
Immunization Agenda 2030

Report by the Director-General

EXECUTIVE SUMMARY

1. In August 2020, the Seventy-third World Health Assembly, through the written silence procedure, adopted decision WHA73(9), in which it endorsed the new global vision and overarching strategy for vaccines and immunization: Immunization Agenda 2030 (IA2030). The IA2030 provides the strategic framework to tackle key issues related to immunization within primary health care and universal health coverage during 2021–2030.

2. Decision WHA73(9) requests the Director-General to finalize the operational elements outlined in the IA2030, in consultation with Member States and other relevant stakeholders, for consideration by the Seventy-fourth World Health Assembly, through the Executive Board at its 148th session.

3. Following the 148th session of the Executive Board in January 2021 and further consultations with Member States held on 8 April, the operational elements have been finalized and made available on the Internet as a living document entitled “**Implementing the Immunization Agenda 2030: A Framework for Action through Coordinated Planning, Monitoring & Evaluation, Ownership & Accountability, and Communication & Advocacy**”.¹

4. The present report summarizes these operational elements of the framework, including: (1) regional and national strategies for operational planning; (2) a mechanism to ensure ownership and accountability, including the establishment of a global-level Partnership Council; (3) an updated monitoring and evaluation framework to guide implementation; and (4) a communication and advocacy strategy to ensure that immunization remains high on the health agenda.

CONSULTATION PROCESS AND CO-DEVELOPMENT

5. Input from Member States has guided the operationalization of the IA2030, including through facilitated virtual consultations during the challenging period of the coronavirus disease (COVID-19) pandemic. A core team of immunization partners² have continued to guide the design of the operational

¹ Implementing the Immunization Agenda 2030: A Framework for Action through Coordinated Planning, Monitoring & Evaluation, Ownership & Accountability, and Communication & Advocacy. Available at: www.immunizationagenda2030.org/framework-for-action (accessed 16 May).

² The IA2030 core team is co-led by WHO and the United Nations Children’s Fund and comprises members from the Wellcome Trust; the Bill & Melinda Gates Foundation; the secretariat of Gavi, the Vaccine Alliance; the United States Centers for Disease Control and Prevention; and the Gavi Civil Society Organizations Constituency.

elements, ensuring broad stakeholder input across each WHO region and diverse Member States for co-development and validation of the proposed design.

6. Extensive consultations were held in July and August 2020 with a diverse range of stakeholders, including senior government officials; national immunization programme managers; and representatives of national immunization technical advisory groups, academia, non-health sectors, non-State actors and development partners from low-, middle- and high-income countries.

7. The Strategic Advisory Group of Experts on Immunization has guided the finalization of the IA2030 monitoring and evaluation framework. A task force comprising representatives of Member States and WHO regions worked in collaboration with the core partners and presented draft models to the Strategic Advisory Group of Experts on Immunization (SAGE) at its meeting held in October 2020. The framework document incorporates revisions recommended by SAGE and additional input from development partners.

8. The communications and advocacy strategy was co-created with input from immunization partners, communications and advocacy experts, as well as non-State actors at the country, regional and global levels. Operationalization has begun through collaborative efforts by the full range of partners, including successful activities to launch IA2030 in April 2021. Regular messaging frameworks and structures are forming to ensure continuous engagement throughout the decade.

9. Further guidance was sought through two intersessional briefings of Member States held on 2 December 2020 and 8 April 2021. The guidance provided by Member States led to the adoption of the following design principles:

- (a) **Instilling broad ownership to achieve the IA2030 vision** among all immunization and non-immunization stakeholders, including those involved in health system strengthening and disease-specific initiatives. Country ownership is key to achieving the IA2030 vision because the most important actions will be the responsibility of individual countries.
- (b) **Leveraging and strengthening existing mechanisms** for coordination; accountability; planning, monitoring and evaluation; and advocacy at country, regional and global levels.
- (c) **Promoting continuous quality improvement cycles**, using timely, reliable and fit-for-purpose data.
- (d) **Building and strengthening** stakeholder accountability and technical alignment to address country needs.
- (e) **Aligning and harmonizing** with existing regional and national plans and global strategies, including the Sustainable Development Goals, universal health coverage and Gavi 5.0.

10. The IA2030 framework draws on the lessons learned from the global vaccine action plan (2011–2020)¹ and will be further strengthened based on early implementation experience, new priorities and challenges, and likely needs during the next decade. The framework identifies an initial set of core questions and topics to guide a “learning agenda” for each operational element. In particular, IA2030

¹ World Health Organization. (2019). The global vaccine action plan 2011–2020: review and lessons learned: strategic advisory group of experts on immunization. Geneva: World Health Organization; 2019 (<https://apps.who.int/iris/handle/10665/329097>, accessed 16 May 2021).

indicators will require critical review and adaptation in light of the evolving COVID-19 pandemic and its effect on immunization programmes.

ACCELERATING COVID RESPONSE AND RECOVERY

11. As part of the process of operationalizing the IA2030, providing a comprehensive response to the COVID-19 pandemic and repairing the damage it has caused are the immediate priorities. Early implementation will focus on Member States' efforts to ensure the rapid and equitable scale-up of COVID-19 vaccines and the rebuilding of immunization and other essential primary health care services. In addition to embedding COVID-19 vaccine implementation and recovery throughout planning processes, the IA2030 strategy's technical annexes¹ provide guidance that can be applied to the many challenges presented by COVID-19.

DRIVING IMPLEMENTATION OF IA2030

12. The IA2030 framework for action outlines four operational elements as key to empowering and driving the actions needed to advance the implementation and achieve the vision of IA2030 (see Fig.1 below).

Fig. 1: IA2030 Framework for Action, with four operational elements to drive implementation



Coordinated operational planning for implementation

13. Coordinated operational planning by Member States, regional bodies, development partners and civil society is translating the vision of IA2030 into concrete, near-term implementation plans to achieve

¹ Available on the IA2030 website at: <http://www.immunizationagenda2030.org>.

the health-related targets of the Sustainable Development Goals. Initial priorities include the scaling up of COVID-19 vaccination and the recovery of immunization and other essential health services to at least pre-COVID-19 levels. Fully coordinated with existing mechanisms (such as regional immunization technical advisory groups and national immunization technical advisory groups), action planning takes into account timebound initiatives (such as the COVID-19 Vaccines Global Access (COVAX) initiative), complements Gavi's 2021–2025 strategy and seeks the integration of disease-specific initiatives. While planning processes will vary across countries and regions, they will incorporate similar key steps to ensure that immunization needs are fully understood; gaps are covered; prioritization is locally relevant; realistic and meaningful targets are set, and sufficient resources are committed. This is supported by guidance provided in the set of technical annexes that are now available for each of the seven IA2030 strategic priorities.¹

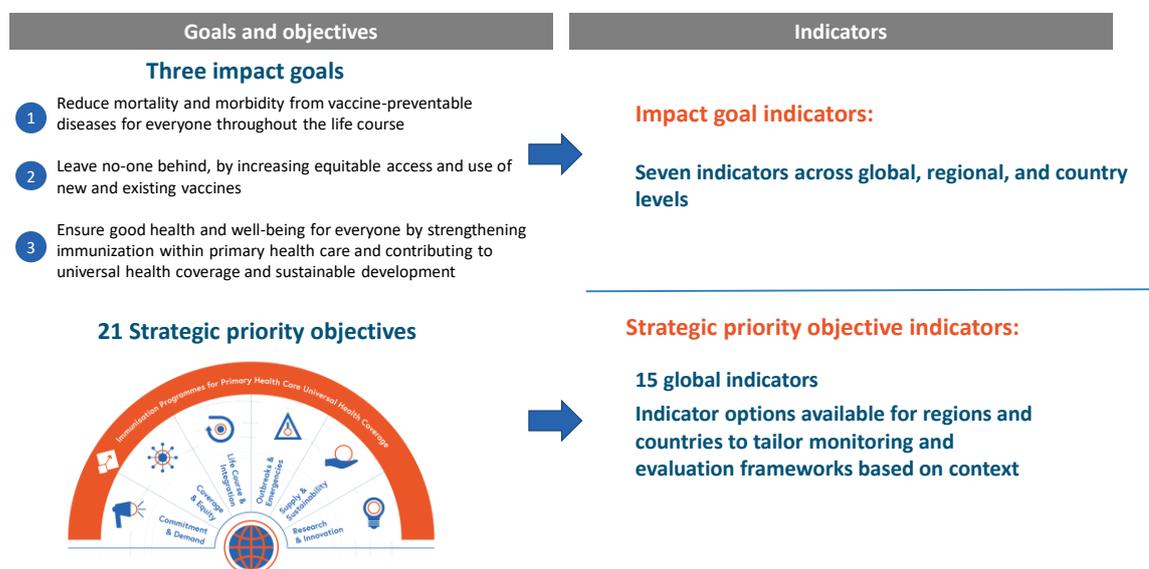
Monitoring and evaluation

14. The IA2030 monitoring and evaluation framework is presented as Annex 1 to the framework document. It outlines the tailored indicators that will enable the use of data for action to continuously improve immunization programmes at all levels. It provides indicators to monitor progress towards the three IA2030 impact goals and the 21 objectives within its seven strategic priority areas (see Fig. 2 below). Seven impact goal indicators are outcome and impact measures that are common across all levels (country, regional and global) and designed to track progress towards the three IA2030 impact goals. Progress made in achieving the impact goal indicators will be assessed against predetermined targets. Strategic priority objective indicators are designed to track performance towards the 21 strategic priority objectives. They will also help to identify the potential root causes of success and failure so that actions to improve programme performance can be recommended and implemented. Global targets have not been set for strategic priority objective indicators due to wide country and regional variations. Member States are encouraged to assess the baseline for each indicator and to set targets for these indicators that reflect local context.

15. Through monitoring and analysis of IA2030 indicator progress, independent technical review bodies (national immunization technical advisory groups, regional immunization technical advisory groups, and the Strategic Advisory Group of Experts on Immunization) can recommend areas for further in-depth evaluation to be conducted by national and regional bodies and IA2030 working groups. Evaluation of policies, strategies and interventions within each strategic priority will be encouraged at country, regional, and global levels as integral to monitoring and evaluation cycles.

¹ Available on the IA2030 website at: <http://www.immunizationagenda2030.org>.

Fig. 2: IA2030 goals, objectives and indicators



Ownership and accountability

16. In creating the approach to ownership and accountability, Member States and development partners have called for more systematic and coordinated use of existing structures across country, regional and global levels. The implementation of IA2030 will use newly designed tools, such as tailored scorecards, in order to bring greater visibility and evidence and inform decisions among partners to drive corrective actions at country, regional and global levels to achieve the IA2030 vision.

17. A global level partnership model provides an overarching “umbrella” forum for immunization intended to represent the interests of all countries, give voice to civil society stakeholders and cover all vaccine-preventable diseases. It will do so by combining a consultative engagement process through working groups, operational alignment through a Coordination Group, and political leadership through a Partnership Council.¹

(a) **Working groups** will continue to support focused discussions and technical alignment across thematic or cross-cutting areas of focus, complementing (or merging with) existing mechanisms at global or regional levels such as those established for the COVAX facility, Gavi 5.0 and/or disease control initiatives. Working groups will shape regular discussions at the operational level, identify areas that require attention by regional or global actors and feed into the global-level structures.

(b) **Consultative engagement** with countries, regions, non-State actors and other partners on IA2030 implementation topics will be organized to provide real-time exchange on immunization programme successes and challenges, as well as to offer peer-to-peer learning and knowledge-sharing across sectors and countries. On a rotating basis and based on topics proposed by countries

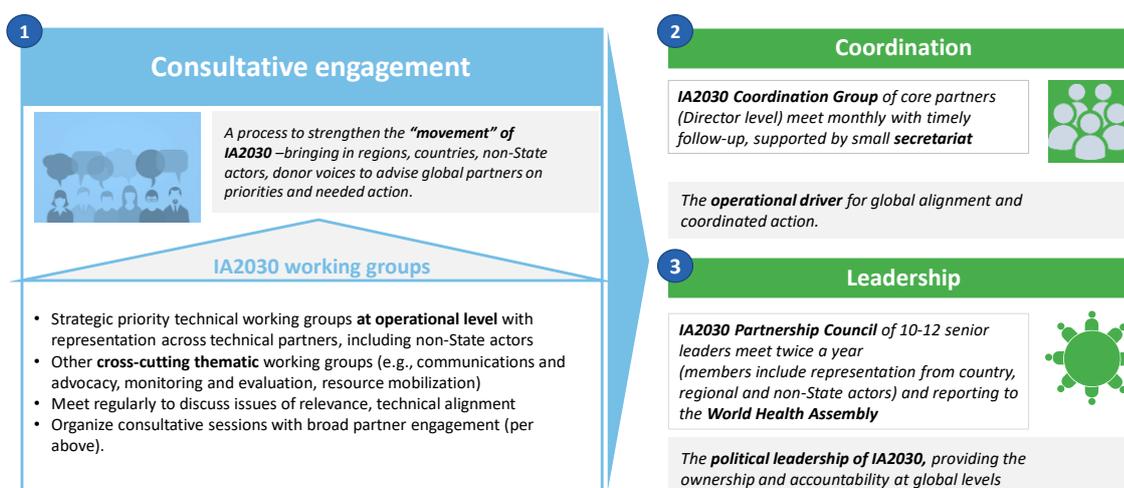
¹ These three components will be further detailed in Annex 2 to the IA2030 framework, which is currently in its final stages of development.

and regions, working groups (or partnership constituencies or communities of practice) will be supported to host open, multilingual “virtual events” with structured format and facilitation to amplify participant contributions. These consultative engagement “touch points” will help identify and elevate issues for consideration by the Coordination Group and Partnership Council. As such, they will contribute to the “movement” of IA2030, bringing in critical voices and perspectives from regions, countries and non-State actors in a predictable and structured way and feeding into debates at the global level.

(c) The **IA2030 Coordination Group** will comprise seven or eight programme directors from leading immunization agencies and partners. Meeting monthly, these individuals will consider the input received through IA2030 working groups and consultative engagement, helping drive solutions to address operational bottlenecks and technical alignment. The Coordination Group will also advise on the preparation of formal IA2030 reports (such as for the World Health Assembly and the Strategic Advisory Group of Experts on Immunization) and set the agenda for Partnership Council meetings. A small “virtual” IA2030 secretariat team will be created, comprising dedicated staff from partner organizations, to provide logistics and technical support to the IA2030 Coordination Group and associated structures.

(d) The IA2030 **Partnership Council** will comprise 10 to 12 senior leaders from immunization partners operating at the global level, as well as representatives from countries, regions and civil society. The Council will reinforce, complement and build upon existing structures at national and regional levels and will focus global partner attention on priority technical areas, implementation bottlenecks, progress against global immunization targets and partner commitments. It has been created as an accountability mechanism (or governance structure) to jump-start the IA2030 decade through three key functions: monitoring and reviewing IA2030 progress against targets; advocating for and investing in key actions identified to enhance progress; and mobilizing political leadership to drive global partner action.

Fig. 3: IA2030 Global-level partnership model



Communication and advocacy

18. Communication and advocacy is essential to build political commitment, country ownership and awareness of IA2030 and underpins all the above operational elements. It will drive coordinated messaging and action at key moments to deliver on accountability objectives throughout the decade. A communication and advocacy strategy will provide an approach that is acceptable, both technically and culturally, in different regional and Member State contexts and will help to create a broad social movement for immunization. Language and concepts that are broadly accessible will be used so as to engage with all sectors of the community. Key messages include the importance of immunization to global health security; the potential of immunization to provide the foundation for resilient and sustainable primary health care systems; delivering universal health coverage; the importance of access and equity (including reaching zero-dose children); and the role of innovation to enhance the reach and impact of immunization programmes.

19. A key to success for IA2030 will be to ensure ongoing partner participation and a sustained commitment to the shared vision. Therefore, central to communication and advocacy operationalization will be the creation of structures and activities to maintain momentum beyond the launch. A key aim will be to mobilize stakeholders regularly around important milestones and crucial moments, creating a drumbeat of activities throughout the decade. This will ensure that immunization remains high on global and regional health agendas and help to generate a groundswell of support or social movement for immunization. Communication focal points will collaborate closely with IA2030 working groups to align priorities; identify engagement opportunities; coordinate action and strengthen accountability for IA2030 targets; and celebrate progress. Flexible, adaptable initiatives that are tailored to a range of audiences will also help regions and Member States to contextualize data and evidence and advance messages across a variety of platforms. The communication and advocacy strategy will align with the work of other communication initiatives to promote confidence in and demand for vaccines.

ACTION BY THE WORLD HEALTH ASSEMBLY

20. The Health Assembly is invited to consider the operational elements for IA2030.

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