



# **Immunization Mid-term Summary Sheet**

## **Background and Overall Vision for MCHIP Technical Areas**

MCHIP is dedicated to ensuring that every infant and woman of childbearing age in the developing world is fully immunized. Globally, immunization prevents three million child deaths each year and WHO estimates that 25% of the remaining under-five mortality—approximately two million deaths annually—could be prevented with existing vaccines. Success in reducing vaccine-preventable mortality has been dramatic, but it cannot be taken for granted. For example, one million newborns died of tetanus 30 years ago compared to about 130,000 last year—an 87% reduction. This



achievement must be maintained and built upon every year to further lower neonatal mortality from tetanus. And, while vaccination coverage in some countries now exceeds 80%, coverage is not the only metric. Before they are exposed to disease, women and newborns must be reached by both potent vaccines and high-quality services in a timely, safe, effective, acceptable and affordable manner so that they return to complete all their doses. Coverage disparities also continue within countries, with few countries reaching 80% or higher coverage in all districts. To prevent outbreaks, consistently high coverage is needed everywhere year after year. Increasingly, vaccination programs are aiming to reach the hard-to-reach and marginalized groups to improve access and equity.

Working with global, regional, national and sub-national partners, MCHIP provides practical, field-oriented technical analysis and support; shares information and best practices in the field of immunization with countries and partners; and aims to strengthen health systems by building local capacity to offer effective and sustainable vaccination services. MCHIP provides technical support to routine immunization (RI) systems to sustain mortality reduction gains achieved through campaigns and to serve as a platform for effective introduction of new, lifesaving vaccines.

## Priorities (areas of work/high-impact interventions)

**Reaching the unreached in selected countries.** MCHIP focuses on strengthening RI services at national and sub-national levels to identify and reach the unreached. MCHIP works with countries to identify and prioritize low-performing populations and operationalize the Reaching Every District (RED) approach.<sup>1</sup>

*Introducing new and underutilized vaccines.* MCHIP provides technical support to countries as they prepare for the introduction of new, lifesaving vaccines. This includes assisting them with introduction plans, applications to the GAVI Alliance, preparations for and the phasing of vaccine introduction, and monitoring and post-introduction evaluation.

<sup>&</sup>lt;sup>1</sup> The RED strategy involves the following five components: planning and management of resources, reaching the target populations to improve access to and use of services through a mix of service delivery strategies, linking services with the community to ensure health services are meeting their needs, supportive supervision and follow-up, and monitoring and use of data for action.

Supporting vaccine-preventable disease interventions, including polio eradication and measles mortality reduction. Success in sustaining disease control or eradication requires matched efforts in RI, which is MCHIP's niche. MCHIP provides technical support in this area to ensure that the health system is functional, staff are supported and operational and programmatic needs are in place and funded to safely provide the vaccines and target all eligible children.

*Linking immunization with other interventions.* MCHIP is exploring how best to link immunization services with the delivery of other interventions and with shared program functions such as monitoring and evaluation.

Using immunization outreach as a platform for routine delivery of other interventions. As a population-based intervention that aims to operate at scale, an immunization program delivers services through a combination of fixed and outreach strategies to reach the population. MCHIP assists a number of countries in customizing outreach strategies that build upon this platform to deliver multiple interventions.

**Preparing and responding to pandemic H1N1 influenza.** From 2009–2010, MCHIP provided complementary technical assistance in support of the WHO response to pandemic H1N1 influenza—including assistance to countries in operationalizing, customizing and monitoring their vaccination programs in light of WHO policy and guidelines and within a continually evolving environment.

### Results

Significant contributions to global and regional policymaking and technical leadership and technical input at the global level to advance immunization programming. MCHIP has contributed to global and regional policymaking and technical leadership through engagement in global policymaking processes.

Advanced global program learning on immunization. MCHIP has published or submitted articles to peer reviewed journals, given keynote presentations to global and regional immunization meetings and to professional associations, and contributed to global protocols and program learning.

Assistance to five countries for new vaccine introduction. MCHIP has provided technical assistance to DRC, Kenya, Rwanda, Tanzania and Zimbabwe to apply for and introduce new vaccines.

Exploration of the use of immunization as a platform for integration of other services. MCHIP co-organized and participated in a coordination meeting on integration of FP and immunization services with FHI, USAID, PSI, MSH and other partners. MCHIP collaborated with FHI to review and document efforts to integrate FP and immunization services. MCHIP and FHI co-authored the brief, "Integration of Family Planning with Immunization Services," which highlights the potential for linking FP messages and service delivery during vaccination contacts.

Technical support for polio eradication. In collaboration with MOHs, WHO, UNICEF, the Bill & Melinda Gates Foundation, CDC, USAID bilaterals and other partners, MCHIP provides focused technical assistance on the interfaces of polio eradication, communication, and RI at global and regional levels. In addition, MCHIP advises a multiagency expert group (led by UNICEF) on refining and implementing a standard set of polio communication indicators for tracking polio coverage and PEI goals. In FY2011, MCHIP is focusing on increasing identification and tracking of pregnant women and newborns—to begin vaccination with OPV0

at birth and strengthen routine OPV coverage and participation in supplementary immunization activities (SIAs) for children under 12 months.

Technical assistance for epidemic H1N1 emergency response. Under core funding for avian influenza, MCHIP recruited, briefed and seconded consultants to WHO/Geneva, WHO/Regional Office for Africa (AFRO) and WHO inter-country support teams in Africa for pandemic H1N1 vaccination preparedness and response; and contributed to a paper for USAID and the White House on operationalizing the response to pandemic H1N1 flu.

## Global (and Regional) Leadership

MCHIP works closely with international organizations and links its country programming to important global and regional initiatives, such as the GAVI Alliance, the WHO/UNICEF Global Immunization Vision and Strategy (GIVS), the Global Polio Eradication Initiative, the Measles Initiative and others.

## Countries where MCHIP is doing immunization work

In the *DRC*, MCHIP is building on successes and lessons learned over the last 14 years. The project provides technical support to the MOH, bilateral and other partners to strengthen policy and immunization program management and guidance at all levels, inter-agency coordination at national and provincial levels, and RED expansion and implementation in health zones. MCHIP targets those health zones with large numbers of unimmunized or partially immunized children, while also documenting promising practices, raising awareness and advocating for greater attention to and investment in RI. In addition, the project provided integral support for pneumococcal (PCV-13) vaccine introduction by drafting and finalizing the training manual and technical guidelines for staff at peripheral levels. In addition, MCHIP participated in the training of trainers for the pneumococcal conjugate vaccine in both introduction provinces (Kinshasa and Bas Congo). The national program will carry out a phased approach to introduce the vaccine and the same materials will be used in other provinces. More recently, MCHIP has provided technical assistance in DRC for planning and supervising an emergency polio campaign.

MCHIP works in two states in *India*—Uttar Pradesh and Jharkhand—and at the national level to strengthen RI systems and build the capacity of health providers and immunization program managers to provide high-quality services. MCHIP technical assistance focuses on improving the planning, supervision and management of RI services as part of an integrated MNCH package. MCHIP also assists in the development and implementation of vaccine preventable disease strategies (e.g., for measles, Japanese encephalitis, rubella control and polio eradication) and assists with the introduction of new vaccines.

At the national level in *Kenya*, MCHIP works to strengthen RI through technical assistance with the Division of Vaccines and Immunization (DVI) and its partners, particularly those working on immunization within the Child Health Committee. MCHIP also provides immunization technical support to Nyanza and Western provinces and in select districts (e.g., those supported through the USAID-funded bilaterals), including RED training and on-the-job capacity building, improving immunization planning, assisting with review meetings, conducting supportive supervision, and monitoring and use of data for strengthening immunization services and community involvement. For the last year, MCHIP has been actively involved in the preparations, training, communications, monitoring and implementation of pneumococcal vaccine introduction, and will continue to support these efforts and linkages with the Kenya Action Plan for Pneumonia, as well as preparations for rotavirus vaccine introduction.

MCHIP carried out a post-introduction evaluation of pneumococcal vaccine in *Rwanda* and is helping the MOH prepare for the introduction of rotavirus vaccine. To date, MCHIP has helped finalize the adaptation of the first draft plan for rotavirus vaccine introduction. Circulated within the MOH and among key stakeholders for comment, the draft has been discussed at a planning meeting this month (April 2011). In addition, MCHIP helped the EPI update its comprehensive multi-year plan (cMYP) for immunization. The introduction plan and the updated cMYP, along with the country's proposal for rotavirus vaccine introduction, are being prepared for submission to the GAVI Alliance next month.

In *Timor-Leste*, MCHIP is implementing a Millennium Challenge Corporation Threshold Program for Immunization (MCC-TPI). The program launched on April 1 of this year, with the goal of increasing RI coverage rates among infants and children by 2013 and improving the Government of Timor-Leste's (RDTL) score on the MCC Immunization Rates indicator. A complementary goal is to strengthen the EPI so that it is able to sustain and expand the gains realized beyond the MCC-TPI end date.

MCHIP helped assess *Zimbabwe's* national immunization program, in preparation for technical support to strengthen the performance of RI services. MCHIP will roll out the RED strategy in districts with large numbers of unimmunized and partially immunized children and assist the Zimbabwe EPI to revise its national immunization policy. In addition, MCHIP will help draft the national application to the GAVI Alliance for introduction of pneumococcal vaccine. MCHIP is providing immunization technical assistance to all seven districts within Manicaland province.

## **Other Countries**

Periodic technical support is also being provided to:

- Strengthen **Benin's** RI program.
- Maximize investment for high-quality polio and immunization campaigns in **Central Asia**, USAID/CAR requested MCHIP's assistance to revitalize and highlight gaps in the current immunization system in **Kyrgyzstan** and **Tajikistan** and use data from surveillance, campaign monitoring and communication to strengthen the RED approach.
- Explore how routine vaccination contacts can be used systematically to counsel mothers about healthy timing and spacing of pregnancy and provide FP services at the global level and at the country level in **Liberia**.
- Give technical input to the National Primary Health Care Development Agency of **Nigeria** and the multi-agency Expert Review Committee for Polio and Immunization
- Provide distance-based technical support for the design of USAID support to **Pakistan**'s national immunization program.
- Coordinate an external EPI review in Senegal, at the request of the country's USAID Mission.
- Develop, produce and disseminate national immunization policies and strategies in Southern Sudan, as well as participating in a multi-agency review of AFP surveillance.
- Provide technical support to Tanzania in applying for pneumococcal and rotavirus vaccines.
- Provide leadership and guidance to an external EPI review, at the request of USAID/Uganda.
- Strengthen Ukraine's national immunization program.





## **List of Products**

MCHIP staff have contributed to the following policy initiatives, statements, tools, resources and training materials:

### **Policy Initiatives**

- 1. Developing a Civil Society <u>Call to Action</u> for the GAVI Alliance and serving on the GAVI Civil Society Task Team to establish architecture and process for CSO engagement in GAVI
- 2. Developing and implementing, with UNICEF and other partners, a Communication Framework for Pneumonia and Diarrhoea Control and New Vaccine Introduction
- 3. Contributing to communication strategies for RI and vaccine-preventable disease initiatives (such as polio eradication) with WHO, UNICEF, USAID, NGOs and other partners
- 4. Participating in the Vaccine Presentation and Packaging Advisory Group (VPPAG)
- 5. Serving on the Program Advisory Group for the WHO Optimize Project
- 6. Participating in an external panel advising CDC, and submitted a manuscript (as secondary author) on their future global immunization research agenda
- 7. Serving on WHO's Immunization Practices Advisory Committee, and contributed to an advanced policy on applying a visual cue to each vial of WHO pre-qualified vaccine
- 8. Consulting on the WHO/UNICEF annual country vaccination estimation process
- 9. Participating in WHO ad hoc group, focusing on the impact of new and underutilized vaccine introduction on immunization and health systems
- 10. Participating in the UNICEF Program Advisory Committee on maternal and neonatal tetanus elimination
- 11. Participating in an ad hoc WHO Advisory Committee on Gender and Immunization
- 12. Worked with country teams at the multi-country "WHO/UNICEF Regional Workshop on Coordinated Approaches to Pneumonia and Diarrhoea Prevention and Control." Global and regional technical advisors from IMCI, Child and Adolescent Health, EPI, Nutrition and HIS divisions, as well as eight African countries, were represented, and MCHIP staff assisted with facilitation and country working groups
- 13. Contributing to UNICEF Cold Chain and Logistics Task Force
- 14. Served as technical advisors to WHO on measles mortality reduction and Decade of Vaccines Delivery Working Group

#### **Program Learning Resources**

- 1. Submitted a journal article based on the study of the Epidemiology of the Unimmunized Child, prepared by IMMUNIZATIONbasics for WHO
- 2. Documenting past experience using RI outreach for delivery of other health services
- 3. Documenting experience with the Periodic Intensification of RI (PIRI) with WHO
- 4. Prepared manuscripts as primary author on "Effect of new vaccine introduction on immunization systems and health systems: review of grey literature," and documented

- experience in Rwanda for introduction of pneumonia vaccine (PCV7), which has been submitted to a journal
- 5. Reviewed manuscripts for peer-reviewed journals including *Expert Review of Vaccines*, *HPP*, *VACCINE*, *WHO Bull*, *Health Affairs*, *International Journal of Health Communication* and others
- 6. Co-authored the brief "Integration of Family Planning with Immunization Services," with FHI
- 7. Submitted a manuscript on a Madagascar MCH weeks case study
- 8. Published LiST tool critique in the *International Journal of Epidemiology*
- 9. Published a letter to the editor in JAMA on Global Eradication of Polio