

Statement by Gavi, the Vaccine Alliance

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Agenda item 13.9 – Global Strategy for Women's, Children's and Adolescent's health

Excellencies, distinguished delegates,

Gavi, the Vaccine Alliance, welcomes agenda item 13.9 on the *Global Strategy for Women's, Children's and Adolescents' Health 2016–2030*.

The Director-General's report warns that 46 countries could still face maternal mortality ratios above 140 per 100 000 live births by 2030, and 59 are off-track for under-5 mortality, with the widest gaps in the poorest communities. Immunisation is a frontline intervention that can contribute to tackle these challenges if anchored on primary health care (PHC).

Under Gavi's Strategy 6.0, 2026-2030, we hope to help countries create more than 1.4 billion touchpoints between families and health workers which constitute opportunities to integrate antenatal, postnatal, reproductive and nutrition health services and draw marginalised communities into PHC.

Momentum is growing. WHO's first pre-qualification of a maternal RSV vaccine protects infants from birth, and Gavi is assessing support. The human papillomavirus (HPV) vaccine revitalisation programme has enabled 44 introductions and vaccinated 14 million girls in 2023; upcoming launches will advance the goal of fully immunising 86 million girls by 2025, preventing an estimated 1.4 million future cervical-cancer deaths.

Yet progress is fragile. Countries experiencing large or disruptive measles outbreaks rose from 21 in 2021 to 59 in 2024, and yellow-fever has resurged in 12 African countries last year – clear warnings that immunity gaps persist.

We urge Member States to:

- **Increase** domestic immunisation budgets for PHC to accelerate uptake of new and under-used vaccines, including malaria and HPV.
- **Use** every immunisation touchpoint to deliver integrated, woman-, child- and adolescent-centred care;

With renewed investment and strong partnerships, every woman, child and adolescent can not only survive but thrive on the path to 2030.