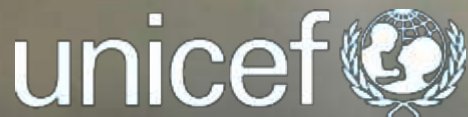


Immunization for Children

SAGE Presentation

October 20-22, 2015

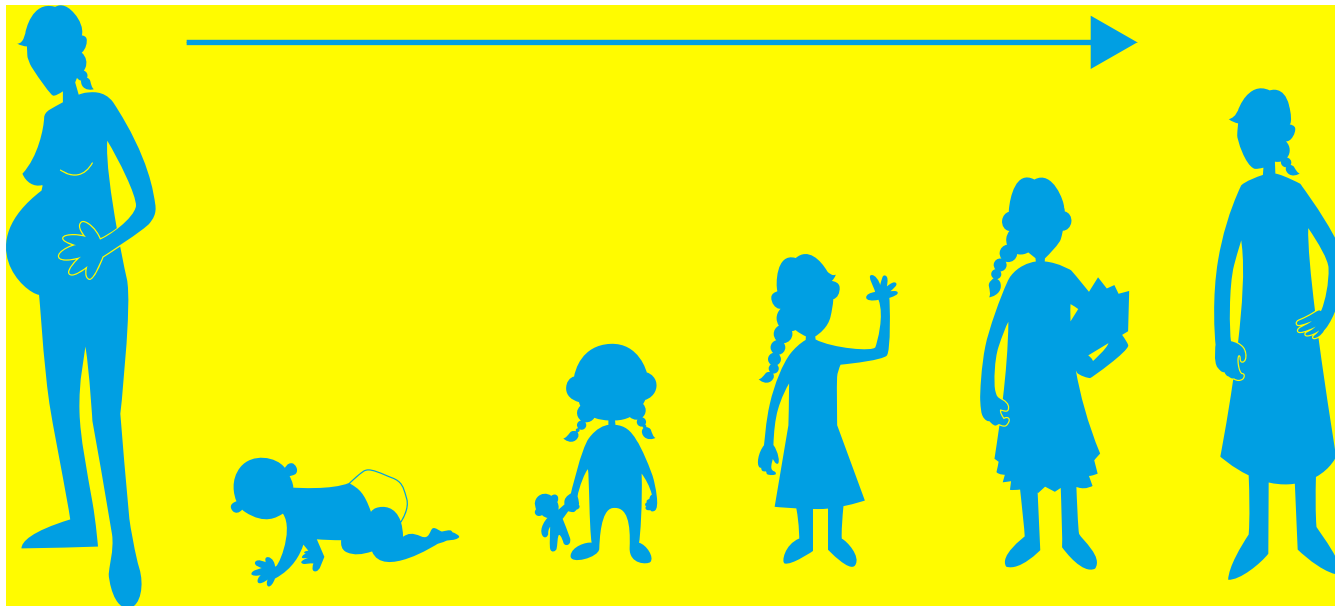


unite for
children

UNICEF Strategic Plan 2014-2017- realizing the rights of every child, especially the most disadvantaged

SURVIVE
FROM ARRIVAL

TO THRIVE
INTO ADULthood



1
HEALTH

2
HIV & AIDS

3
WASH

4
NUTRITION

5
EDUCATION

6
CHILD
PROTECTION

7
SOCIAL
INCLUSION

Realizing the Rights of Every Child

UNICEF's Mission and GVAP

UNICEF's Mission Statement

UNICEF is mandated by the United Nations General Assembly to advocate for the protection of children's rights, to help meet their basic needs and to expand their opportunities to reach their full potential.

UNICEF is guided by the Convention on the Rights of the Child and strives to establish children's rights as enduring ethical principles and international standards of behaviour towards children.

UNICEF insists that the survival, protection and development of children are universal development imperatives that are integral to human progress.

UNICEF mobilizes political will and material resources to help countries, particularly developing countries, ensure a "first call for children" and to build their capacity to form appropriate policies and deliver services for children and their families.

UNICEF is committed to ensuring special protection for the most disadvantaged children - victims of war, disasters, extreme poverty, all forms of violence and exploitation and those with disabilities.

UNICEF responds in emergencies to protect the rights of children. In coordination with United Nations partners and humanitarian agencies, UNICEF makes its unique facilities for rapid response available to its partners to relieve the suffering of children and those who provide their care.

UNICEF is non-partisan and its cooperation is free of discrimination. In everything it does, the most disadvantaged children and the countries in greatest need have priority.

"In everything it does, the most disadvantaged children and the countries in greatest need have priority"

unite for
children

unicef 

"disease burdens tend to be disproportionately concentrated in more marginalized populations, reaching more people will not only achieve a greater degree of equity, but will also achieve a greater health impact and contribute to economic development"



Global Vaccine Action Plan

2011–2020

UNICEF's Health strategy guided by SDGs, EWEC, CRC, CEDAW

Convention on the Rights of the Child (CRC)

Convention on the Elimination of
all Forms of Discrimination
against Women (CEDAW)



**Sustainable
Development
Goals
(SDGs)**



**Every Woman
Every Child
Global Strategy
(EWEC)**



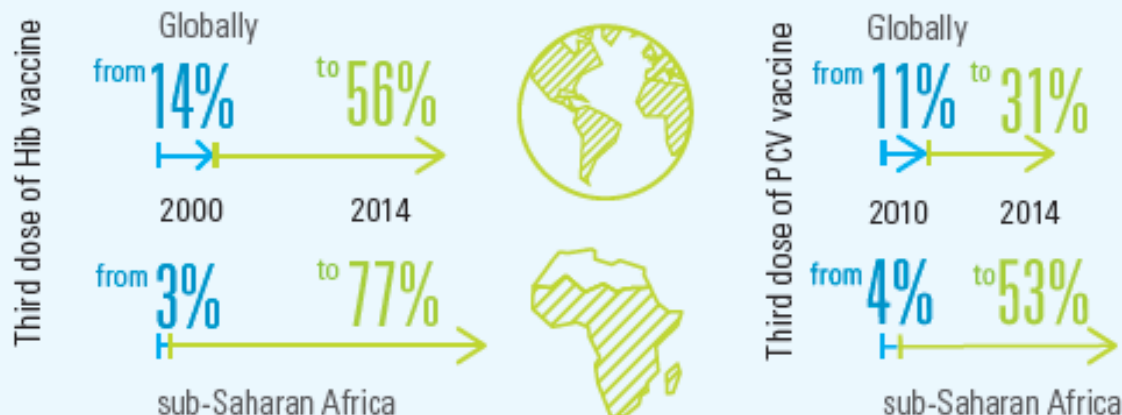
unicef
Health
2015-2030
Strategy

Integrated approaches to major childhood killers

Months 1 to 59

Increased coverage of high impact interventions and strengthened health systems are key factors in the decline in under-five mortality

Coverage of key pneumonia-related vaccines is increasing — and progress in sub-Saharan Africa is faster than the global average



Globally, just

3 in 5 children with symptoms of ARI are taken to health providers for appropriate care



Today, **>90%** of the world's population uses improved drinking water sources and

2/3 use improved sanitation facilities



Progress has been slow in treating sick children with diarrhoea

Today, just **2 in 5** children who become ill with diarrhoea receive ORS

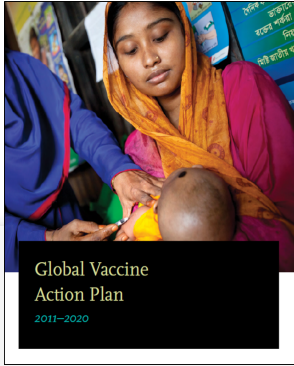


In 2015

>2/3 of children in sub-Saharan Africa slept under an insecticide treated bednet



UNICEF's major areas of work in immunization contribute to the GVAP Goals



Goals

1. Achieve a world free of poliomyelitis
2. Meet global and regional elimination targets
3. Meet vaccination coverage targets in every region, country and community
4. Develop and introduce new and improved vaccines and technologies
5. Exceed the Millennium Development Goal 4 target for reducing child mortality

Areas of work for UNICEF in immunization

Polio eradication and MNT

Coverage with equity – tactics for reaching marginalized communities

Accelerated disease control (Measles, Rubella, Meningitis, YF)

Communication for immunization

Immunization supply chain management

Immunization system strengthening and finance

Procurement and supply management

Data for immunization (e.g. JRF, WUENIC, home based records,...)

And other Divisions (e.g. Communication, Partnerships, Emergencies, ...)

Supply Division

Program Division

Other Divisions

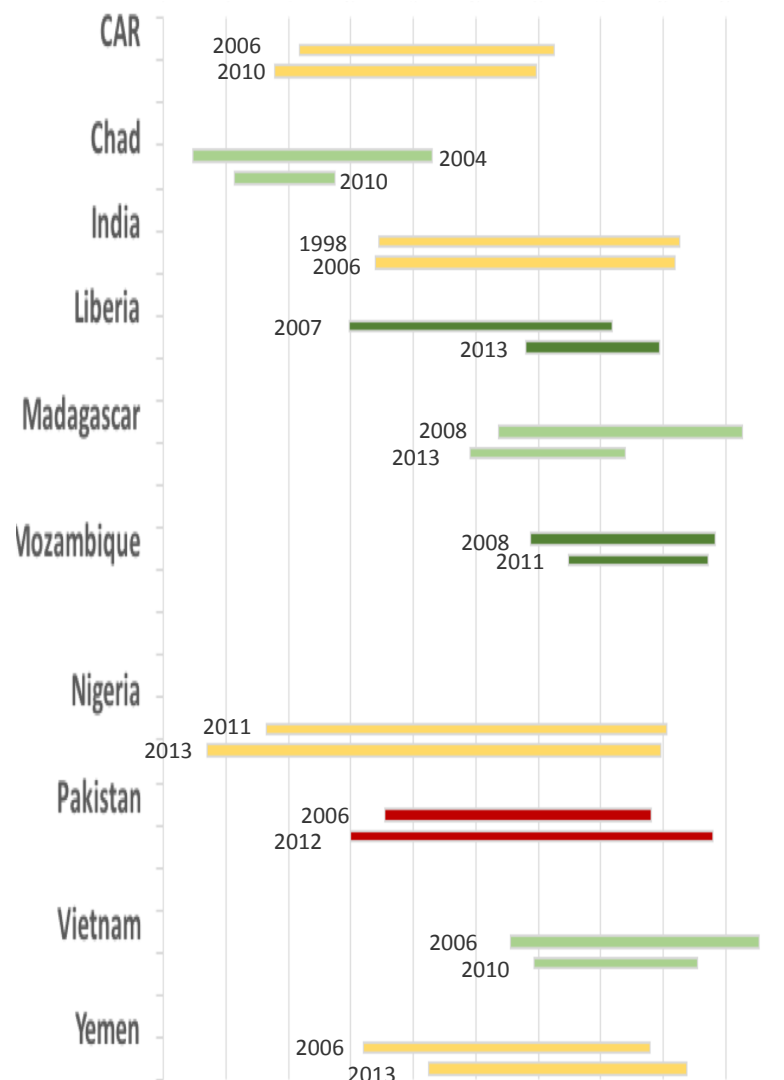


Immunization for Children: Coverage with Equity

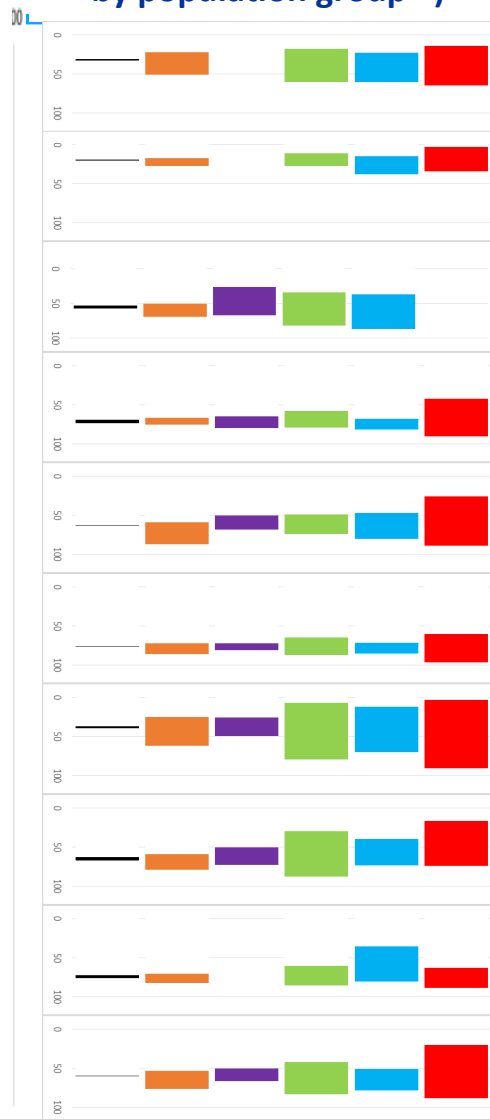
UNICEF equity of immunization coverage analysis in 10 countries

Affected communities

Evolution of DTP3 coverage gap by wealth quintiles (2006 – 2013)

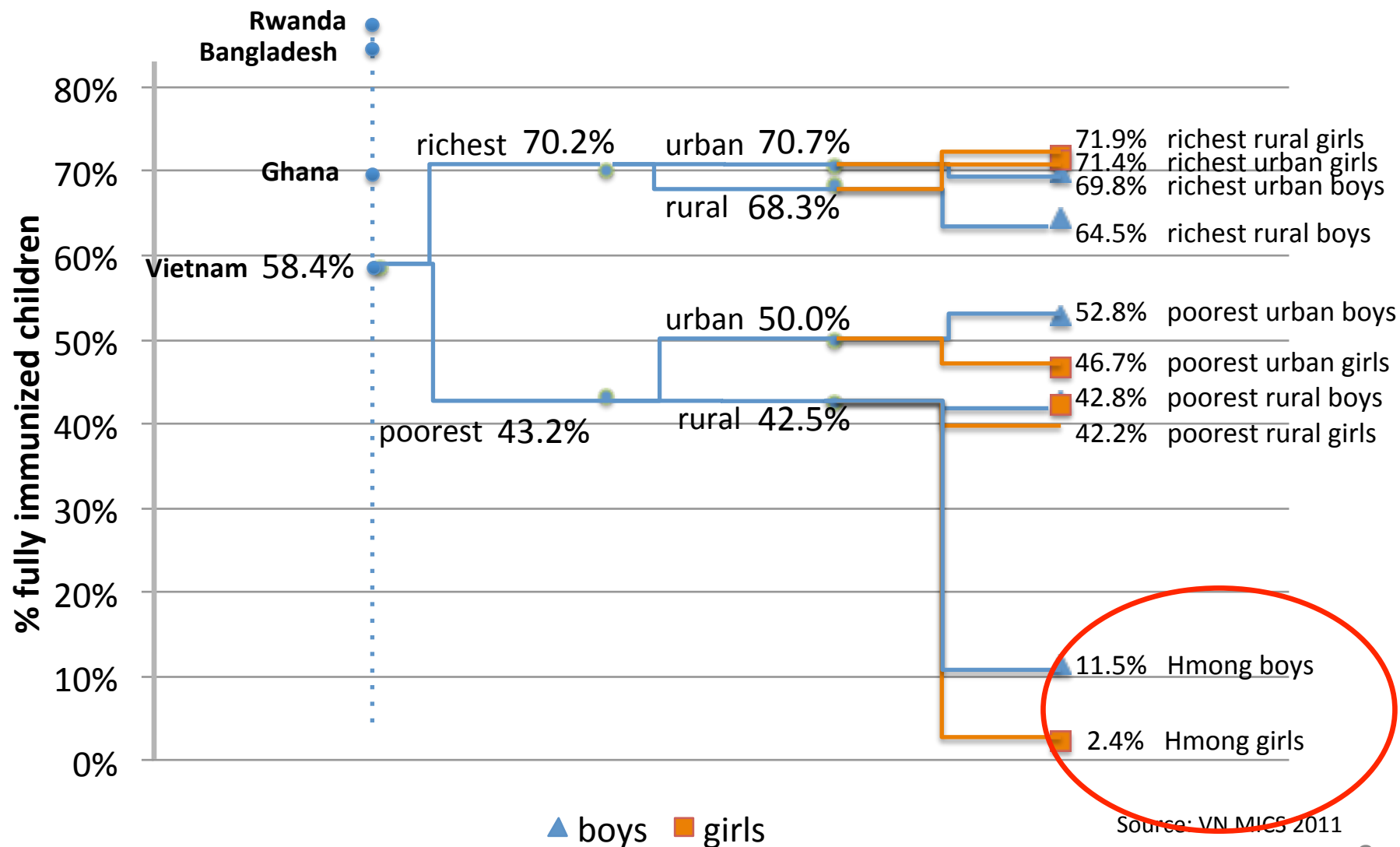


Equity gap by population group *)



Remote rural	Urban poor	Ethic communities	Conflict / internally displaced	
X			X	CAR
X				Chad
X	X	X		India
	X			Liberia
X				Madagascar
X				Mozambique
X	X			Nigeria
X		X		Pakistan
		X		Vietnam
		X	X	Yemen

And often only apparent within communities

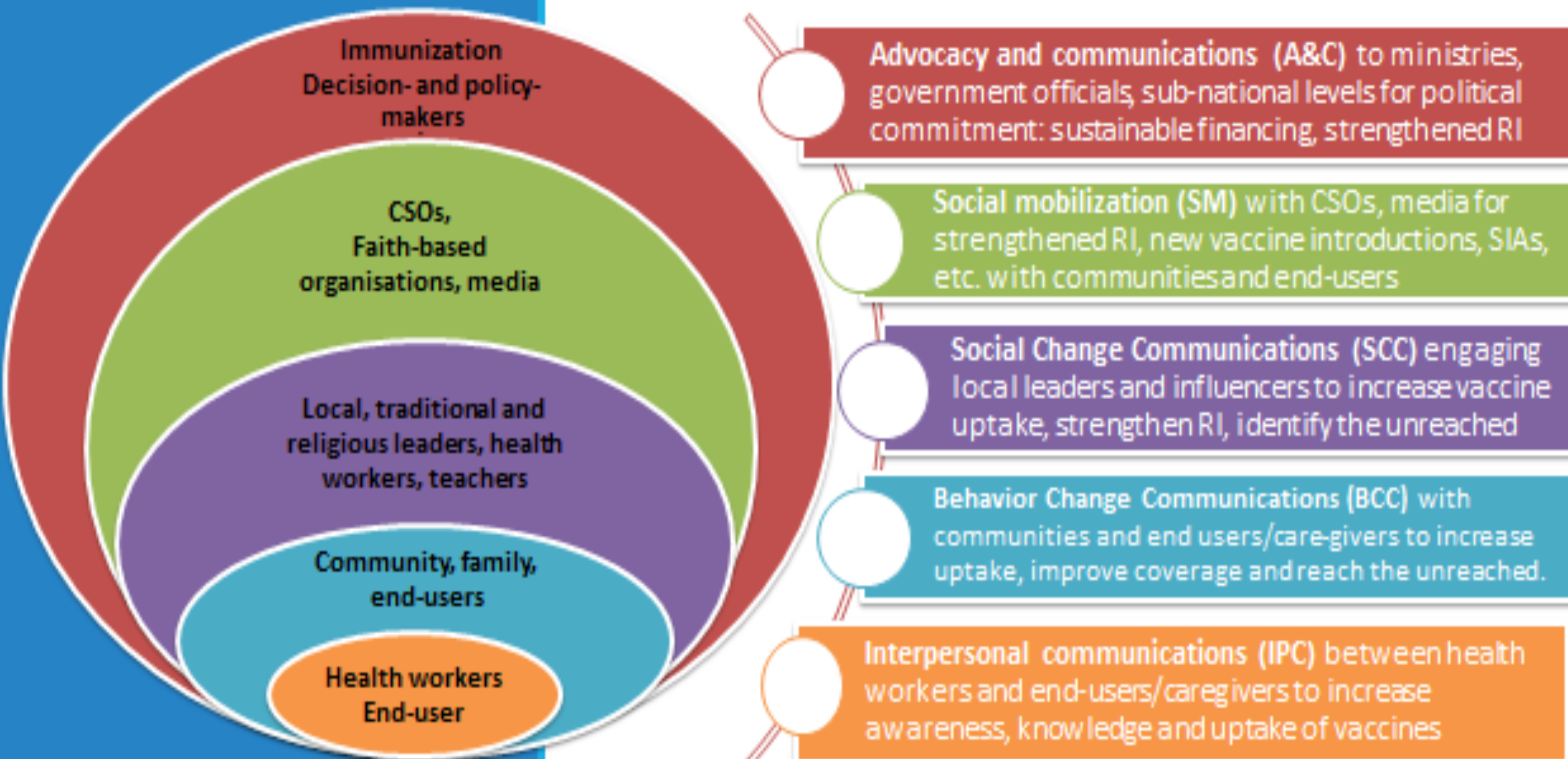




Immunization for Children: Communication for Immunization

Advocacy and Communication for Immunization

The A&C4i continuum of interventions



Polio Lessons for RI

POLIO ERADICATION

THE LAST 1%

BEFORE THE KNOCK

Mass reach media and community engagement rebrands the effort to build trust with the vaccinators while changing the conversation from polio to children's health.



Information
via SMS



Film



TV



Print



Radio



Social Mobilization

THE INTERACTION

Support the moment of contact by equipping the vaccinators with tools to help professionalize them and build rapport with the communities they serve.

Leave Behinds



IPC Training



Mobile
Multimedia



Messaging

Business
Cards



AFTER THE VACCINATION

Community discussion provides feedback, while engaging leave behinds help influence social norms about vaccination.



Rapid Data and
Feedback Collection

Leave Behinds Become
Kid's Toys



Community
Meetings

Branded
Swag



Immunization Supply Chain Management



Immunization Supply Chain Management

Recent SAGE interactions

Nov 2013 – introduced issues

Session 9: Immunization supply chain & logistics

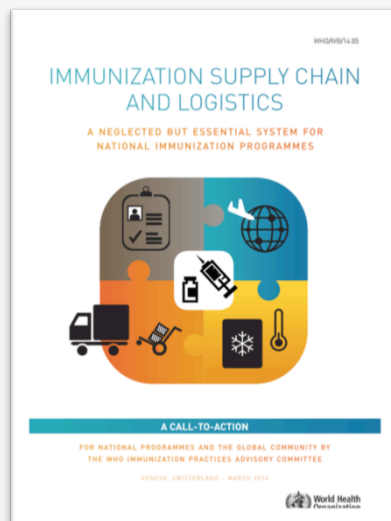
Key challenges and future direction

Piyani Tharmaphornpilas



March 2014 – Launched IPAC Call To Action

Showcased solutions



Selective highlights and innovations

Ebola – 70 degrees Celsius cold chain testing new innovations



Supported GAVI Alliance to establish and operationalize new Cold Chain Equipment Platform

Gavi has established the CCE optimisation platform to support countries to improve their supply chain

- | | |
|---|---|
| <p>What will the platform do?</p> <p>1</p> | <ul style="list-style-type: none"> Cold chain equipment is an essential component of the vaccine supply chain that suffers serious challenges currently The platform will address cold chain equipment challenges in three ways: <ul style="list-style-type: none"> Strengthening the coverage and equity of immunisation Promoting the right technology for each facility Incentivising reliable and robust equipment performance |
| <p>How will it work?</p> <p>2</p> | <ul style="list-style-type: none"> The platform will support the purchase, delivery, installation and training of higher-performing CCE devices Specifically, the platform will support eligible countries using a tiered co-investment model depending on a country GNI segment In addition to providing funding to countries, the platform will involve all key stakeholders to improve the CCE market situation |
| <p>How will countries apply?</p> <p>3</p> | <ul style="list-style-type: none"> The platform application is in line with the HSS process and includes additional information covering the platform Specific country application process will be adapted to the country situation: <ul style="list-style-type: none"> Countries applying for a new HSS grant will submit a single application for HSS and the platform Countries with an existing HSS grant or countries not using HSS money will only submit a supplementary document covering the platform |

1 Fund re-allocation only possible if either CCE or SC are part of the country HSS objectives



Immunization for Children: Sustainable Financing

Revitalizing a financial mechanism for immunization- the Vaccine Independence Initiative

- A financial mechanism to ensure a systematic, sustainable vaccine supply for countries which can afford to finance their own vaccine needs but may require certain support services
- Flexible credit terms which enable the country to pay after the vaccine is received, and UNICEF can accept local or hard currency payment
- VII right-sizing- for decision at UNICEF Executive Board in February 2015
 - Increase Capital base from \$10M to \$100M
 - Review of subscribing country ceiling including to maximise turns
 - Potential product scope covered to reflect countries' current health and other commodity needs



Immunization for Children: Procurement and Supply

UNICEF procures a range of immunization supplies on behalf of 80-100 countries annually

Vaccines: BCG, DTP, TT/Td/DT, Measles containing, OPV, HepB, YF, DTP-HepB, DTP-HepB/Hib, DTP/Hib, Hib, MR, Meningitis, MMR, PCV, RV IPV, HPV, etc.

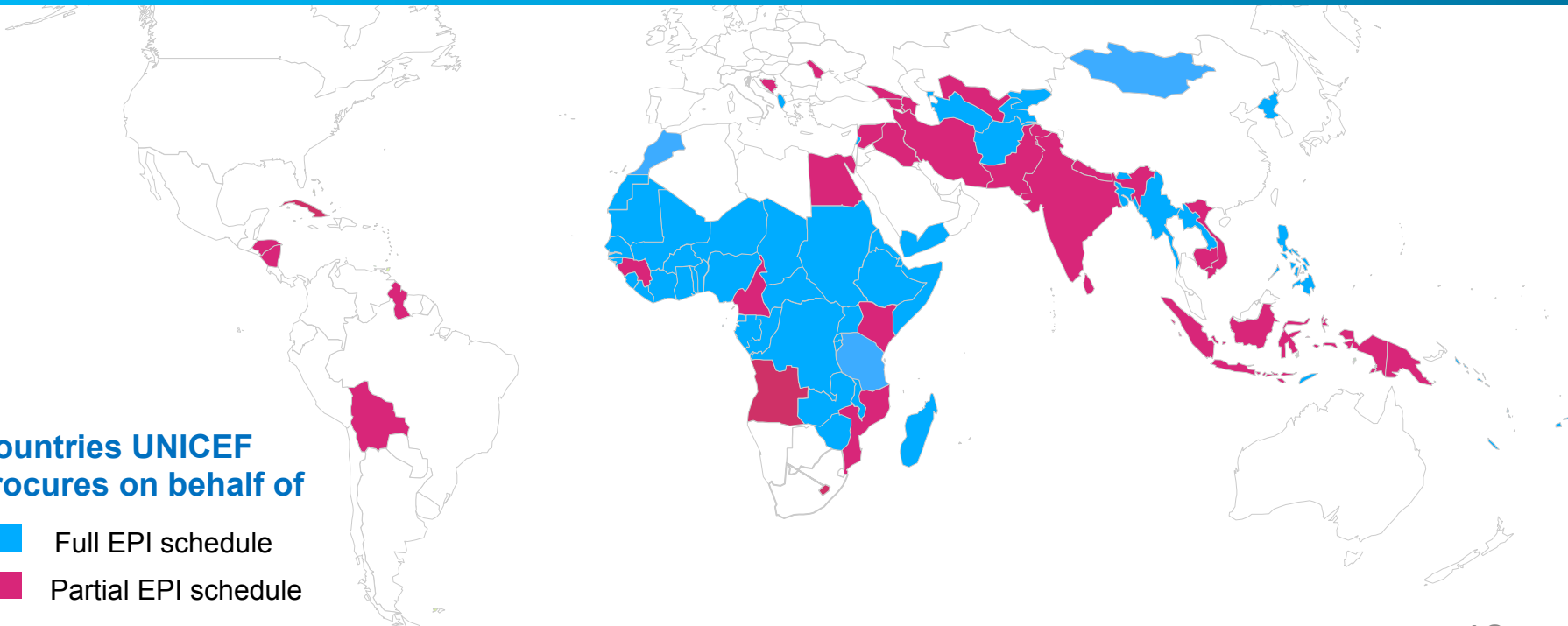
Safe Injection equipment

Cold Chain Equipment

2014 Vaccines Supplies: US\$ 1.480 billion **2.79 billion doses** **2,555 deliveries**

**Countries UNICEF
procures on behalf of**

- Full EPI schedule
- Partial EPI schedule



UNICEF's procurement strategies are focused on achieving Vaccine Security: the sustained, uninterrupted supply of affordable, vaccines of assured quality

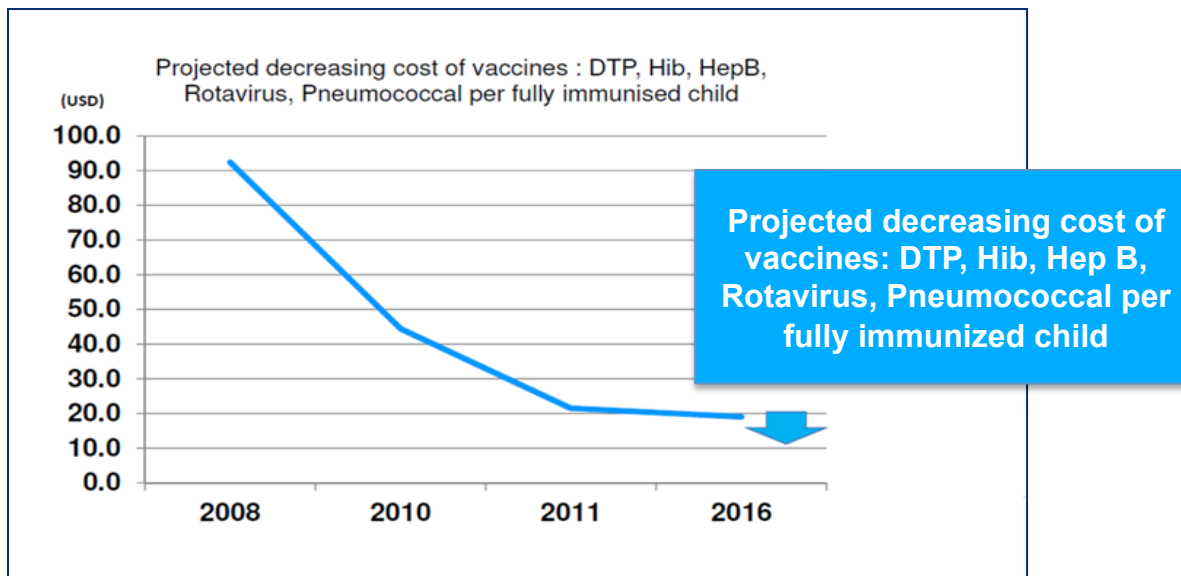
Accurate forecasting – Available funding – Appropriate contracting


The Vaccine Procurement Principles, implemented following the supply crisis in the traditional vaccine markets, are relevant for all vaccines to ensure a healthy market

- 1 A healthy industry is vital to ensure uninterrupted and sustainable supply of vaccines
- 2 Procurement from multiple suppliers for each vaccine presentation
- 3 Procurement from manufacturers in developing countries and industrialized countries
- 4 Paying a price that is affordable to Governments and Donors and a price that reasonably covers manufacturers minimum requirements
- 5 UNICEF should provide manufacturers with accurate and long-term forecasts; Manufacturers should provide UNICEF with accurate and long-term production plans
- 6 As a public buyer, providing grants to manufacturers is not the most effective method of obtaining capacity increases
- 7 The option to quote tiered pricing should be given to manufacturers.

What does success look like for children?

- **Polio eradication is on-track. Countries introduce new vaccines and sustain coverage with new and traditional vaccines** in order to reduce mortality and morbidity from vaccine preventable diseases
- **Markets are healthy & vaccine prices are lower:**
 - New vaccine (PCV, Rotavirus, HPV, IPV) for Middle Income Countries
 - Full schedule of childhood vaccines for Low Income Countries (DTP, HepB, Hib, Measles/MR, BCG, Rota, PCV)
- **Countries are able to sustain their own vaccine procurement processes**
- **Country immunization supply chains are measurably better performing**





UNICEF: Working with communities,
governments, and partners to do what
it takes...

...to immunize every child



unite for
children

Thank you!

unicef 