



Recommendations for U.S. efforts to strengthen global vaccination coverage June 2020

Background

The COVID-19 pandemic has disrupted life-saving immunization services globally, placing millions of children at risk of acquiring vaccine-preventable illnesses and setting back decades-worth of progress against diseases like diphtheria, measles and polio. According to the World Health Organization, over 80 million children under the age of one in at least 68 countries have been affected by a disruption of routine vaccination services due to:

- Redeployment of resources and healthcare personnel to COVID-19 responses,
- concern for risk of COVID-19 infection in health centers and immunization clinics,
- delays in transporting vaccines
- lack of personal protective equipment for healthcare workers, and
- restrictions on movement and lack of information.

The resulting disease burden from outbreaks of vaccine-preventable illnesses may be devastating for already weak and stretched healthcare systems in developing countries. Communities may also see rising rates of antimicrobial resistance as use of antibiotics increases to meet the needs of patients infected with vaccine-preventable diseases.

Restoring and strengthening immunization infrastructure is not only critical for preventing the spread of known vaccine-preventable diseases but is necessary to prepare countries for deploying COVID-19 vaccines as rapidly, efficiently, and equitably as possible.

Coupled with drops in immunization coverage in the U.S., a weakening of immunization rates globally further jeopardizes American health security. As COVID-19 has demonstrated, an outbreak of a deadly infectious disease is only a plane-ride away. The U.S. must support restoring and strengthening global vaccination services to protect American and global health.

Policy Recommendations:

- Immediate reinstatement of U.S. membership to the World Health Organization and complete payment of U.S. financial obligations, including support for vital immunization activities to prevent polio, measles, and other vaccine-preventable infectious diseases in resource-limited settings. The WHO is helping countries sustain immunization services during the COVID-19 pandemic, which ultimately benefits the U.S. by preventing such illnesses from reaching American shores. Withdrawal of U.S. membership and funding would delay the goal of achieving a world free of measles, polio, and other devastating infectious diseases and leave the U.S. more vulnerable to outbreaks. WHO's critical role in global vaccine delivery is described below.
 - As the only organization with access and capacity to reach polio hotspots like Pakistan and Afghanistan, maintaining funding for WHO's efforts to conduct polio immunization, surveillance and other technical support activities is critical for meeting global polio eradication goals.

- As the key implementing agency of the Measles and Rubella Initiative, the WHO provides technical expertise and maintains measles surveillance networks, in addition to providing measles vaccine to millions of children. Measles immunization campaigns have already been delayed in 24 countries.
- WHO is quickly mobilizing in the Democratic Republic of the Congo in response to a new outbreak of Ebola in the northwest region of the country, while continuing to respond to an ongoing outbreak in the eastern region. The WHO has coordinated the procurement, storage and distribution of hundreds of thousands of doses of experimental Ebola vaccine since the 2018 outbreak began in the eastern region and has coordinated efforts to distribute measles vaccine in conjunction. The WHO will need continued financial and technical support to provide Ebola vaccine in this new outbreak area.
- Strong U.S. support for additional global immunization collaborative activities, including U.S. participation in the Access to COVID-19 Tools Accelerator, a global cooperative effort to drive the development and availability of a COVID-19 vaccine and other tools. Leveraging resources globally is an important strategy for speeding development and distribution of a COVID-19 vaccine, and a lack of participation on the part of the U.S. government may slow progress for all and delay our ability to access the vaccine for U.S. patients when one is developed.
- U.S. contribution to the Coalition for Epidemic Preparedness Innovations (CEPI) to stimulate and accelerate the development of vaccines against emerging infectious diseases and enable access to vaccines during outbreaks. COVID-19 emergency supplemental funding should provide at least \$200 million to CEPI to advance SARS-CoV-2 vaccine candidates. Support for CEPI will help ensure that vaccines developed for COVID-19 will be deployed effectively worldwide to help those most in need.
- Continued strong U.S. support for Gavi, the Vaccine Alliance, to prevent further infectious disease outbreaks and protect access to vital immunizations for future generations of children. Gavi has made \$200 million available to help resource-limited countries with COVID-19 responses and will require strong support from partners to strengthen and maintain ongoing immunization activities. Congress must pass a fiscal year 2021 funding bill and include at least \$290 million for Gavi to meet the U.S. pledge of \$1.16 billion through 2023.
- Gavi is also working to accelerate the development, manufacturing and delivery of safe and effective COVID-19 vaccines for all those who need them. To support these efforts, \$900 million should be included as part of COVID-19 supplemental funding to address the global efforts against the pandemic.
- Increased funding for U.S. agencies to deliver life-saving immunization services in the developing world, particularly the Centers for Disease Control and Prevention's Global Immunization Division and for USAID's partnerships with Gavi and the Global Polio Eradication Initiative.