



Putting Children at the Heart of the Decade of Vaccines

The IFPMA Annual World Health Assembly (WHA) reception provided a unique opportunity for over 160 people to network during one of the most important global public health meetings of the year and to share viewpoints on an essential public health theme: "Putting Children at the Heart of the Decade of Vaccines."

A panel of experts from a wide range of backgrounds gave their perspectives on vaccination, one of the world's most cost-effective public health measures which helps save the lives of millions of children from preventable diseases. Although investment in R&D, largely by the pharmaceutical and biotechnology industry, has resulted in a broad range of vaccines targeting over 25 infectious diseases, three million children still die each year from vaccine preventable diseases.

A top global public health priority, scaling-up vaccinations was a key agenda item at the WHA. Initiated by the Bill and Melinda Gates Foundation, the Decade of Vaccines (DoV) aims to bring the full benefit of immunization to 'all people by 2020 and beyond.' With input from numerous stakeholders, the DoV Collaboration drove the development of the Global Vaccine Action Plan (GVAP), which was considered

by Member States during the 2012 WHA.

The IFPMA panel discussion, moderated by Andrew Jack, pharmaceutical correspondent for the *Financial Times*, provided a forum to discuss how public health policymakers and the research-based pharmaceutical industry can make the DoV vision a reality. In his opening remarks, Eduardo Pisani, IFPMA Director General, emphasized the industry's commitment to the DoV initiative.

"The IFPMA has worked as a partner with the DoV Collaboration by providing our experience and expertise to help make the DoV action plan an effective program for people around the world. Our focus and contributions have centered on strengthening availability, affordability, adoption, and alliances," Mr Pisani said. Additionally, the IFPMA delivered a statement on the GVAP at the WHA later in the week.

Dr Flavia Bustreo, Assistant Director General for Family, Women's and Children's Health at the World Health Organisation

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Dr Ciro de Quadros, Steering Committee Co-chair of the DoV Collaboration and Executive Vice President of the Sabin Vaccine Institute

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Dr Michael Watson, Vice President of Vaccination Policy and Advocacy at Sanofi Pasteur

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Dr Neema Rusibamyila, Director of Reproductive and Child Health at the Tanzanian Ministry of Health and Social Welfare

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The Decade of Vaccines: An Overview in Brief

The dream started with an ambitious goal and a generous pledge. In 2010 at the World Economic Forum Annual Meeting in Davos, Switzerland, Bill and Melinda Gates announced that their foundation would donate USD 10 billion over the next decade "to help research, develop and deliver vaccines for the world's poorest countries."

The DoV initiative received widespread support from the public health community, including the pharmaceutical industry. Responding to the announcement, World Health Organization (WHO) Director General Margaret Chan said, "The Gates Foundation's commitment to vaccines is unprecedented but just a small part of what is needed. It's absolutely crucial that both governments and the private sector step up efforts to provide life-saving vaccines to children who need them most."

Following the Gates announcement, the DoV Collaboration leadership council and steering committee were created to provide oversight in advancing the initiative. The mission was to "extend, by 2020 and beyond, the full benefits of immunization to all people, regardless of where they are born, who they are, or where they live."

Unprecedented Multi-Stakeholder Participation in Plan Development

Dr Flavia Bustreo, WHO Assistant Director General for Family, Women's and Children's Health, highlighted the participatory approach used to transform the vision of global vaccination scale-up into an action plan

Referring to the remaining three million preventable deaths, Dr Bustreo explained, "We are facing the possibility of reaching those children, every child, in every district, in every community. So this vision, that was shared at last year's World Health Assembly, is now translated into a document that articulates goals, strategic directions and strategic actions that are needed."

Building on and reinforcing vaccination initiatives and programs that are already in place, the development of the GVAP involved essential input from a wide range of stakeholders including government

officials, health professionals, academia, manufacturers, global agencies, development partners, civil society, media and the private sector. In fact, more than 1,100 people from 142 countries and 297 organizations provided their perspectives as part of the development process.

Partners from both the private and public sector hail the participatory approach and a global strategy that should allow for improved visibility and planning for all stakeholders involved in the vaccination scale-up process.



Country Ownership Key to Global Vaccination Scale-Up

Dr Ciro de Quadros, Steering Committee Co-Chair of the DoV Collaboration and Executive Vice President of the Sabin Vaccine Institute, emphasized the importance of national responsibility in achieving vaccination goals



One of the six guiding principles of the GVAP, country ownership is a key element of the DoV strategy. According to the action plan, countries should have "primary ownership and responsibility for establishing good governance and for providing effective and quality immunization for all."

Dr de Quadros said that the partnership aspect of the plan is critical and that it was time to move away from a "paternalistic approach."

"I think that because of this paternalistic approach of the so-called donors, the United Nations agencies, including WHO, UNICEF, the World Bank, and bilaterals, many of those poor countries think that this is not their responsibility, that someone else has to do it," said Dr de Quadros.

He said that many poorer countries today are providing less than 40% of the resources for their immunization programs and that they should work toward taking on a greater proportion of the funding. "I think that if the countries make an effort to mobilize their national resources, not only from the government but from the private sector and communities, this can help to improve the situation," said Dr de Quadros.

To ensure country ownership and to measure progress, the GVAP calls for the development of an accountability framework. This specifies that starting in 2013 progress should be reviewed annually by countries, the WHO regional committees, and the WHA.

Finally, referencing a quote from former WHO Director General Halfdan Mahler, Dr de Quadros emphasized that immunization scale-up serves the global good. "This is a good for everybody even partners providing funding because everyone is in this together for the development of our planet. As Margaret Chan said, this is a spaceship earth and we all have to work together to have a nice trip, so that we can all benefit from the goods of science and technology that industry gives to us," he said.

Increasing Demand Predictability and Ensuring Global Supply

Dr Michael Watson, Vice President of Vaccination Policy and Advocacy at Sanofi Pasteur, said that the implementation of the GVAP should help to improve the predictability of demand, which should in turn, help to improve the availability of vaccines

Partners from both the private and the public sector are hailing the global strategy as a way to improve visibility and planning for all stakeholders involved in the vaccination scale-up process. By improving “financial management and oversight,” the GVAP aims to ensure the sustainability of immunization programs.

Dr Watson said that improved global planning would help to improve vaccine sustainability over the long-term. “This isn’t a one or two-year plan, this is a ten-year

plan. It’s looking to see how we can make sure that we find the right balance in terms of market attractiveness, but also in terms of affordability. We need to find the right balance between innovating and keeping the things that already work,” he said.

Additionally, Dr Watson said that improving market visibility would also lead to more competitive prices. He explained, “If we can do a better job of understanding the predictability of demand, scaling-up will make things more affordable.”



Putting Developing Countries’ Needs at the Forefront of Innovation

Dr Neema Rusibamyila, Director of Reproductive and Child Health at the Tanzanian Ministry of Health and Social Welfare, identified areas where innovation is needed to maximize vaccination outreach in developing countries



Another GVAP guiding principle, innovation is an essential element of expanding vaccine coverage and meeting individual country needs. According to the action plan, “the full potential of innovation can only be realized through learning, continuous improvement and innovation in research and development, as well as innovation and quality improvement across all aspects of immunization.”

Dr Rusibamyila identified a need to better adapt vaccines to meet the needs of developing countries in order to achieve broad immunization scale-up. In her country, she pointed to a need for thermostable products.

Currently, Tanzania’s vaccination program covers about 90 percent of the population. With additional funding from Global Alliance for Vaccines and Immunization (GAVI), the country will introduce vaccinations for pneumococcal diseases and rotavirus next year. Dr Rusibamyila said that her country encountered logistic challenges in trying to make the new vaccines available in the most rural areas.

“There is always room for innovation. One of the challenges we have, for example, is in

terms of cold-chain storage capacity. Once you increase the number of antigens that you are giving, that means that you need to expand the cold chain storage capacity. Something that we had to do when we were thinking of pneumococcal diseases and rotavirus,” Dr Rusibamyila said.

There are currently vaccines in mature stages of development for diseases primarily affecting developing countries, such as Dengue, Malaria and Tuberculosis, which will start life in endemic countries. With greater awareness of delivery challenges, especially in poorer areas, the vaccine manufacturing industry is looking to better adapt these products to meet the needs of developing countries from the first stages of innovation.

Burkina Faso Demonstrates National Commitment to Immunization Programs

Dr Amédée Prosper Djiguemde, Director General of Family Health in Burkina Faso, spoke about his country's immunization policies and shared support for the GVAP, as Burkina Faso remains committed to strengthening national vaccination programs



From 1980-1990, Burkina Faso introduced its own initiative to scale-up coverage of all target populations. Dr Djiguemde said that initiative was a success. "From five target diseases at the beginning, the Expanded Program on Immunization (EPI) of Burkina

Faso today enables the immunization of children against nine diseases," he said. Additionally, the country is moving toward the eradication of polio, as it hasn't seen a new case of the disease since 2009.

Burkina Faso remains committed to vaccination "as an effective intervention with quick impact on morbidity and mortality associated with preventable diseases by vaccination," Dr Djiguemde said. In this context, the country supports the GVAP as a complement to national health priorities.

Discussion

Additional interesting topics were raised during the discussion session. Here are just a few:

Q: What are the roles of open access and delinking R&D from the cost of vaccines to improving access to vaccines?

A: Dr Watson said that one has to be cautious in altering the intellectual property based incentive scheme, which has led to the development of essential vaccines available. However, he said that there are important information sharing initiatives happening today, including patent pools.

Q: How is the phenomenon of vaccination hesitancy presenting itself in developing countries?

A: Dr de Quadros said that historically push-back to immunization is cyclical and cited resistance to the small pox vaccine as an example. He said that it is important for stakeholders to be prepared to effectively respond to such concerns.

Q: What are the attributes of the innovative products that are needed to improve vaccination coverage in developing countries?

A: Dr Rusibamyila said that innovations that would make transportation easier, improve product stability, and provide alternatives to injectables would be welcomed in Tanzania.

IFPMA Delivers Statement on the GVAP at the WHA

The 65th WHA endorsed the GVAP, an important milestone for the DoV initiative. During a WHA committee meeting on Friday, 25 May, IFPMA lauded the GVAP as an ambitious strategy to achieve immunization goals. IFPMA believes the GVAP can be instrumental in realizing the DoV goal of extending the full benefits of immunization to all people.

Suggested efforts to refine the plan include clarifying interactions with other global vaccine programs and partnerships; prioritizing objectives and identifying opportunities for synergies; and defining human and financial resource needs and funding sources. Equitable and sustained access to and use of high quality, safe and effective vaccines can be enhanced through well-functioning competitive market dynamics that reward innovation and strive for sustainable investments and collaboration.

As a global health partner, IFPMA strongly supports the vision of the DoV and seeks to bring decades of vaccine experience to making GVAP a reality. IFPMA is ready to contribute to a country-led, broad-based and collective approach, and to work with mutually accountable partners to achieve the GVAP goals.

For the full statement, visit: <http://www.ifpma.org/events/statements.html>

Next Steps

With the endorsement of the GVAP draft resolution by Member States at the WHA on 25 May 2012, the action plan will be implemented at the regional and country level, with national ownership for immunization programs being key. The period of time immediately following the 2012 WHA will look at translating the agenda into effective actions, with the GVAP laying the groundwork for an accountability framework.

Progress of the GVAP will be reviewed annually, beginning in 2013, by countries, the WHO Regional Committees and the WHA.