

# Conclusions and recommendations of the 12th meeting of the European Technical Advisory Group of Experts on Immunization (ETAGE)

Copenhagen, Denmark  
9–11 October 2013

The European Technical Advisory Group of Experts on Immunization (ETAGE) met on 9–11 October 2013 to review and discuss immunization activities and developments in the WHO European Region and provide advice to the WHO Regional Office on appropriate activities.

The main topics for discussion included operationalization of the monitoring, evaluation and accountability framework for the Global Vaccine Action Plan (GVAP); planning for inactivated polio vaccine (IPV) introduction; progress toward measles and rubella elimination in the Region; implementation of the *Package of accelerated action for measles and rubella elimination*; development of strategies for adult immunization practices; sustaining immunization investments in countries graduating from GAVI support; and development of a Regional Vaccine Action Plan (RVAP).

## Conclusions

- ETAGE acknowledges the important role played by National Immunization Technical Advisory Groups (NITAGs) and welcomes participation in the meeting by NITAG representatives from Armenia, Azerbaijan, Belarus, Denmark, Republic of Moldova, Kazakhstan, Kyrgyzstan, Ukraine and Uzbekistan.

### Operationalization of the monitoring, evaluation and accountability framework for the Global Vaccine Action Plan (GVAP)

- ETAGE notes that the GVAP timeframe for operationalization of the framework appears to be feasible for most countries. However, the information needed to complete the joint reporting form (JRF) and other reports comes from multiple sources; and there is concern about the quality of the data produced. Strengthening reporting to meet the requirements as well as avoiding parallel reporting activities will require greater organization in Members States and will be a collaborative effort at various levels.
- Indicators need to be well defined, and standardized if possible. ETAGE recognizes that the first year of reporting within the GVAP framework will involve a learning curve and lessons learnt will contribute to improvements in subsequent years.
- ETAGE notes that NITAGs can play an important role in implementation of the GVAP framework: not to supervise activities but to profit as the end user of the data, which will allow them to define policy and advise decision-making authorities.
- ETAGE notes that the whole GVAP process should create added value for the beneficiaries of the immunization programme – this message needs to be understood by all and thus better communicated.

### Planning for inactivated polio vaccine (IPV) introduction (to mitigate risks associated with withdrawal of type 2 component of OPV)

- ETAGE notes that there is great need to clarify to national authorities, health providers and parents the purpose of IPV introduction as envisioned in the Endgame Strategy, why it is expected to work, and why this approach is different from historical combinations of IPV/OPV. If people do not understand the principles involved, implementation will not achieve what is being sought.
- For the IPV introduction process, each country might be starting from a different point based on the historical context. Member States are accordingly requesting tailored support from the Regional Office. WHO, UNICEF and others are working to produce Frequently Asked Questions (FAQs) and other documents, but additional resources will need to be invested in communication on all topics related to introduction.
- ETAGE notes that the challenges for IPV introduction also include licensing of vaccine products and mobilization of sufficient resources. The long-term involvement of GAVI will be decided by the GAVI Board in November. This decision will be instrumental to achieving the Endgame Strategy for polio eradication.

Progress toward measles and rubella elimination in the Region and implementation of the *Package of accelerated action for measles and rubella elimination*

- ETAGE is concerned about persistent immunization gaps, the lack of case-based surveillance, continuing outbreaks of measles and rubella and the lack of an adequate response to these outbreaks in the European Region. Moreover, ETAGE notes that these factors threaten the 2015 measles and rubella elimination target for the Region. To reduce complacency and mobilize the necessary resources to address gaps (also in middle-income and high-income Member States), measles and rubella elimination will need to become a high priority for decision-makers. It is necessary to look at what ETAGE and the Regional Office can do to put pressure on the ministries of health to make elimination a priority.
- ETAGE is enthusiastic about the efforts initiated by WHO/Europe's Vaccine-preventable Diseases and Immunization unit (VPI) under the framework of the *Package of accelerated action for measles and rubella elimination*. The Package encompasses many activities and tools which can be used at country level to enhance elimination efforts, such as the *Guide to tailoring immunization programmes* and *Guidelines for measles and rubella outbreak investigation and response*. At the same time, ETAGE recognizes that ownership in each country is also needed.
- ETAGE recognizes that this effort will also include strengthening relations between organizations, services that provide immunization and educational institutions.

Development of strategies for adult immunization practices

- ETAGE recognizes that adult immunization is an emerging area. Immunization does not end after childhood: it is necessary to extend the concept to one of lifelong immunization. If adult immunization is recommended, a tailored infrastructure needs to be in place for delivery. Topics to be considered are how to reach adult populations, cold chain issues, how to document their immunization status, who in each country is responsible for the adult immunization, the role of health insurance, etc. A set of standards (that tailors immunization practices) to be developed by WHO/Europe would provide a checklist that countries could review and that would assist them in the implementation of an adult immunization programme.
- ETAGE recognizes that there is scope for targeting schools, universities and employers with information on the cost-effectiveness of increasing immunization uptake among young adults.

Graduation challenges – sustaining immunization investments in countries graduating from GAVI support

- ETAGE notes that GAVI has been a catalytic platform for introducing new antigens in immunization programmes and for strengthening immunization programmes in eligible countries.

- ETAGE is concerned that countries identified as graduating from GAVI support face challenges in maintaining the sustainability and quality of their immunization programmes. More clarity is needed regarding post-process, and graduating countries (as well as middle-income countries) need assistance and guidance in areas such as understanding vaccine market dynamics, impact of national procurement systems and regulations on vaccine supply, in order to access quality-assured vaccines at an affordable and optimum price after graduation. ETAGE is accordingly concerned about the lack of transparency regarding vaccine prices and appreciates the work initiated by WHO in this area.
- ETAGE appreciates VPI's ongoing work together with partners and Member States to identify graduation challenges, facilitate inter-country collaboration, and facilitate the development, monitoring and review of transition (graduation) plans.
- ETAGE acknowledges the important role NITAGs will play in mobilizing the financial resources required and in strengthening the programme functions in addressing the graduation challenges. Collecting country-specific data on the burden of vaccine-preventable diseases and the impact of the immunization programme in reducing this burden is needed to demonstrate the importance of the programme. This evidence is the driving force for convincing policy-makers and ministers of health and other ministries to allocate more of their countries' own resources to immunization programmes. WHO/Europe is already assisting countries in using costing and cost-effectiveness data to understand where they are now, where they are heading and what to expect in future.
- With 6 of 17 globally graduating countries located in the European Region, ETAGE notes that experiences gained here will be watched by, and provide valuable lessons for, other regions.

#### Development of a Regional Vaccination Action Plan (RVAP)

- ETAGE supports development of the RVAP, which will set out the Regional Office's vision and strategies for the coming seven years in line with the applicable goals and objectives of the GVAP. The RVAP will be a policy document intended to be operationalized at the country level. ETAGE is pleased to offer assistance and to be actively involved in the development process at all stages, through regular consultations with VPI and participation in country-level consultations.

## Recommendations

1. ETAGE advises the Vaccine-preventable Diseases and Immunization unit of the WHO Regional Office for Europe (VPI) to provide technical assistance to national and supranational regulation authorities in licensing products pertinent to the polio Endgame Strategy.

2. Due to the threat to the 2015 measles and rubella elimination goal for the WHO European Region, ETAGE encourages Member States to formulate or revisit their current action plans for measles and rubella elimination and to urgently address immunity gaps in their populations.
3. Recognizing that most Member States have not developed a framework to provide immunization services to adolescents and adults, ETAGE encourages Member States to include adequate practices and facilities for adult immunization in their health care systems.
4. ETAGE urges VPI to assist GAVI-graduating and lower middle-income Member States in ensuring access to quality-assured vaccines at an affordable and optimal price.
5. ETAGE recommends that WHO support the development of generic training materials on immunization for schools, as school populations are highly receptive to the immunization topic.
6. ETAGE recommends that WHO support the development of training materials on immunization for continuous medical education schemes. Accreditation of this material could take place through national or international medical professional organizations or national licensing schemes.