. Many cases and deaths are preventable through vaccination, but progress in defeating meningitis lags behind other vaccine-preventable diseases.

4. In 2017, representatives from governments, global health organizations, public health bodies, academia, the private sector and civil society united around a call for action towards defeating meningitis. In response, WHO, together with global partners and experts involved in meningitis prevention and control, took the leadership in developing a global strategy that sets forth a vision and road map to defeat meningitis by 2030.

5. In 2019, an extensive and broad-based consultation process took place, both in-person and online, which led to the collective development of a draft global road map, outlining the strategy. In response to the request made to the Director-General in decision EB146(6), to finalize the development of the

¹ Document EB146/8; see also the summary records of the Executive Board at its 146th session, sixth meeting, section 2.

strategy, the Secretariat organized an in person session with Member States followed by an online consultation for additional feedback, as well as a consultation with stakeholders, held in Geneva on 25 and 26 February 2020.

6. This report presents the key elements of the draft global road map for defeating meningitis by 2030.¹ The draft global road map positions meningitis prevention and control within the wider context of immunization, primary health care strengthening and global health security.

SCOPE

7. This first draft global road map on defeating meningitis sets out a path to tackle the main causes of acute bacterial meningitis (meningococcus, pneumococcus, haemophilus influenzae and group B streptococcus). This focus is based on: evidence of the worldwide burden of disease due to these four organisms, which also cause sepsis and pneumonia and were responsible for over 50% of the 290 000 deaths from all-cause meningitis in 2017; and the impact that this draft global road map could have on diminishing the burden of disease by 2030, since effective vaccines are available (now or in development) that protect against disease caused by all four organisms. Although the focus of this draft global road map is not on other important causes of meningitis, such as tuberculosis, cryptococcus, enteric bacteria and viruses such as enterovirus, several goals directed at reducing the burden of disease are applicable to all causes of meningitis.

VISION AND VISIONARY GOALS

8. The draft global road map sets a vision for 2030 **“Towards a world free of meningitis”**. As meningitis has so many causes, it cannot be eliminated or eradicated. Although there will be no “world free” moment for meningitis, there will be a commitment to get as close to that status as possible. The draft global road map therefore aims to defeat meningitis as a public health threat, substantially reducing the number of cases and keeping that number as low as possible.

9. The three visionary goals of the draft global road map to be achieved by 2030 are to:

- (1) eliminate bacterial meningitis epidemics;
- (2) reduce the number of cases and deaths from vaccine-preventable bacterial meningitis;
- (3) reduce disability and improve quality of life after meningitis due to any cause.

The visionary goals are fully aligned with efforts to achieve universal health coverage and the drive for expanded primary health care, with equity as a guiding principle.

PILLARS, STRATEGIC GOALS, KEY ACTIVITIES AND MILESTONES

10. Achieving the three visionary goals of the draft global road map will require a focus on five critical pillars setting out the interventions required, namely: prevention and epidemic control; diagnosis

¹ Defeating meningitis by 2030: a global road map. Available at <https://www.who.int/immunization/research/development/DefeatingMeningitisRoadmap.pdf> (accessed 16 March 2020).

and treatment; disease surveillance; support and care for people affected by meningitis; and advocacy and engagement.

11. Each pillar sets out strategic goals, key activities and specific milestones to be achieved in order to reach these visionary goals. While serving to organize action, it is clear that the five pillars are interconnected: diagnosis is closely linked to surveillance, surveillance informs prevention and epidemic control, support and care for patients and families should commence during treatment at the time of diagnosis, and advocacy and engagement are necessary for the success of all five pillars.

12. For prevention and epidemic control, the main drive for action is achieving higher coverage of existing vaccines, development of new vaccines, improved prevention strategies and a more efficient response to epidemics. The diagnosis and treatment goals are focused on timely confirmation of meningitis and optimal care. Improved global surveillance, based on effective national surveillance systems, is needed to guide meningitis prevention and control measures, document the impact of vaccines and improve the estimation of the disease burden, including sequelae. For care and support of those affected by meningitis, the focus is on early recognition and improved management of the after-effects of meningitis, availability of support and access to care. For advocacy and engagement, the drive is to ensure that the draft global road map is prioritized and integrated into country plans, and that there is high awareness among the population of meningitis and its impact, as well as the right to meningitis prevention and care, with increased acceptance and demand for vaccines and after-care services.

WIDER BENEFITS AND COMPLEMENTARITY

13. The draft global road map has been designated as a flagship global strategy in the Thirteenth General Programme of Work, 2019–2023 and is an essential component in achieving universal health coverage. The efforts undertaken in implementing the draft global road map will overlap with, and provide benefits for, many areas in addition to meningitis. The draft global road map will reinforce and be integrated with wider initiatives related to strengthening primary health care and health systems, increasing immunization coverage, improving global health security, fighting antimicrobial resistance and ensuring the rights and inclusion of persons with disabilities. It will complement other global control strategies, such as those addressing sepsis, pneumonia, tuberculosis and HIV.

IMPLEMENTATION

14. The successful implementation of the draft global road map will depend foremost on regional and country engagement and political willingness to defeat meningitis. These efforts will require aligned and effective partner support to bring together all globally available resources (technical, human and financial), as well as the support of the Secretariat.

15. A business case will be used to mobilize sufficient resources for WHO and its partners to support Member States to deliver on the strategic objectives of the draft global road map, together with a public health value proposition for one or more of the priority milestones. Global research priorities, which are needed to achieve the visionary and strategic goals, will be identified separately in the implementation plan for the draft global road map.

16. Implementation will be a challenge for all countries, but especially in resource-poor settings where the burden of meningitis is greatest. Targets for the visionary and strategic goals will be adapted to regional and local contexts. Plans for monitoring and evaluation, and communications and risk management will be available to guide and support implementation. Global action to implement the

draft global strategy and achieve its ambitious goals in order to defeat meningitis is needed now. Strong commitments from countries, partners and donors will be essential to success.

17. A strategy support group of global-level partners and sponsors committed to the mission of defeating meningitis is expected to promote the draft global road map through high-level advocacy, raising public awareness and supporting implementation activities.

ACTION BY THE HEALTH ASSEMBLY

18. The Health Assembly is invited to note this report and provide guidance on next steps.

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