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WHO events addressing public health priorities

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[1] This report is extracted from the Summary report on the twenty-third meeting of the Eastern Mediterranean Regional Working Group on GAVI, the Vaccine Alliance, Muscat, Oman, 15–16 December 2017 (http://applications.emro.who.int/docs/IC_Meet_Rep_2018_EN_17001.pdf?ua=1).

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The Global Alliance for Vaccines and Immunization (GAVI) is an international organization created in 2000, which brings together public and private sectors with the shared goal of creating equal access to new and underused vaccines for children living in the world's poorest countries (1).

The twenty-third meeting of the Eastern Mediterranean Regional Working Group on GAVI, the Vaccine Alliance, was held during 15–16 December 2017, Muscat, Oman. It was organized by the World Health Organization (WHO) as Chair of the Regional Working Group and attended by ministry of health staff from both immunization and health system departments in GAVI-supported countries of the WHO Eastern Mediterranean Region, as well as representatives from GAVI Secretariat, the Bill & Melinda Gates Foundation, Centers for Disease Control and Prevention (CDC), United Nations Children's Fund (UNICEF) and WHO staff from headquarters, the Regional Office and country offices (2).

The objectives of the meeting were to:

review progress in implementing Expanded Programme on Immunization (EPI) activities supported by GAVI;

identify weaknesses, gaps and recommend corrective measures;

brief and update participants on new GAVI policies and new GAVI window of support ;

review progress on the implementation of GAVI partners' engagement framework (PEF) activities; and

review implementation of the health system strengthening-agreed activities that should improve EPI access and coverage in GAVI-eligible countries.

The meeting was the first to be held with the updated terms of reference agreed upon at the twenty-second meeting of the Regional Working Group on GAVI (3). The regional working groups are the primary regional forums for GAVI partner and programme coordination, consensus building, and monitoring the implementation of GAVI resources and support, in the context of GAVI's PEF.

The meeting was inaugurated by Dr Akjemal Magtymova, WHO Representative in Oman, who highlighted the sincere efforts of GAVI in supporting countries to achieve the goals of Global Vaccine Action Plan (4) and the Eastern Mediterranean Vaccine Action Plan 2016–2020 (5). Dr Nadia Teleb, WHO Regional Advisor for Vaccine Preventable Diseases and Immunization, noting WHO's role in chairing the Regional Working Group since the inception of GAVI, welcomed UNICEF as the new Chair and stressed the importance of the Group for successful utilization of GAVI support. Ms Nicolette Selman, GAVI Regional Head of Country Support, acknowledged the progress achieved in some countries, and encouraged all countries to achieve the global immunization goals.

## Summary of discussions

It was noted that the GAVI 2016–2020 strategy necessitates new ways of working. The GAVI Alliance needs to renew the focus of its investments to improve coverage and equity in the Region. Participants were briefed on the fragility, emergencies and refugee policy that was approved by the GAVI Board in June 2017, in response to a changing global context. Afghanistan, Somalia, Sudan and Yemen are the countries affected by the policy in the Region. The key principles for PEF were outlined as being country focus, differentiation, transparency and accountability. It was agreed that for 2018, PEF targeted country assistance planning will be done through the One targeted assistance (TA) Plan (6).

GAVI's approach was welcomed by participants, who requested greater clarity on flexibility regarding yellow fever and meningitis, as well as specific plans for refugee and cross-border activities. The need to simplify processes was also highlighted by participants.

Moreover, participants were briefed that the average Penta3 coverage for 2016, as per WHO/UNICEF estimates, for the six GAVI support-receiving countries in the Region was 73%, compared with 91% for the remaining 16 countries. An estimated 3.7 million infants in the Region did not receive their third dose of diptheria-tetanus-pertussis (DTP) vaccine during 2016, with 98% of them living in countries facing difficult situations (7).

## Recommendations

### To Member States

Analyse coverage and equity, and determine why coverage is low and unequitable in specific populations and where the unimmunized children are.

Review implementation progress regularly, identify bottlenecks and take remedial actions in consultation with in-country partners.

Target and tailor strategies to address coverage and equity constraints and enhance immunization outcomes.

Conduct the application development process in a coordinated and comprehensive manner following a specific timeline.

Ensure long term planning in a holistic manner to identify the need for technical assistance.

Provide a plan for the continuation/expansion of surveillance activities, so that WHO can develop a proposal to secure the required funding from partners.

Put more effort into improved data quality, analysis and availability, to allow evidence-based discussions during the Joint Appraisal.

Identify missed children, and prepare strategies and activities to reach them.

**To partners and GAVI Secretariat**

Support countries in the above mentioned activities.

Ensure the quality and timeliness of technical assistance is identified.

Modify the technical assistance planning template to capture staff and activity costs separately in a separate worksheet.

Extend the duration of the grant beyond two years for better planning.

Issue standard guidance to senior country managers on the number and formulation of milestones for mid and end of year.

Allow the leverage of existing resources for continuation of important surveillance activities.

Request UNICEF to share their experience of urban immunization, for instance at EPI manager/regional working group meetings.

**To WHO**

expedite the streamlining of administrative processes to support countries in implementing planned activities in a timely manner.

ensure greater engagement in supporting country teams in the application development process to ensure quality.

Support better documentation in countries of the relevant information required for the application process.

Develop a proposal based on country needs for continuation/expansion of surveillance activities.

## References

1. Gavi. About Gavi, the Vaccine Alliance. Geneva: Gavi; 2017 (https://www.gavi.org/about/).
2. World Health Organization Regional Office for the Eastern Mediterranean (WHO/EMRO). Summary report on the Twenty-third meeting of the Eastern Mediterranean Regional Working Group on Gavi, the Vaccine Alliance. Cairo: WHO/EMRO; 2018 (http://applications.emro.who.int/docs/IC_Meet_Rep_2018_EN_17001.pdf?ua=1).
3. World Health Organization Regional Office for the Eastern Mediterranean (WHO/EMRO). Summary report on the Twenty-second meeting of the Eastern Mediterranean Regional Working Group on Gavi, the Vaccine Alliance. Cairo: WHO/EMRO; 2017 (http://apps.who.int/iris/bitstream/handle/10665/255796/IC_Meet_Rep_2017_EN_19886.pdf?sequence=1&isAllowed=y).
4. World Health Assembly. Global Vaccine Action Plan. Geneva: World Health Assembly; 2012 (http://www.who.int/immunization/global_vaccine_action_plan/GVAP_doc_2011_2020/en/).
5. World Health Organization Regional Office for the Eastern Mediterranean (WHO/EMRO).

The Global Vaccine Action Plan. Cairo: WHO/EMRO; 2015 (http://applications.emro.who.int/docs/RC62_presentation_technical_papers_2015_6_16470_EN.pdf).

6. Gavi. Partners' engagement framework. Geneva: Gavi; 2017 (https://www.gavi.org/about/governance/.../06---partners--engagement-framework).

7. World Health Organization. Global Vaccine Action Plan: regional reports on progress towards GVAP–RVAP goals. Geneva: World Health Organization; 2017 (http://www.who.int/immunization/global_vaccine_action_plan/web_regional_gvap_reports_2017.pdf?ua=1).

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