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**Improving child health in the WHO European  
Region: accelerating action to eliminate measles  
and rubella and maintain the Region's polio-free  
status**

*Immunization and child mortality reduction (Millennium Development Goal 4)*

Scaling up efforts to meet the Millennium Development Goals (MDGs) is a high priority for the WHO Regional Office for Europe and its partners; a priority supported by the direction and guidance of the new European policy framework for health and well-being: Health2020.

The power of vaccines, combined with a range of investments to strengthen systems that deliver immunization and other services to women and children, provide health benefits that are relevant to all the MDGs, particularly MDGs 2, 4 and 5, in the European Region. Fully immunizing every child with routine and new vaccines (ie. pneumococcal, rotavirus) contributes significantly to essential child mortality reduction (MDG 4). Healthy children are more likely to attend school regularly and are better able to learn (MDG 2); and furthermore, reaching every family with immunization puts mothers in touch with maternal care services (MDG 5).

While data reflect a steady decline in mortality rates among children aged under five and infants throughout the Region, there are stark variations between and within countries. Furthermore, while national immunization programmes are generally strong and national routine immunization coverage is high, the Region has experienced outbreaks of vaccine-preventable diseases over the past four years.

As well as marginalized and underserved populations (e.g. Roma), new susceptible population groups have been identified during recent outbreaks. Reasons for vaccine hesitancy include complacency (lack of concern about vaccine-preventable diseases), lack of confidence or trust in vaccines and in the services or authorities that deliver them, and lack of access to immunization services.

*The resurgence of measles in the Region and the fragile polio-free status*

The 2015 measles and rubella elimination goal is clearly under threat. Despite renewed political commitment and repeated calls for accelerated action, Member States have collectively reported over 80 000 cases of measles since the beginning of 2010, more than 80% of which have been reported by Member States of the European Union. The Region has also experienced a shift in

the characteristics of outbreaks: in 2011, the majority of cases were in adolescents and younger adults, outbreaks were registered in high socioeconomic groups, in urban as well as harder to reach rural populations.

With the 2015 MDG deadline approaching, urgent efforts are required to take the necessary steps (including catch-up immunization campaigns targeting susceptible, including older, populations) to ensure high population immunity. It is recommended that Member States also assess their own vulnerability, evaluate their progress and monitor efforts to eliminate vaccine-preventable diseases. They should establish strong surveillance and monitoring systems to provide evidence to national verification commissions established for elimination. WHO will provide technical assistance, along with the newly established Regional Commission for the Verification of Measles and Rubella Elimination, which will give guidance to commissions at national level. Furthermore, support will be provided to improve surveillance capacity, notably of rubella and congenital rubella syndrome, and to strengthen outbreak investigation and immunization response.

The same call for action could be made for protecting the Region's fragile polio-free status. Ten years ago the Region was declared polio-free by the European Regional Commission for the Certification of Poliomyelitis Eradication (RCC). However, the challenge to maintain this status was clearly demonstrated in 2010 when a large outbreak occurred in Tajikistan, which also affected neighbouring Member States. Thanks to an extraordinary effort by ministries of health, donors, international agencies and organizations, the outbreak, which saw 479 cases of polio, was stopped. In 2011 the RCC convinced by evidence that transmission of the wild poliovirus had been successfully interrupted, the RCC announced that the Region had retained its polio-free status. Suboptimal surveillance and polio vaccine coverage in some countries mean that the Region remains under risk of importation, which threatens the Region's polio-free status. In June 2012 the RCC identified six Member States as being at high risk of a continued transmission following importation of wild poliovirus.

The Sixty-Fifth World Health Assembly in May 2012, adopted resolution WHA65.5 on Poliomyelitis: intensification of the global eradication initiative, which declares the completion of poliovirus eradication as a programmatic emergency for global public health. In light of this resolution, the Member States in the European Region are urged to maintain very high population immunity against the poliovirus, remain vigilant with regard to poliovirus importations, and make available the financial resources required for the full and continued implementation of the necessary strategic approaches to ensure that the Region remains polio-free.

### ***Global Vaccine Action Plan***

The Decade of Vaccines Collaboration (DoVC) is a joint effort under the leadership of WHO, the United Nations Children's Fund (UNICEF), the GAVI Alliance, the Bill and Melinda Gates Foundation and the National Institute of Allergy and Infectious Diseases (NIAID), which is part of the United States National Institutes of Health. The DoVC effort aims to define the vision for the Decade of Vaccines and develop a global vaccine action plan (GVAP).

The Sixty-Fifth World Health Assembly, in May 2012, reviewed and endorsed the GVAP, which comprises four key areas.

1. Establishing and sustaining broad public and political support for the use of vaccines and the financing of immunization services.
2. Strengthening the equitable delivery of immunization services to achieve universal coverage of safe and effective vaccines by 2020.

3. Cultivating a robust scientific enterprise to produce innovation in the discovery and development of new and improved vaccines and associated technologies.
4. Creating the right market incentives to ensure an adequate and reliable supply of affordable vaccines.

The ultimate success of the GVAP depends on the engagement of the Member States and partners in all Regions, who should be committed to the common goal of achieving universal access to the benefits of immunization. Member States have already demonstrated a spirit of striving towards a common goal during European Immunization Week and are working together to advocate for immunization.

***Discussion:***

1. What steps has your country taken to ensure that the Region meets the 2015 measles and rubella elimination goal?
  - (a) What are the positive examples that could be shared with other countries?
  - (b) If your country experienced measles outbreaks over the past 2–3 years, what action was taken that successfully halted or curbed transmission?
  - (c) Are new strategies being considered to immunize high risk groups or identified groups of susceptible individuals?
2. What are your key concerns regarding maintenance of the Region's polio-free status?
  - (a) In which areas could your country contribute regionally and globally as we enter the emergency phase?
  - (b) What lessons learned within your country could you share?
3. How do you intend to take onboard, engage with and support the Global Vaccine Action Plan?