

Decade of Vaccines Global Vaccine Action Plan SAGE Progress report 2013

Process, data sources and data quality

**Dr Thomas Cherian on behalf of
the Secretariat of the SAGE DoV GVAP Working Group**

SAGE, Geneva, 6th November 2013

**BILL & MELINDA
GATES foundation**



unicef 



GVAP progress review: a shared responsibility

WHA 65.17 – May 2012

- REQUESTS the Director General
 - To **monitor progress and report annually** through the Executive Board, to the Health Assembly, until the Seventy-first World Health Assembly, on progress towards achievement of global immunization targets, as a substantive agenda item **using the proposed accountability framework** to guide discussions and future actions.
- URGES Member States
 - To **report every year to the regional committees** during a dedicated Decade of Vaccines session, on lessons learnt, progress made, remaining challenges and **updated actions** to reach the national immunization targets

The M&E/A Framework and Process

processes for tracking and reporting on some of the aspects of GVAP. This applies in particular to the process to monitor commitments and resources as described in the related documents for this session. [Figure 2](#) illustrates the proposed GVAP M&E/A Framework process. Guidelines for making immunization commitments under the UN Secretary General Global Strategy for Women's and Children's Health framework can be found on each Decade of Vaccines (DoV) Collaboration Leadership Council website.

The GVAP M&E/A Framework will be applied to: (1) monitoring results (defined as progress against the GVAP Goals' and Strategic Objectives' indicators); (2) documenting and monitoring stakeholder commitments to GVAP and DoV; (3) tracking resources invested in vaccines and immunization; and (4) inclusion of independent oversight and review of progress, through the World Health Organization Strategic Advisory Group of Experts (SAGE) on Immunization, in the reporting to the governing bodies.

A final set of GVAP indicators ([see Table 12](#) and [Table 13](#)) was reviewed and approved by SAGE during their 6-8 November 2012 meeting, and will be presented to the WHO EB in January 2013 and the WHA in May 2013.

Process: Composition of the SAGE DoV GVAP WG

SAGE MEMBERS

- Narendra **Arora** (Chair), Republic of India
- Yagob **Al Mazrou**, Kingdom of Saudi Arabia

EXPERTS

- Alejandro **Cravioto**, Republic of Korea
- Fuqiang **Cui**, People's Republic of China
- Elizabeth **Ferdinand**, Barbados
- Shawn **Gilchrist**, Canada
- Alan **Hinman**, United States of America
- Stephen **Inglis**, United Kingdom of Great Britain and Northern Ireland
- Amani Mahmoud **Mustafa**, Republic of the Sudan
- Rebecca **Martin**, United States of America
- Rozina **Mistry**, Islamic Republic of Pakistan
- Helen **Rees**, Republic of South Africa
- David **Salisbury**, United Kingdom of Great Britain and Northern Ireland

SAGE DoV GVAP WG: Terms of reference

- Review the **quality of the data**
- Make recommendations on changes to the **formulation of the indicators**, operational definitions and/or the **processes for data collection**;
- Independently **evaluate and document progress** using the GVAP Monitoring & Evaluation / Accountability Framework;
- **Identify successes, challenges and areas where additional efforts** or corrective actions by countries, regions, partners, donor agencies or other parties, are needed;
- Identify and document **best practices**;
- Draft the **GVAP annual progress report** to be presented to the SAGE for review, and thereafter, with SAGE inputs, be submitted for discussion at WHO EB and WHA.

Sources of information: country and regional

● Country data

- Annual WHO UNICEF Joint Reporting Forms (**JRF**)
- WHO and UNICEF Estimates of National Immunization Coverage (**WUENIC**)
- Country **surveillance reports**
- Demographic and Health Survey (**DHS**), Multiple Indicator Cluster Surveys (**MICS**) reports, **EPI** coverage surveys
- Lot Quality Assurance (**LQA**) Cluster Sampling (neonatal tetanus)

● Regional reports

- Regional reports on status of disease eradication/ elimination (regional certification/ verification commissions)

Sources of information: global

- WHO Pre-Qualified Vaccines & Devices databases
- Annual NRAs surveys
- Countdown 2015 progress reports
- WHO Health Equity Monitor Database of the Global Health Data repository (DHS & MICS)
- WHO Immunization Data Repository
- Institutional or Agency reports
- GAVI Alliance country monitoring system
- UNICEF Supply Division, PAHO Revolving Fund, V3P project (for vaccine prices)...

Data compilation

- GVAP secretariat report
 - Results
 - Against each indicator for goals and strategic objectives
 - Case studies on approaches to increase community demand and address refusals
 - Narrative report on vaccine price trends
 - Did not include all R&D indicators (to be presented biennially)
 - Commitments
 - Based on tracking of commitments for immunization as part of process for the Commission on Information and Accountability conducted for the Partnership for Maternal, Newborn and Child Health
 - Resources
 - Planned activities to strengthen resource tracking through System of Health Accounts
- Independent stakeholder submissions

Data compilation

- GVAP secretariat report

- Results

- Against each indicator for goals and strategic objectives
 - Case studies on approaches to increase community demand and address

Very tight timelines (from data availability to production of report): about 1 month for many of the indicators

- Resources

- Planned activities to strengthen resource tracking through System of Health Accounts

- Independent stakeholder submissions

Review by SAGE WG

- For each indicator (grouped together by Goal/SO, e.g. all coverage indicators grouped together)
 - Assignment of indicators to two WG members as primary and secondary reviewers
 - Report from primary reviewer
 - Comments from secondary reviewer
 - General discussion and consensus on progress and recommendations
- Other sessions and discussion
 - Data quality
 - JRF, WUENIC, all other data sources
 - Reasons underlying low coverage
- WG report
 - Assessment of progress
 - Targeted recommendations for future actions

Availability and quality of data

AVAILABILITY

- Incomplete reporting of data through JRF
- Limited number of surveys to monitor some indicators
 - Coverage by wealth quintiles
- No vaccine price data from self-procuring countries
- Current process for tracking commitments insufficient to track immunization-specific commitments
- Capacity strengthening for reporting immunization expenditures through SHA only being scaled up
 - Data will only gradually become available over the decade

QUALITY

- Inconsistency in reported data from different sources
 - JRF versus surveillance reports
 - Country official coverage versus survey coverage
 - Coverage from different surveys
- Difficulties in assessing accuracy of district level coverage
- Implausible trends in reports
 - Immunization expenditures

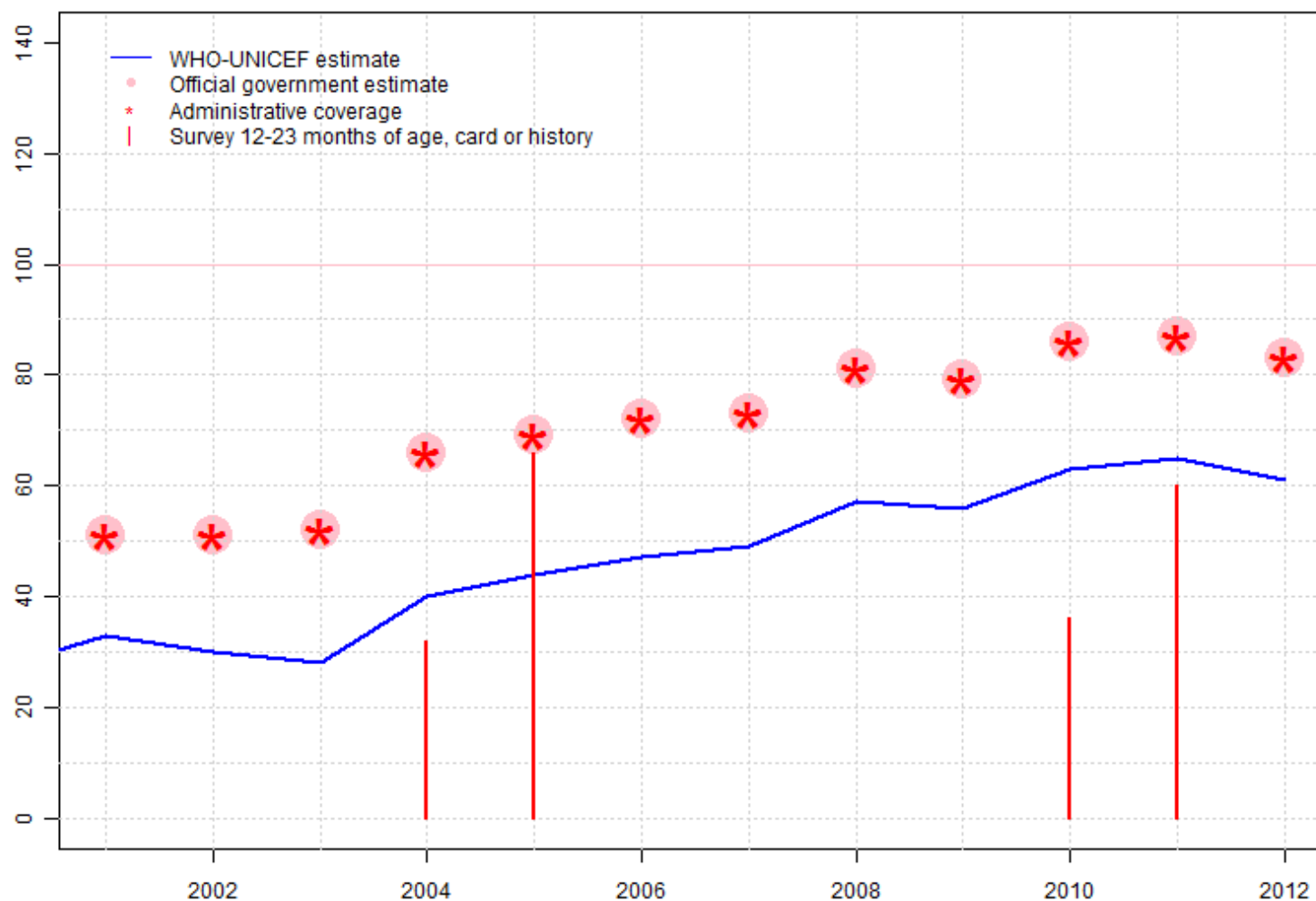
WHO UNICEF JRF:

Completeness of Selected Data Elements

188 (97%) of Member States reported data for 2012 through the JRF

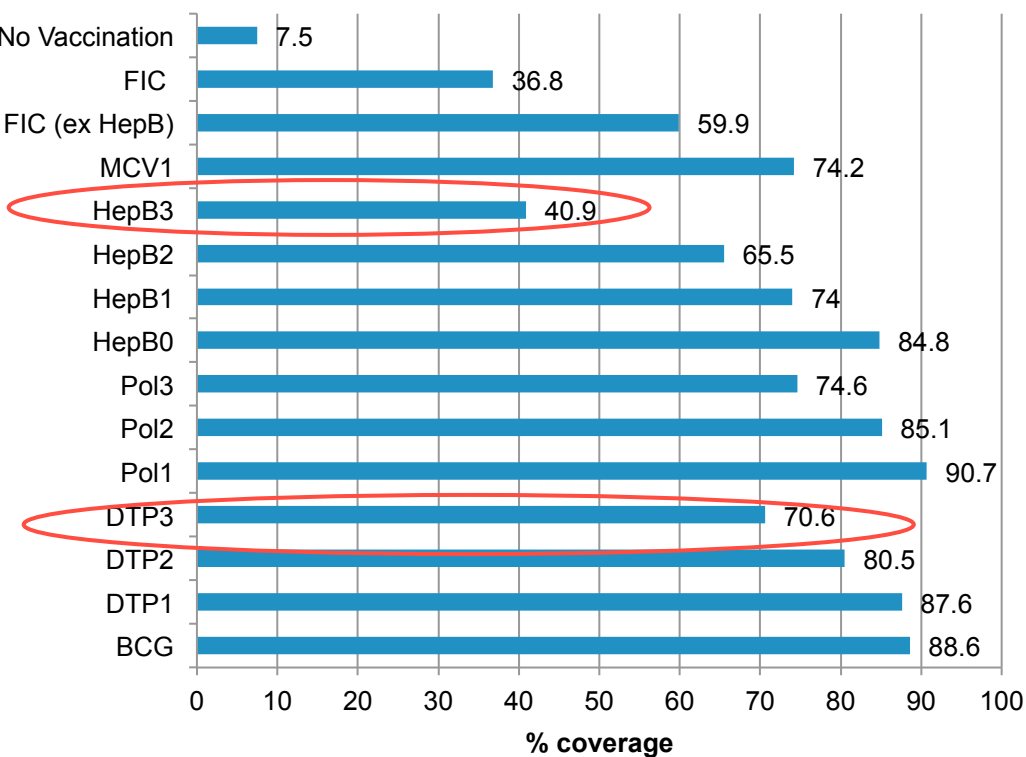
- Surveillance (SO4.4):
 - Surveillance system in place for Invasive Bacterial Diseases: **176 (94%)**
 - Surveillance system in place for Rotavirus: **175 (93%)**
- Coverage (G3.1, G3.2):
 - DTP3 administrative coverage: **167 (89%)**
 - DTP3 official coverage: **176 (94%)**
- Immunization Indicators
 - % of districts $\geq 80\%$ DTP3 coverage (SO3.1): **153 (81%)**
 - Existence of a NITAG (SO1.2): **187 (96%)**
 - % of expenditure on vaccines financed by government funds (SO1.1): **149 (79%)**

DTP3 coverage in Ethiopia

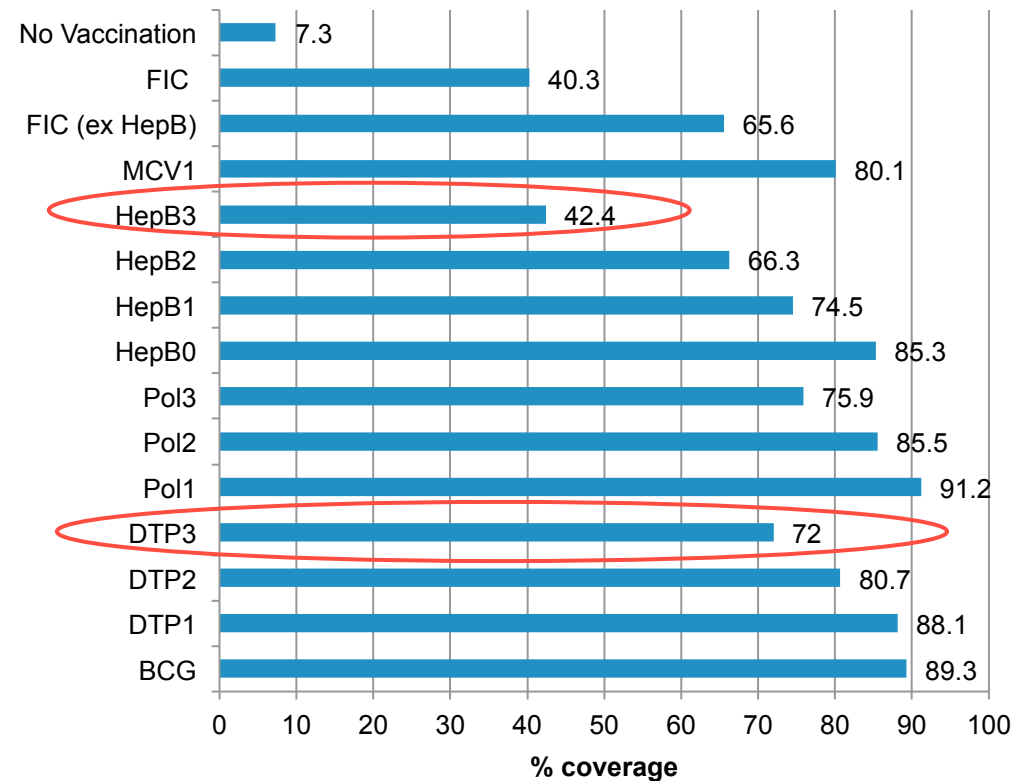


Immunization coverage, Indonesia

DHS 2012



Coverage in infants up to 12 months of age



Coverage in infants up to 23 month of age

WUENIC: discrepancy with country-reported coverage (DTP3)

	N of countries	% of countries	% total birth cohort
WUENIC = Reported data	129	66%	46%
Multiple data source*	68	35%	35%
Single data source	61	31%	11%
WUENIC <> Reported	49	25%	48%
Estimate < reported	43	22%	47%
Estimate > reported	6	3%	1%
Data not reported	17	9%	7%

* Survey in last 5 years

WUENIC: discrepancy with country-reported coverage (DTP3)

	N of countries	% of countries	% total birth cohort
WUENIC = Reported data	129	66%	46%
Validity of district coverage that are based on reported data when the reported coverage and WUENIC do not match			
Data not reported	17	9%	1%

* Survey in last 5 years

Summary

- First annual review of progress using the GVAP M&E/A framework, with independent review by SAGE WG
- Multiple sources of data; but only used existing processes for data reporting
- Data availability and quality are a challenge
- Tight timelines (from data receipt to report to WG) makes it difficult to raise queries to validate data or obtain missing information