A Historic Opportunity



The lifesaving potential of PCV and Rotavirus vaccines

The Bill & Melinda Gates Foundation remains steadfast in our commitment to preventing pneumonia and rotavirus



NYT story spurs foundation's immunization work

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



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....

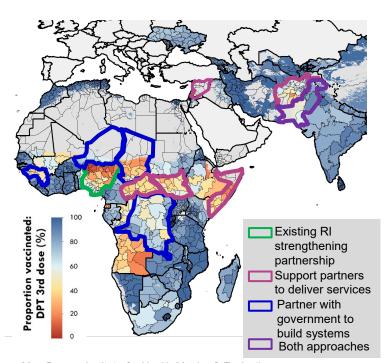
RISP

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.

		Subnational RISP Focus Areas	Start of RISP	Original Target Population: <1-year-old ¹⁴ (Annual)	% DTP3 Coverage Baseline		
Approach	Country				National Survey	National WUENIC	Sub-Nat'l Survey (RISP areas)
Systems-Building (MOUs)	Chad	Lac, Khanem & Hadjer Lamis regions	2019	91K	65 ^{3,a}	46	64 ³
	DRC	Haut Lomami, Tanganyika, Lualaba	2019	365K	484	71	37^4
	Guinea	Kankan region	2022 (elections, coup d'état)	99К	40 ⁵	47	47 ⁵
	Niger	Diffa, Zinder & Maradi regions	2022 (elections, hiring challenges)	452K	63.56	79	54 ⁶
Mixed	Pakistan	40 Super High-Risk UCs	2019	105K ¹²	75 ⁷	80	71 ⁷
Conflict	Afghanistan	Helmand, Kandahar, Urozgan	2019	226K	618	72	138
	CAR	Régions Santé 4, 5, 6	2021	54K	34 ⁹	42	25 ⁹
	Somalia	Started in 5 districts in Gulmadug and Jubaland, expanding to 20 districts in Gulmadug, Jubaland and Hirshabelle	2019	40K ¹³	12 ^{10,b}	42	910
	South Sudan	Unity, Jonglei & Upper Nile	2019	176K	4911	49	3111
	Syria	Idlib & Aleppo Governates	2014	67K	27 ^{14,c}	47	27 ¹²



Map Source: Institute for Health Metrics & Evaluation

a 2020 Chad LQAS subnational average estimates 60%; b Somalia subnational average estimates include all Jubaland (not just Lower Juba); Syria subnational estimate only includes Aleppo Governate.

¹ 2018 WUENIC (revised 2021); ²2021 WUENIC; ³2019 MICS-Chad; ⁴2018 MICS-DRC; ⁵2018 DHS-Guinea; ⁶2021 ENAFEME (2017 ECV-Niger results invalidated); ⁷2017 DHS-Pakistan urban for RISP provinces (not just SHRUCs); ⁸2018 Afghanistan Health Survey; ⁹2018-19 MICS-CAR; ¹⁰2021 HDS Gulmadug + 2021 HDS Jubaland; ¹¹2017 EPI Coverage Survey-South Sudan; ¹²2021 ACU Northeast Survey-Syria ¹²Pakistan has expanded target population including additional children <2, beyond 105K children <1 in original 5 districts ¹⁴ Surviving infant cohort ¹⁵2022 ECV ¹⁶2022 TPVICS, urban districts for RISP provinces, note that survey cohort was bord between May 2020 – July 2021 during COVID-19 related immunization service interruptions ¹⁷2022 EPI Assessment

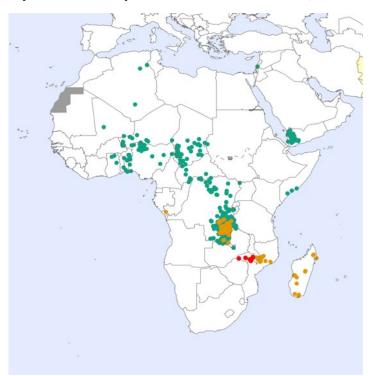
Target countries for this work were selected based on a range of criteria

Historical risk of poliovirus outbreaks and persistent transmission

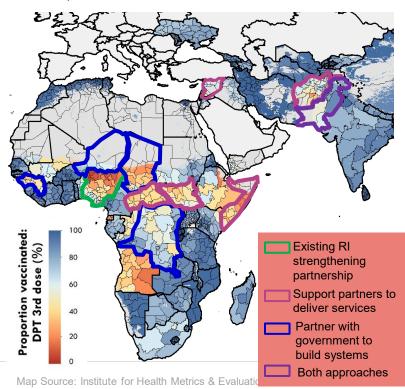
Low routine immunization coverage

Foundation partnerships, comparative advantage and complementarity to existing regional offices

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



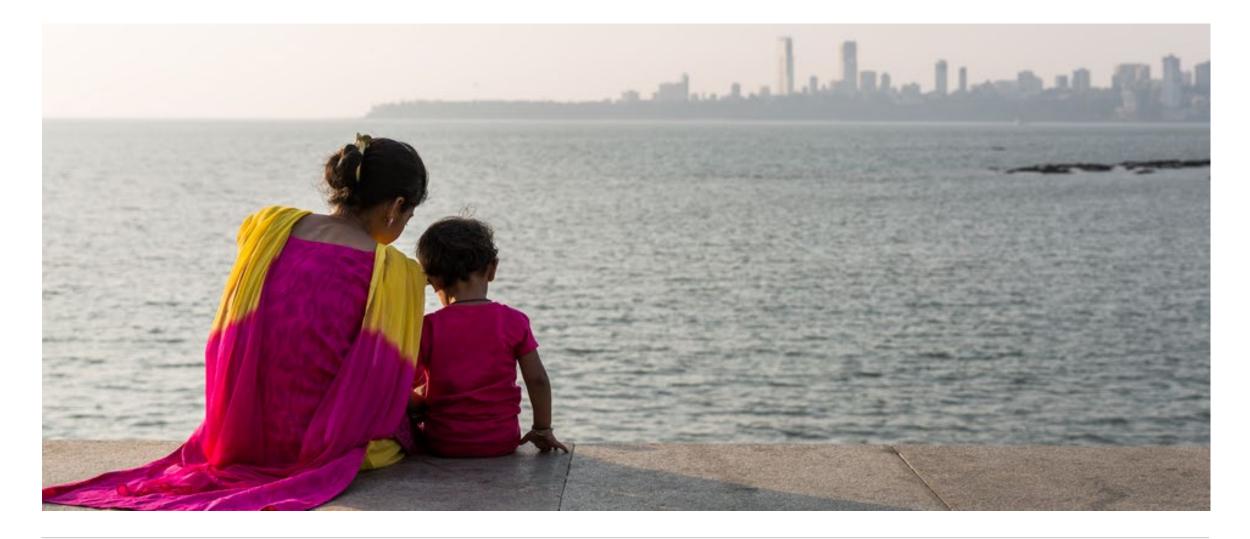
Subnational DTP3 coverage in Africa as of 2019, IHME



RISP Africa Geographies



Final thoughts



If you want to go fast, go alone.

If you want to go far, go together.

—African Proverb