



**World Health  
Organization**

African Region

**AFR/RC74/INF.DOC/7**

22 July 2024

**REGIONAL COMMITTEE FOR AFRICA**

**ORIGINAL: ENGLISH**

Seventy-fourth session

Brazzaville, Republic of Congo, 26–30 August 2024

Provisional agenda item 18.6

**PROGRESS REPORT ON THE FRAMEWORK FOR THE IMPLEMENTATION OF THE  
IMMUNIZATION AGENDA 2030 IN THE WHO AFRICAN REGION**

**Information Document**

**CONTENTS**

**Paragraphs**

BACKGROUND .....	1–3
PROGRESS MADE/ACTIONS TAKEN/ISSUES AND CHALLENGES .....	4–9
NEXT STEPS .....	10–12

## BACKGROUND

1. The Immunization Agenda 2030 (IA2030) envisions a world where everyone, everywhere, and at every age fully benefits from vaccines for good health and well-being by 2030. In August 2021, the Seventy-first Regional Committee for Africa endorsed the Framework for the Implementation of the Immunization Agenda 2030 in the WHO African Region. This framework defines the implementational aspects of the IA2030 for the region and provides the basis upon which success is to be evaluated.
2. The framework outlines five milestones to achieve by 2023, which are as follows: ensuring that at least 30% of Member States achieve 90% coverage for all vaccines nationally and in all districts; introducing COVID-19 vaccination in all Member States and achieving 70% coverage in prioritized risk groups; maintaining polio-free status across all Member States and containing all circulating vaccine-derived poliovirus (cVDPV) outbreaks; validating at least 90% of Member States for the elimination of maternal and neonatal tetanus (MNT); and verifying at least 40% of Member States for the elimination of measles and rubella, and 20% for hepatitis B.
3. The Regional Committee requested a report every two years on progress made towards achieving the set milestones. This is the first progress report to the Regional Committee.

## PROGRESS MADE/ACTION TAKEN

4. Progress was slow towards attainment of the 2023 milestones. One Member State<sup>1</sup> (representing 2% of Member States) has achieved the first 2023 milestone on vaccination coverage. Actions taken to improve coverage include providing targeted support to Member States based on identified needs. In April 2023, WHO and other immunization partners launched the Big Catch-Up initiative to coordinate technical assistance to Member States to: (a) catch-up missed children; (b) restore vaccination coverage back to 2019 levels; and (c) strengthen immunization programmes within primary health care (PHC).
5. All but one Member State<sup>2</sup> introduced COVID-19 vaccination. Eleven Member States<sup>3</sup> have achieved the targeted 70% coverage among priority groups of healthcare workers and the elderly. Actions taken to improve coverage include providing tailored support to Member States to: (a) integrate COVID-19 vaccination into PHC; and (b) explore new entry points for vaccination of priority groups.
6. All Member States maintained their wild poliovirus-free status. In 2021-2022 two Member States<sup>4</sup> had importations of wild poliovirus type 1, but the outbreaks were quickly contained and controlled. These outbreaks were addressed through targeted supplementary immunization activities (SIAs) that complemented accelerated efforts to strengthen routine immunization programmes such as the introduction and rollout of inactivated polio vaccine (IPV). All 47 Member States have introduced at least one dose of IPV into the routine immunization schedule.

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<sup>1</sup> Seychelles

<sup>2</sup> Eritrea

<sup>3</sup> Benin, Botswana, Comoros, Ghana, Guinea, Guinea-Bissau, Liberia, Mozambique, Rwanda, Sierra Leone, and Togo

<sup>4</sup> Malawi and Mozambique

7. Forty-two Member States<sup>5</sup> (89%) have been validated for MNT elimination. Towards better performance, the remaining five Member States<sup>6</sup> are supported to conduct (a) targeted SIAs and (b) pre-validation assessments. For example, in Guinea a pre-validation assessment was conducted in March 2023 and a validation survey was initiated in November 2023.

8. WHO/AFRO is supporting Member States to develop and implement national immunization strategies (NIS); streamlined national immunization planning documents that focus on a strategic period of five years. Thirty-two Member States now have NIS that are either fully developed or in final stages of development, while the remaining 15 countries have started the process. In addition, 14 Member States with the highest number of zero-dose children in the region have been prioritized for support to develop and implement Big Catch-Up plans.

## ISSUES AND CHALLENGES

9. Progress with attainment of the 2023 milestones was hampered by multiple challenges, the main one being the disruption of essential health services during the COVID-19 pandemic. This was aided by the rise of disinformation leading to an increase in vaccine hesitancy and low demand for vaccination. In addition, several Member States experienced conflict and insecurity<sup>7</sup> leading to further disruption of essential health services in affected areas. The result was an accumulation of 29 million zero-dose children in the region from 2019 to 2022, leading to a resurgence of multi-country outbreaks of diphtheria, measles, pertussis, and other vaccine-preventable diseases (VPDs). Consequently, the region did not achieve its 2023 VPD elimination targets.

## NEXT STEPS

10. Member States should:

- (a) Strengthen health systems through PHC infrastructure to deploy multi-disciplinary subnational teams to use analytics and geographic information systems technologies in identifying zero-dose communities and targeting them with special initiatives for optimizing immunization coverage.
- (b) Systematically collect, analyse, and use data on behavioural and social drivers of vaccine uptake, including disinformation, to guide implementation of tailored strategies.
- (c) Strengthen deployment of digital solutions for reducing vaccination drop-outs, including solutions that target caregivers with reminder texts and calls.
- (d) Develop immunization coverage league tables for sub-districts, districts, and provinces; aimed at providing incentives for immunization teams through engendering healthy competition for district, provincial, and national immunization coverage championships respectively.

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<sup>5</sup> Algeria, Benin, Botswana, Burkina Faso, Burundi, Cabo Verde, Cameroon, Chad, Comoros, Congo, Côte d'Ivoire, Democratic Republic of Congo, Equatorial Guinea, Eritrea, Eswatini, Ethiopia, Gabon, Gambia, Ghana, Guinea-Bissau, Kenya, Lesotho, Liberia, Madagascar, Malawi, Mali, Mauritania, Mauritius, Mozambique, Namibia, Niger, Rwanda, Sao Tome and Principe, Senegal, Seychelles, Sierra Leone, South Africa, Togo, Uganda, United Republic of Tanzania, Zambia, Zimbabwe

<sup>6</sup> Angola, Central African Republic, Guinea, Nigeria, South Sudan

<sup>7</sup> Cameroon, Central African Republic, Chad, Democratic Republic of Congo, Ethiopia, Mali, Niger, Nigeria, and others.

11. WHO and partners should:
  - (a) Facilitate formation of consortia between youth-led techno-hubs, national public health institutions and national immunization programmes, to drive deployment of domestic technical support for strengthening national immunization systems.
  - (b) Deploy multi-disciplinary teams to undertake immunization bottleneck analyses and resolution towards immunization catch-up and keep-up in priority Member States.
12. The Regional Committee is invited to note this progress report.