
Global vaccination targets ‘off-track’ warns WHO

News release

22 APRIL 2015 | GENEVA – Progress towards global vaccination targets for 2015 is far off-track with 1 in 5 children still missing out on routine life-saving immunizations that could avert 1.5 million deaths each year from preventable diseases. In the lead-up to World Immunization Week 2015 (24–30 April), WHO is calling for renewed efforts to get progress back on course.

In 2013 nearly 22 million infants missed out on the required three doses of diphtheria-tetanus-pertussis-containing vaccines (DTP3), many of them living in the world’s poorest countries. WHO is calling for an end to the unnecessary disability and death caused by failure to vaccinate.

“World Immunization Week creates a focused global platform to reinvigorate our collective efforts to ensure vaccination for every child, wherever they are and wherever they live,” said Dr Flavia Bustreo, WHO Assistant Director-General, Family, Women's and Children's Health. “It is critical that the global community now makes a collective and cohesive effort to put progress towards our 6 targets back on track.”

In 2012, all 194 WHO Member States at the World Health Assembly endorsed the Global Vaccine Action Plan (GVAP), a commitment to ensure that no one misses out on vital immunization. However, a recent independent assessment report on GVAP progress rings an alarm bell, warning that vaccines are not being delivered equitably or reliably and that only 1 of the 6 key vaccination targets for 2015 is currently on track – the introduction of under-utilized vaccines.

Many countries worldwide have experienced large measles outbreaks in the past year, threatening efforts to achieve the GVAP target of eliminating measles in 3 WHO Regions by end-2015.

Actions to get back on track

A global collaborative drive for immunization, begun in the mid-1970s — with the establishment of the Expanded Programme on Immunization in all countries — achieved dramatic results, raising vaccination levels from as low as 5% to more than 80% in many countries by 2013. WHO estimates that today immunizations prevent between 2 and 3 million deaths annually and protect many more people from illness and disability.

Although progress has stalled in recent years, this early success demonstrates the potential of vaccines, which are increasingly being extended from children to adolescents and adults, providing protection against diseases such as influenza, meningitis and cervical and liver cancers.

The GVAP recommends three key steps for closing the immunization gap:

- integrating immunization with other health services, such as postnatal care for mothers and babies;
- strengthening health systems so that vaccines continue to be given even in times of crisis; and

- ensuring that everyone can access vaccines and afford to pay for them.
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Dr Jean-Marie Okwo-Belé, Director of Immunization, Vaccines and Biologicals at WHO, says the Organization will work to increase its support to all countries that are lagging behind in meeting immunization targets. In May this year, WHO will bring together high-level representatives of 34 countries with routine vaccination (three doses of DTP3) coverage of less than 80% to discuss the challenges faced by countries and to explore solutions to overcome them.

Although many countries are already vaccinating four out of five children with DTP3, a full one-third of countries are still struggling to reach the ‘fifth child’, meaning millions of children remain at risk of illness, disability or death because they are not getting the immunizations they need.

“There is no one centralized approach that can ensure vaccines are delivered and administered to each child. Vaccination plans on the ground need to be adapted not just to countries, but to districts and communities,” said Dr Okwo-Belé. “What is required is a truly concerted effort and much stronger accountability so that each one of the key players involved fulfills its mandate and helps close the immunization gap.”

Critical operational needs to ensure wider vaccination and delivery on the ground, include:

- finding ways to simplify vaccination procedures in the field;
- improving vaccination delivery to reach every last child, especially those living in remote and inaccessible areas;
- ensuring vaccine affordability and strengthening vaccine supply chains;
- training more health workers, skilled managers and providing supportive supervision;
- improving the quality of data collected by countries and using this to improve immunization operations;
- overcoming challenges posed by conflict, natural disasters and other crises;
- increasing awareness and demand for immunization by communities; and
- greater accountability linked to micro-planning of vaccination operations and clear lines of responsibility.
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Earlier this year, donor countries and institutions pledged to meet the funding needs of Gavi, the Vaccine Alliance that brings together public and private sectors to create equal access to new and underused vaccines for children living in the world’s poorest countries.

Note to editors

The Global Vaccine Action Plan envisions a world where everyone lives life free from vaccine preventable diseases by 2020. It set 6 targets for 2015:

Immunization against diphtheria, tetanus and whooping cough (DTP3)

Target: 90% immunization coverage against diphtheria, tetanus and whooping cough by 2015.

Gap: 65 countries

Introduction of under-utilized vaccines

Target: At least 90 low or middle income countries to have introduced one or more under-utilized vaccines by 2015.

ON TRACK

Polio eradication

Target: No new cases after 2014

Gap: 3 countries remain polio endemic

Maternal and neonatal tetanus: Global elimination by end-2015

Target: Eliminate maternal and neonatal tetanus

Gap: 24 countries

Measles elimination

Target: Eliminate from three WHO regions by end-2015

Gap: 16% of all children are not being immunized against measles

Rubella elimination

Target: Eliminate rubella from two WHO regions by end-2015

Gap: Half of all children do not receive the rubella vaccine
