A Historic Opportunity

Protecting all African children with PCV and Rotavirus vaccines

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Immunization Program Strengthening Team

September 15, 2023
The lifesaving potential of PCV and Rotavirus vaccines

The Bill & Melinda Gates Foundation remains steadfast in our commitment to preventing pneumonia and rotavirus
“When Melinda and I started this work more than a decade ago, we were inspired by the conviction that all lives have equal value. So one of the first things we invested in was vaccines, which protect all children who receive them, no matter how rich or poor they may be. In short, vaccines work.”

—Bill Gates, Co-Chair, The Bill & Melinda Gates Foundation (1997)
The foundation’s work on immunization

*The Immunization team applies new perspectives to immunization challenges and funds solutions to improve the delivery of high-quality, affordable vaccines for more equitable coverage.*

Vaccine Access  
Vaccine Programs  
Immunization Platforms  
Routine Immunization strengthening in polio high-risk geographies (RISP)  
Gavi  
Advocacy and Communications
Where we’re going

Our investments in immunization are rigorous in tracking toward our desired results by 2030

16.2m
Future deaths averted

50%
Reduction in zero-dose children

Eradication of Polio

September 15, 2023
PCV and Rotavirus Vaccine Strategies

The Foundation’s PCV and Rotavirus vaccine strategies span from vaccine development and evidence generation to new vaccine introduction and immunization program strengthening.

- Low cost and next generation vaccine development
- Optimizing PCV dosing schedules
- Assessing the impact of PCV and Rotavirus vaccines
- Supporting PCV and Rotavirus vaccine introductions
- Immunization program strengthening
Routine immunization strengthening in polio high-risk geographies (RISP)
In 2019, the foundation launched a time-limited, cross-team special initiative that would complement two major foundation investments:

**BMGF’s biggest-ever investment**
Goal: Ensure all children have equal access to vaccines
Strategies: New Vaccine Introduction, Routine Immunization Coverage Improvement

**BMGF’s second-biggest investment**
Goal: Eradicate poliovirus
Strategies: Preventive and outbreak response campaigns, surveillance, etc.

*But there were certain very specific subnational geographies where neither effort seemed to be succeeding*

Enter…. **RISP**
Routine Immunization Strengthening in Polio High-Risk Geographies
The RISP initiative focuses on rapidly improving RI coverage for over 1.6M children annually in select subnational areas with the weakest coverage and high polio risk

Where possible, we work to strengthen government management, financing, and sustainability. In areas affected by conflict or significant fragility, we work with an ecosystem of partners to raise immunization coverage in the short term and to maintain gains through service delivery partners.

### Approach

<table>
<thead>
<tr>
<th>Country</th>
<th>Subnational RISP Focus Areas</th>
<th>Start of RISP</th>
<th>Original Target Population: &lt;1-year-old (Annual)</th>
<th>% DTP3 Coverage Baseline</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Systems-Building (MOUs)</strong></td>
<td></td>
<td></td>
<td>National Survey</td>
<td>National WUENIC</td>
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<tr>
<td>Chad</td>
<td>Lac, Khanem &amp; Hadjer Lamis regions</td>
<td>2019</td>
<td>91K</td>
<td>65&lt;sup&gt;a&lt;/sup&gt;</td>
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<tr>
<td>DRC</td>
<td>Haut Lomami, Tanganyika, Luulabla</td>
<td>2019</td>
<td>365K</td>
<td>48&lt;sup&gt;c&lt;/sup&gt;</td>
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<tr>
<td>Guinea</td>
<td>Kankan region</td>
<td>2022 (elections, coup d’état)</td>
<td>99K</td>
<td>40&lt;sup&gt;e&lt;/sup&gt;</td>
</tr>
<tr>
<td>Niger</td>
<td>Diffa, Zinder &amp; Maradi regions</td>
<td>2022 (elections, hiring challenges)</td>
<td>452K</td>
<td>63.5&lt;sup&gt;g&lt;/sup&gt;</td>
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<tr>
<td><strong>Mixed</strong></td>
<td></td>
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<tr>
<td>Pakistan</td>
<td>40 Super High-Risk UCs</td>
<td>2019</td>
<td>105K&lt;sup&gt;i&lt;/sup&gt;</td>
<td>75&lt;sup&gt;j&lt;/sup&gt;</td>
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<tr>
<td>Afghanistan</td>
<td>Helmand, Kandahar, Urozgan</td>
<td>2019</td>
<td>226K</td>
<td>61&lt;sup&gt;l&lt;/sup&gt;</td>
</tr>
<tr>
<td>CAR</td>
<td>Régions Santé 4, 5, 6</td>
<td>2021</td>
<td>54K</td>
<td>34&lt;sup&gt;n&lt;/sup&gt;</td>
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<td>Somalia</td>
<td>Started in 5 districts in Gulmudag and Jubaland, expanding to 20 districts in Gulmudag, Jubaland and Hirshabelle</td>
<td>2019</td>
<td>40K&lt;sup&gt;p&lt;/sup&gt;</td>
<td>12&lt;sup&gt;q&lt;/sup&gt;</td>
</tr>
<tr>
<td>South Sudan</td>
<td>Unity, Jonglei &amp; Upper Nile</td>
<td>2019</td>
<td>176K</td>
<td>49&lt;sup&gt;s&lt;/sup&gt;</td>
</tr>
<tr>
<td>Syria</td>
<td>Idlib &amp; Aleppo Governates</td>
<td>2014</td>
<td>67K</td>
<td>27&lt;sup&gt;u&lt;/sup&gt;</td>
</tr>
</tbody>
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<sup>a</sup> 2020 Chad LOAS subnational average estimates 60%; <sup>b</sup> Somalia subnational average estimates include all Jubaland (not just Lower Juba); <sup>c</sup> Syria subnational estimate only includes Aleppo Governorate.

1 2018 WUENIC (revised 2021); 2 2021 WUENIC; 3 2019 MICS-Chad; 4 2018 MICS-DRC; 5 2018 DHS-Guinea; 6 2021 ENAFEME (2017 ECV-Niger results invalidated); 7 2017 DHS-Pakistan urban for RISP provinces (not just SHRUCs); 8 2018 Afghanistan Health Survey; 9 2018-19 MICS-CAR; 10 2021 HDS Gulmudag + 2021 HDS Jubaland; 11 2017 EPI Coverage Survey-South Sudan; 12 2021 ACU Northeast Survey-Syria. 13 Pakistan has expanded target population including additional children <2, beyond 105K children <1. 14 Somalia has expanded target population including additional 550K surviving infants under 5 in 20 expansion districts, beyond 40K children <1 in original 5 districts. 15 Surviving infant cohort. 16 2022 ECV. 17 2022 TPVICS, urban districts for RISP provinces, note that survey cohort was born between May 2020 – July 2021 during COVID-19 related immunization service interruptions. 18 2022 EPI Assessment.
Target countries for this work were selected based on a range of criteria

Historical risk of poliovirus outbreaks and persistent transmission

Wild and vaccine-derived poliovirus cases reported in the past 12 months in Africa, WHO

Low routine immunization coverage

Subnational DTP3 coverage in Africa as of 2019, IHME

Foundation partnerships, comparative advantage and complementarity to existing regional offices

Where?

South Sudan  
Somalia  
DRC  
CAR  
Guinea

Existing RI strengthening partnership  
Support partners to deliver services  
Partner with government to build systems  
Both approaches

Map Source: Institute for Health Metrics & Evaluation
Final thoughts
If you want to go fast, go alone.

If you want to go far, go together.

— African Proverb