

GLOBAL IMMUNIZATION VISION AND STRATEGY (GIVS) 2006-2015

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EPI MLM Course
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What is GIVS?

- 1. A COMMITMENT BY WHO (AND ITS MEMBER STATES) AND UNICEF TO A SET OF GUIDING PRINCIPLES FOR VACCINATION AND ASSOCIATED INTERVENTIONS, VOTED BY WHA AND UNICEF EXECUTIVE BOARD**
- 2. TIMEFRAME, 2006-2015**

The national context of GIVS

- 1. AGENCY AND GOVERNMENT SUPPORT FOR EPI IS SUBSTANTIAL AND RISING.**
- 2. EPI IS SEEN MORE AND MORE AS A SUPPORT MECHANISM FOR ACHIEVING MDGs, ESPECIALLY MDG 4, WITH 2/3 CUTS IN CHILD MORTALITY BY 2015.**

SO IS GIVS ABOUT VACCINATION?

**YES, AND ABOUT CHILD SURVIVAL,
WITH EPI A MAIN ENGINE FOR
INTEGRATION OF HIGH IMPACT CHILD
SURVIVAL INTERVENTIONS**

Guiding Principles of GIVS

- **Equity and gender equality.**
- **Ownership, partnership and responsibility.**
- **Accountability.**
- **Assured quality and safe products and services.**
- **Strong district-based immunization systems.**
- **Sustainability through technical and financial capacity building.**
- **Policies and strategies based on evidence and best practices.**

Objectives for reduction of morbidity and mortality

➤ **By 2010 or earlier:**

- **Increase coverage.** Countries will reach at least 90% national vaccination coverage and at least 80% vaccination coverage in every district or equivalent administrative unit.
- **Reduce measles mortality.** Globally, **mortality due to measles will have been reduced by 90% compared to the 2000 level**

Objectives for reduction of morbidity and mortality

➤ **By 2015 or earlier:**

By 2015 or earlier (as the case may be):

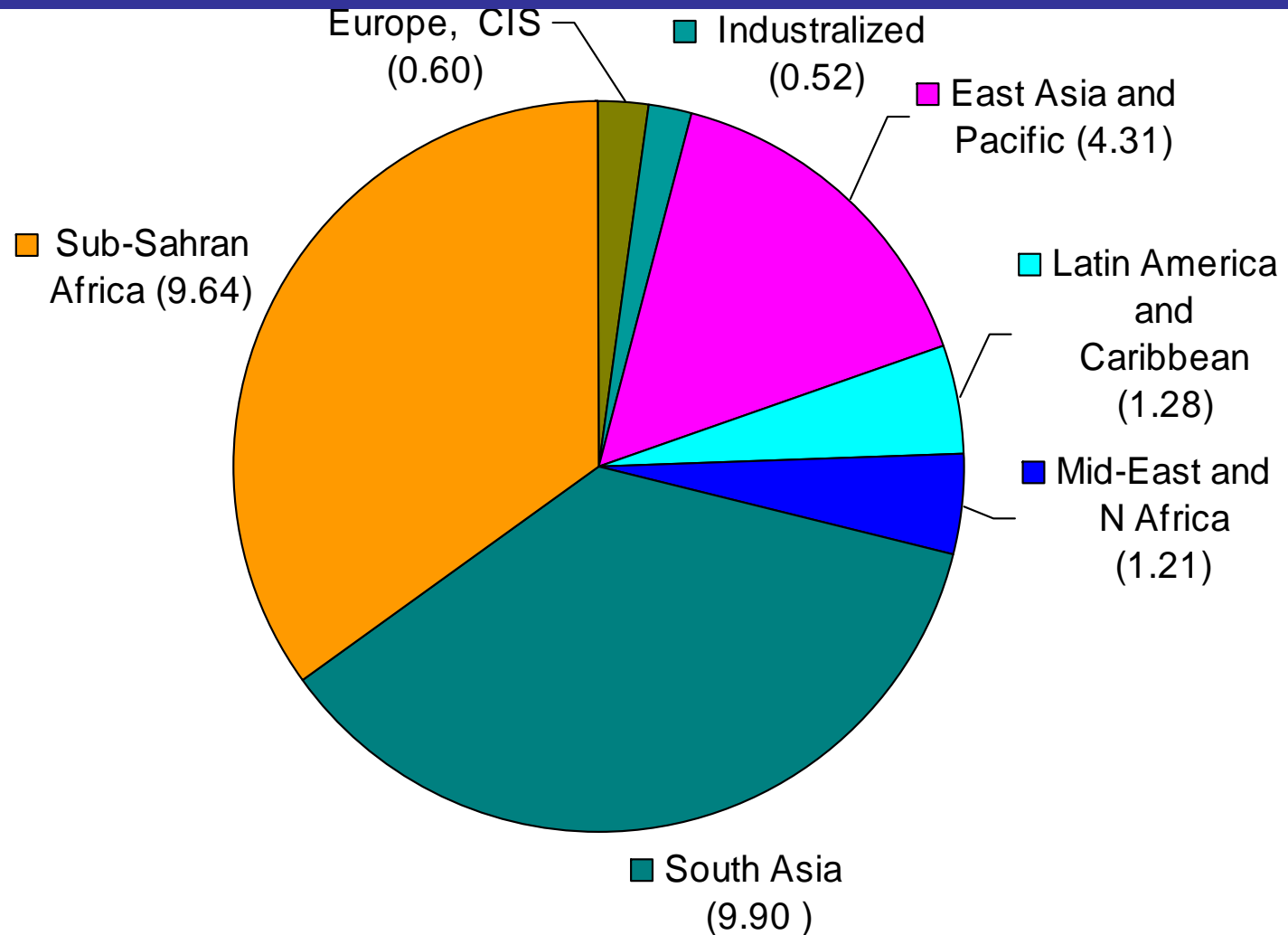
- **Sustain coverage.** The vaccination coverage goal reached in 2010 will have been sustained.
- **Reduce morbidity and mortality.** Global childhood morbidity and mortality due to vaccine preventable diseases will have been reduced by at least two thirds compared to 2000 levels.
- **Ensure access to vaccines of assured quality.** Every person eligible for immunization included in national programmes will have been offered vaccination with vaccines of assured quality according to established national schedules.
- **Introduce new vaccines.** Immunization with newly introduced vaccines will have been offered to the entire eligible population within five years of the introduction of these new vaccines in national programmes.

Achievement of the Vision

4 component strategies

1. Protecting more people in a changing world
2. Introducing new vaccines and strategies
3. Integrating immunization, other linked health interventions and surveillance in the health systems' context
4. Immunizing in the context of global interdependence

Strategic Area 1: Protecting more persons in a changing world
The challenge : 27 million children not vaccinated with DPT3 in 2003
(20 million in Africa and Asia)



Strategic Area 1: Protecting more people in a changing world

Strategy 1: Use a combination of approaches to reach everybody targeted for immunization

Strategy 2: Increase community demand for immunization

Strategy 3: Ensure that unreached people are reached in every district at least four times a year

Strategy 4: Expand vaccination beyond the traditional target group

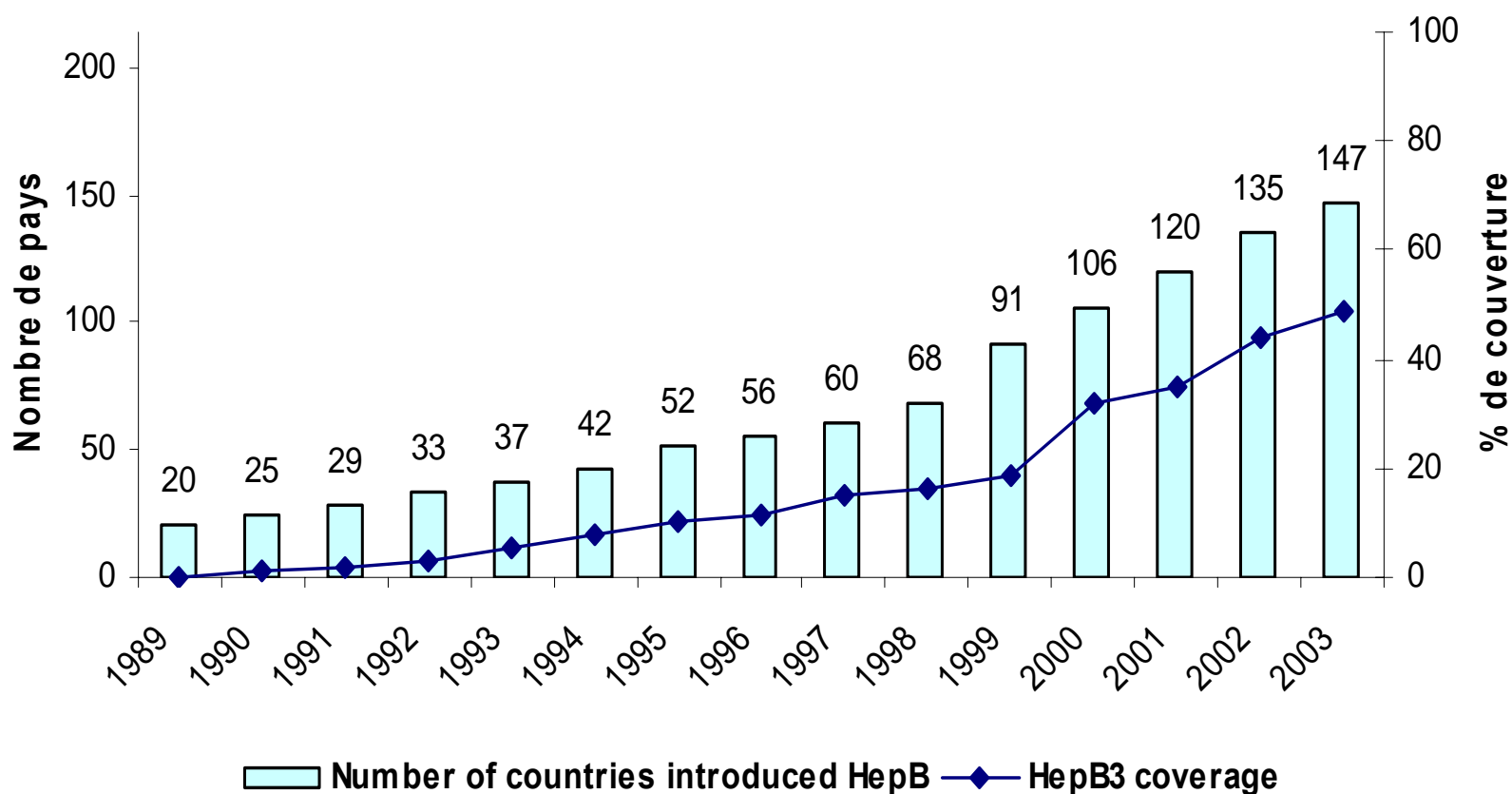
Strategy 5: Improve vaccine, immunization and injection safety

Strategy 6: Improve and strengthen vaccine management systems

Strategy 7: Evaluate and strengthen national immunization programmes.

Strategic Area 2: Introducing new vaccines and technologies

Changes in hep B vaccination, 1989-2003



Strategic Area 2: Introducing new vaccines and technologies

Strategy 8: Strengthen country capacity to determine and set policies and priorities for new vaccines and technologies

Strategy 9: Ensure effective and sustainable introduction of new vaccines and technologies

Strategy 10: Promote research and development of vaccines against diseases of public health importance

Strategic area 3: Integrating immunization, other linked health interventions and surveillance in the health systems' context

Strategy 11: Strengthen immunization programmes within the context of health systems development

Strategy 12: Improve management of human resources

Strategy 13: Assess and develop appropriate interventions for integration

Strategy 14: Maximize the synergy from integrating interventions

Strategic area 3: Integrating immunization, other linked health interventions and surveillance in the health systems' context

Strategy 15: Sustain the benefits of integrated interventions

Strategy 16: Strengthen monitoring of coverage and case-based surveillance

Strategy 17: Strengthen laboratory capacity through the creation of laboratory networks

Strategy 18: Strengthen the management, analysis, interpretation, use and exchange of data at all levels

Strategy 19: Provide access to immunization services in complex humanitarian emergencies

Strategic area 4: Immunizing in the world of global interdependence

Strategy 20: Ensure reliable global supply of affordable vaccines of assured quality

Strategy 21: Ensure adequate and sustainable financing of national immunization systems

Strategy 22: Improve communication and dissemination of information

Strategy 23: Define and recognize the roles, responsibilities and accountability of partners

Strategy 24: Include vaccines in global epidemic preparedness plans and measures

How will GIVS raise performance levels?

- ✓ PROVIDES A VISION OF AN EXPANDED ROLE FOR IMMUNIZATION IN IMPROVING PUBLIC HEALTH, WITH BROAD STRATEGIC DIRECTIONS FOR NATIONAL POLICY AND PROGRAMME DEVELOPMENT, IN THE CONTEXT OF SUPPORT TO IMMUNIZATION PROGRAMMES BY ALL PARTNERS
- ✓ **EXTENDS THE REACH OF IMMUNIZATION BEYOND INFANCY TO OTHER AGE GROUPS** AND BEYOND THE EXISTING CONFINES OF IMMUNIZATION PROGRAMMES INTO OTHER SETTINGS, WHILE MAINTAINING THE PRIORITY OF VACCINATION IN EARLY CHILDHOOD
- ✓ ENCOURAGES A PACKAGE OF INTERVENTIONS TO REDUCE CHILD MORTALITY
- ✓ CONTRIBUTES TO GLOBAL PREPAREDNESS AGAINST THE THREAT OF EMERGING PANDEMICS

How will GIVS raise performance levels? (more)

- ✓ **COMMITTS ALL STAKEHOLDERS TO UNPRECEDENTED EFFORTS TO REACH THE « HARD TO REACH »**
- ✓ **PROMOTES DATA DRIVEN WAYS OF SOLVING PROBLEMS FOR IMPROVING PROGRAMME EFFECTIVENESS**
- ✓ **PREPARES THE WAY FOR THE INTRODUCTION AND WIDESPREAD USE OF NEW AND UNDERUSED VACCINES AND TECHNOLOGIES, ALL OF WHICH WILL REQUIRE LONG TERM FINANCIAL PLANNING**
- ✓ **PROMOTES THE DEVELOPMENT OF CASE BASED SURVEILLANCE FOR ALL VACCINE PREVENTABLE DISEASES WITH EXPANSION OF LABORATORY NETWORKS FOR VIRAL AND BACTERIAL DISEASES**

So why should I care about GIVS?

- ✓ It pulls more money into MoH.**
- ✓ It serves as a checklist for the next MYP.**
- ✓ It assists you in reaching MDG4.**

THANK YOU/MERCI/AMESEGNALEHU/ SHUKRAN/ASANTE SANA/ RO LIVHUWA /SIYABONGA/BAIE DANKIE

- AMESEGNALEHU
- ASANTE SANA
- BAIE DANKIE
- BARKA
- BEDANKT
- BINOBONDI
- DEUS PAGARAPUSUNKI
- DHANJABHAT
- DJERE DIEUF
- DYARAAMA/FOOFU
- DZIĘKUJEMY
- ESE
- GELETOMA
- GRAMACI (PROVENÇAL)
- HARTELIJK DANK!
- HVALA
- INKOSI
- KANIMAMBO
- KEAITUMETSE
- KEALEBOHA
- KHOBKHUN MAG
- KIITOS PALION (FINNISH)
- KÖSZÖNÖN
- MAHADSANIT
- MANAM
- MAZVITA
- MEDASE
- MERCI
- MILLE GRAZIE
- MIRISE
- MISAOTRA
- MUCHAS GRACIAS
- MURAKOZE CYANE
- MWASHUMA
- NAGODE
- NAMVERA
- NATONDI
- NDIYABULELA
- OBRIGADO
- OKUHEPA
- PANDU
- RE A LEBOGA
- SHNORHAKALOUTYOUN
- SHUKRAN
- SIYABONGA
- SOSONGO
- SPASIBA
- TATENDA
- TERIMAKASIH
- TEŞEKKÜRLER
- TODAH RABAH
- TSE ZU TIN BA DEH
- TWATASHA
- TWATOTELA
- VIELEN DANK
- VILLMOLS MERCI
- WEBAALE NNYO
- YABONGA
- YAQENYILEY
- ZIKOMO