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Vaccines and Immunisation Initiatives

Health reporter, August 2008

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Feature: Vaccines and Immunisation Initiatives

Immunisation is one of the most cost-effective public health interventions and can substantially contribute to achieving the Millennium Development Goals, with a particular impact on child mortality. Immunisation programmes over the last 30 years have succeeded in eradicating smallpox, reducing poliomyelitis by 99 percent, and preventing more than 2 million deaths each year from diphtheria, tetanus, pertussis (DTP) and measles. However, vaccine-preventable diseases still cause around 25 percent of the 10 million deaths that occur each year in children under five.

Until the 1990s the global effort to immunise the world's children was a success. The Expanded Programme on

Immunization was set up in 1974 when less than five percent of the world's children were immunised against the six target diseases (DTP, polio, measles and TB). By 1990, 80 percent of children under 13-months were vaccinated against TB, polio and measles. The low cost of producing these vaccines and the ability to make large volumes using recombinant DNA made mass immunisation cost effective, with manufacturers still able to make a profit. However, during the 1990s donor funding for vaccination diminished and immunisation coverage rates fell.

Various initiatives were set up in response to this, such as Eradicate Polio by the Year 2000. Although successful in mobilising donor resources, they were criticised for drawing focus away from basic preventive and curative services toward specific target-diseases. Other campaigns such as the Vaccine Independence Initiative, although less time bound, were centred on cost effectiveness rather than equity. Although these initiatives stimulated the global vaccine market, they were less successful at generating resources for wide-scale introduction of more expensive vaccines.

However, recent partnerships such as the GAVI Alliance, which operate through public-private partnerships, have increased support for introducing more expensive vaccines. Despite its success, concerns have been raised that GAVI has increased inequity and is not financially sustainable, encouraging countries to introduce expensive vaccines they are otherwise unable to afford, thereby increasing donor dependency.

Thus forward planning, country ownership and long-term funding from governments and external partners are recommended to ensure the sustained success of immunisation campaigns. Countries must adopt vaccines that are affordable and appropriate; routine immunisation programmes should be maintained, and decisions to introduce new vaccines be based on sound data and evidence of cost-effectiveness, with the aim of increased equity of access. Such standards will contribute in meeting the goal, set by the Global Immunization Vision and Strategy, to reduce illness and death due to vaccine preventable diseases by two thirds by 2015.

More information:

- An evaluation of infant immunization in Africa: is a transformation in progress?
<http://www.who.int/bulletin/volumes/85/6/06-031526/en/index.html>
- Shifts in global immunisation goals (1984 – 2004): unfinished agendas and mixed results
http://www.sciencedirect.com/science?_ob=ArticleURL&_udi=B6VBF-4CNGMS0-8&_user=128860&_rdoc=1&_fmt=&_orig=search&_sort=d&_view=c&_version=1&_urlVersion=0&_userid=128860&md5=1beb942dd57cf91861ba5ca7b1380041
- A new global immunisation vision and strategy - Comment in the Lancet
<http://www.thelancet.com/journals/lancet/article/PIIS014067360668625X/fulltext>
- KNOTS Research - Childhood Vaccination: Science and Public Engagement
<http://www.ids.ac.uk/index.cfm?objectId=932723F1-E63E-B511-C089EB5C0C27D701>
- Challenges for Public Private Partnerships in vaccine development
<http://www.id21.org/society/s7bjc1g1.html>

Initiatives and Strategies:

- WHO global immunization strategy (PDF)
http://www.who.int/gb/ebwha/pdf_files/A61/A61_10-en.pdf
- WHO-UNAIDS HIV Vaccine Initiative (IRV)
http://www.who.int/vaccine_research/diseases/hiv/en/index.html

- WHO-UNICEF Global Immunization Vision and Strategy (GIVS)
<http://www.who.int/immunization/givs/en/>
- GAVI Alliance
<http://www.gavialliance.org/>
- WHO Expanded Programme on Immunization (EPI)
<http://www.wpro.who.int/sites/epi/>
- The Global Polio Eradication Initiative
<http://www.polioeradication.org/>
- The Measles Initiative
<http://www.measlesinitiative.org/index3.asp>
- International AIDS Vaccine Initiative
<http://www.iavi.org/>

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Recommended readings

1. Managing the effect of TRIPS on availability of priority vaccines

Authors: J. Milstien; M. Kaddar

Publisher: Bulletin of the World Health Organization : the International Journal of Public Health, 2006

This article in the Bulletin of the World Health Organization (WHO) assesses the effect of implementing the Trade-Related Aspects of Intellectual Property rights (TRIPS) agreement on access to vaccines in developing countries. It considers factors in stimulating research and development (R&D) for priority vaccines and examines how global implementation of an intellectual property protection system might affect access to priority vaccines. The article also analyses approaches to managing the effects of TRIPS on developing countries. These include licensing and technology transfer agreements and developing new technologies in developing countries.

The paper discusses the potential role of the WHO and other international partners in ensuring innovation in and access to vaccines in developing countries. It recommends that organisations can help ensure equitable access by: developing guidelines and best practice standards; developing and disseminating case studies on different intellectual property approaches; and monitoring the impact of TRIPS on innovation and access. The authors conclude that in order to ensure access to vaccines, it is necessary to manage the effects of the TRIPS agreement at regulatory and strategic levels. At the regulatory level countries can use the protections guaranteed by the TRIPS agreement to maintain access to new priority vaccines. At the strategic level, licensing and technology transfer agreements can help ensure access. [adapted from authors]

Available online at: <http://www.eldis.org/go/topics/resource-guides/health&id=24202&type=Document>

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2. AIDS vaccine development: perspectives, challenges & hopes

Authors: J-L. Excler

Publisher: Indian Journal of Medical Research, 2005

This article, from the Indian Journal of Medicine, argues that development of an AIDS vaccine, which represents the only long-term hope in stopping the epidemic, faces a number of substantive challenges. Firstly, there are a number of scientific obstacles to vaccine development. These include: the diversity and variability of the virus, resistance of a wild type virus, integration of the virus into host cells, and rapid emergence of viral mutants. Secondly, there are a number of programmatic challenges. These include: insufficient political leadership, lack of funds allocated to vaccine development, lack of coordinated efforts, lack of capacity of developing country regulatory authorities, and length of clinical trials, especially trial efficacy.

The author argues that AIDS vaccines must be seen as the ultimate prevention tool that will complement existing prevention strategies. The acceleration of scientific approaches and implementation of clinical trials are the best and possibly only way to reach this goal. This requires strong and renewed political leadership and commitment. It also needs flexible processes, medical and scientific dedication and collaboration and community participation. The author then highlights recent activities in India which demonstrate both government and scientific commitment to long-term efforts to develop a vaccine. [adapted from author]

Available online at: <http://www.eldis.org/go/topics/resource-guides/health&id=19211&type=Document>

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3. Policy challenges in malaria vaccine introduction

Authors: M. Moree; S. Ewart

Publisher: American Journal of Tropical Medicine and Hygiene , 2004

This article, published in The American Journal of Tropical Medicine and Hygiene, examines the delay in introduction and uptake of vaccines in the developing world. It then draws out lessons which could be applied to the introduction of a future (hypothetical) malaria vaccine. Policy challenges at the national level present a particular barrier to making new vaccines accessible to the poor. The authors point out that, when deciding whether to introduce a malaria vaccine, national leaders will rely on available information about the disease burden and the costs and impacts of each malaria intervention. This decision-making process can be slow and protracted. Other constraints include poor infrastructure and delivery systems, poorly co-ordinated regulatory processes, and low manufacturing capacity.

The authors highlight the importance of research to inform policy decisions and minimise future delays in introducing a malaria vaccine. They stress that better epidemiological data is needed on all populations affected by malaria, especially in sub-Saharan Africa. They also recommend: strengthening and expanding country-level malaria surveillance systems, more research on the cost-effectiveness of malaria control and hypothetical malaria vaccines, country-specific studies on the economic burden of malaria, and market research to assess demand and ability to pay.

Available online at: <http://www.eldis.org/go/topics/resource-guides/health&id=17191&type=Document>

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4. An evaluation of infant immunization in Africa: is a transformation in progress?

Authors: L. Arevshatian; C. J. Clements; S. K. Lwanga

Publisher: Bulletin of the World Health Organization : the International Journal of Public Health, 2007

This paper, in the Bulletin of the World Health Organization, assesses the progress towards meeting the goals of the African Regional strategic Plan of the Expanded Programme on Immunisation between 2001 and 2005. These goals include: to interrupt the circulation of wild polio virus in all countries; eliminate maternal and neonatal tetanus in all high-risk districts; 80 per cent of the countries to have reached at least 80 per cent diphtheria-tetanus-pertissus-3 (DTP-3) coverage; and measles to be controlled and eliminated in Southern Africa.

The paper finds that although more infants had been immunised by 2005, most of the targets had been missed by at least half of the region's countries. The authors estimate that DTP-3 coverage increased from 54 per cent in 2000 to 69 per cent in 2004, and as a result the number of non-immunised children declined from 1.4 million in 2002 to 900,000 in 2004. Reported measles cases dropped from 520,000 in 2000 to 316,000 in 2005 and mortality was reduced by approximately 60 per cent. The paper concludes that the rates of immunisation coverage are improving dramatically in the WHO African Region. The huge increases in spending on immunisation and the related improvements in programme performance are linked predominantly to increases in donor funding.

Available online at: <http://www.eldis.org/go/topics/resource-guides/health&id=32042&type=Document>

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5. Financial challenges of immunization: a look at GAVI

Authors: M. Kaddar; P. Lydon; R. Levine

Publisher: Bulletin of the World Health Organization : the International Journal of Public Health, 2004

This article focuses on how the Global Alliance for Vaccines and Immunization (GAVI) is addressing the challenge of sustaining adequate and reliable funding for immunisations in the poorest countries. The article outlines GAVI's approach to long-term financing for immunisation and demonstrates how it has dealt with this issue by means of financial sustainability plans (FSP). Findings are presented from experiences in three countries at the cutting edge of this work: Kenya, Lao PDR and Mali. The paper then identifies some of the founding assumptions of these experiences, outlines the lessons learned and offers suggestions of ways to move forward.

The authors argue that while the FSP tool provides a clear understanding of financial gaps, and is key to mobilising adequate and sustainable resources for immunisation, it was not designed as a priority-setting tool for the health sector. FSP needs to be integrated into the broader strategic planning and budgeting processes of the health sector that have a direct influence on the level of resources allocated for immunisation services. The authors conclude that FSP should be thought of as an essential part of the preparation and implementation of a programme's multi-year plan of action. [adapted from author]

Available online at: <http://www.eldis.org/go/topics/resource-guides/health&id=16679&type=Document>

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Latest additions from the Health resource guide

1. WHO global report on falls prevention in older age

Publisher: Ageing and Life Course , 2008

Falls and the injuries they cause are major public health problems that often require medical attention worldwide. This report looks at statistics, and the risks and effects of falls. It then provides the WHO Falls Prevention for Active Ageing model which offers an action plan for making progress in reducing the prevalence of falls in the older adult population.

The model proposes specific strategies for building awareness of the importance of falls prevention and treatment, and improving the assessment of individual, environmental, and societal factors that increase the likelihood of falls. Strategies for facilitating the design and implementation of culturally-appropriate, evidence-based interventions that will significantly reduce the number of falls among older persons are also suggested.

The degree to which progress will be made depends on to the success in integrating falls prevention strategies into the overall health and social care agendas globally. In order to do this effectively, it is necessary to identify and implement culturally appropriate, evidence-based policies and procedures. More evidence of the cost-effectiveness of interconnections is needed to develop strategies most likely to be effective in specific setting and population sub-groups.

Available online at: <http://www.eldis.org/go/topics/resource-guides/health&id=38713&type=Document>

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2. Food aid flows 2007

Publisher: United Nations [UN] World Food Programme , 2008

The 2008 edition of the annual Food Aid Flows report provides a comprehensive view of trends in global food aid, which include food aid deliveries by Governments, non-governmental organisations and the World Food Programme. It shows that food aid deliveries continued to decline in 2007, reaching the lowest level since 1961. The report argues that there is an urgent need to reverse this trend. In particular, increased resources for food assistance are urgently needed to address the serious negative effects of the higher food prices on hunger and malnutrition across the world.

The report provides data of food aid flows in 2007 by category, mode, channel, sale recipient, region and donor and identifies various key trends. The report emphasises the need for increased food assistance, particularly in the context of recent food price rises. Given that food prices are expected to remain high during the next decade, it argues that without additional interventions higher food prices could jeopardise the prospects for the achievement of Millennium Development Goals and the fight against hunger and malnutrition.

The report recommends actions on several fronts by a variety of actors, including the WFP. It highlights the urgency of implementing changes proposed in the WFP's draft Strategic Plan for the period 2008-2011, which it is argued mark a historic shift from WFP as a food aid agency to WFP as a food assistance agency. This new plan aims to provide WFP with a more nuanced and robust and broader set of food assistance tools and includes a new strategic

objective to reduce chronic hunger and malnutrition. Available online at: <http://www.eldis.org/go/topics/resource-guides/health&id=38703&type=Document>

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3. Dietary diversity as a measure of women's diet quality in resource-poor areas: results from rural Bangladesh site

Authors: M. Arimond; L. Torheim; D. Wiesman

Publisher: Food and Nutrition Technical Assistance Project , 2008

In developing countries, where low-quality, monotonous grain- and tuber-based diets are the norm, the risk for micronutrient deficiencies is high, especially amongst women of reproductive age. However, despite being a global problem, data on women's micronutrient status and the quality of women's diets is scarce.

This study uses an existing data set with dietary intake data from 24-hour recalls to analyse the relationship between simple indicators of dietary diversity (i.e. the number of foods consumed across and within food groups over a reference period) and diet quality for women in rural Bangladesh.

Overall, the authors assert that a 9 and 13 dietary diversity food group indicator (with a 15g minimum consumption required) can predict the micronutrient adequacy of the diet of non-pregnant, non-lactating women of reproductive age with acceptable sensitivity and specificity. As such, the results from this paper indicate that food group diversity indicators are very promising and may be a simple and valid option for population-level assessment and for monitoring progress toward improved micronutrient intakes among women of reproductive age.

Available online at: <http://www.eldis.org/go/topics/resource-guides/health&id=38689&type=Document>

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4. Improving the nutrition status of children and women

Authors: T. Woods; M. Jones; S. Mahendra

Publisher: Institute of Development Studies, Sussex, UK, 2008

Current high world food prices serve as a reminder of the vulnerability of large parts of sub-Saharan Africa and South Asia to hunger and undernutrition. Good nutrition status for children and adolescent girls is fundamental for attaining many of the Millennium Development Goals. Despite this, donors and governments under-invest in interventions to improve nutrition.

This issue of id21 insights argues that this underinvestment is due to a lack of incentives for donors; few take a strategic approach to investments that have the potential to improve nutrition and they have little idea whether current investments are making a difference. Furthermore, their 'critical friends' – research institutes and non-governmental organisations – lack the leadership to engage with donors strategically on this issue.

It is argued that nutrition of the world's children and women desperately needs improving. Failure to do so violates

their human rights and will undermine development today and in the next generation. If undernourished children survive their first few months of life, they will suffer more illness, learn less in school and be less productive in the workforce. In turn, their children are more likely to be born undernourished.

The authors suggest that this desperate cycle can only be broken by a new alliance between donors, governments and critical friends. This will require new leaders to come forward and develop politically aware strategies that raise public consciousness and put human and financial resources, both public and private, to effective use.

Available online at: <http://www.eldis.org/go/topics/resource-guides/health&id=38411&type=Document>

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5. Solar water disinfection: a guide for the application of SODIS

Authors: R. Meierhofer; M. Wegelin

Publisher: The SODIS Reference Center, 2002

Access to safe drinking water is a major issue faced by a large number of the world's population. In an attempt to address this issue, multiple water processing methods have been developed. One such method is the Solar Water Disinfection (SODIS) method: a simple, environmentally sustainable, low-cost solution for drinking water treatment at household level. It is aimed at people at risk of consuming microbiologically contaminated water. SODIS uses solar energy to destroy pathogenic micro-organisms causing water-borne diseases, thereby improving the quality of drinking water [adapted from author].

This manual provides guidance on the application of the SODIS method. It includes:

- An introduction to water and the development of SODIS
- Technical background and principles for the application of SODIS
- Application in the field
- Project implementation, including training and promotion

Diagrams, pictures and case studies are provided throughout the guide. In addition, promotional tools are provided such as flipchart posters, posters for display, short stories for radio, SODIS pamphlets, SODIS comic and a SODIS game to aid in the implementation of the method.

Available online at: <http://www.eldis.org/go/topics/resource-guides/health&id=38454&type=Document>

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Announcements

IDS Health and Development Team User Survey

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More information: http://www.surveymonkey.com/s.aspx?sm=vdFYnIpMjVspO4jJuzQUdg_3d_3d

Forum: 8th Annual Global Health Mini-University

Dates: 12 September 2008

Location: George Washington University School of Public Health and Health Services, Washington, D.C., USA

This intensive week long short course, organised by the Centre for Public Health Nutrition at the University of Westminster, is designed to introduce participants to the wealth of technical knowledge and up to date best practice for working in nutrition in emergencies. The course fee is £650. Bursaries may be available.

The aim of the course is to give participants an overview of nutrition in humanitarian emergencies, including the types of malnutrition, both direct and underlying causes of malnutrition, how malnutrition is measured, and common nutritional interventions.

The course covers the following: measuring malnutrition, food security, supplementary & therapeutic feeding programmes including community based care, infant feeding in emergencies and anthropometric surveys

More information: <http://www.eldis.org/go/topics/resource-guides/health/health-events-and-announcements&id=38989&type=Item>

Workshop: Canadian Coalition for Global Health Research (CCGHR) 3rd Continuing Education Day - "Building Capacity in Global Health Research for Development"

Dates: 26 October 2008

Location: Marriott Hotel, Ottawa, Canada

This 3rd continuing education day, organised by the Canadian Coalition for Global Health Research (CCGHR) in partnership with the Canadian Society for International Health (CSIH), is part of a special series of 14 workshops.

The goal of the day is to stimulate reflection and strengthen capacities in global health research and development in areas such as building partnerships, turning research into action, and developing proposals. It will provide opportunities for learning, networking and sharing projects.

For more information, please follow the full details link.

More information: <http://www.eldis.org/go/topics/resource-guides/health/health-events-and-announcements&id=38987&type=Item>

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- Health Resource Guide - <http://www.eldis.org/health/index.htm>
- Health Systems Resource Guide - <http://www.eldis.org/healthsystems/index.htm>
- HIV and AIDS Resource Guide - <http://www.eldis.org/go/topics/resource-guides/hiv-and-aids>

The HRC provides access to technical assistance and information for the Department for International Development (DFID UK), and its partners, in support of pro-poor health policies as well as health systems, service delivery and public health topics and programmes.

Eldis currently includes descriptions and links to over 4,500 organisations and over 22,000 full-text online documents covering development and environmental issues. It can be searched or browsed free over the Internet.

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