RESOLUTION

CD50.R5

STRENGTHENING IMMUNIZATION PROGRAMS

THE 50th DIRECTING COUNCIL,

Having reviewed concept paper, Strengthening Immunization Programs (Document CD50/14), as well as the significant progress made by the countries in the field of immunization;

Recognizing the effective efforts of the Member States and the Pan American Health Organization to harmonize vaccination policies and strategies, promoting the training of national teams in the effective management and implementation of national programs and including the adoption of the Revolving Fund for Vaccine Procurement as the cooperation mechanism that facilitates access to biologicals and other supplies by all Member States;

Recognizing that some Member States have determined that immunization is a public good that has made a significant contribution to the reduction of infant mortality, the eradication of polio, the elimination of measles, rubella, and congenital rubella syndrome, and the epidemiological control of other vaccine-preventable diseases in the Region;

Reiterating that the Revolving Fund has been a key factor in the Member States’ timely and equitable access to vaccines and that, as part of technical cooperation, it has permitted the standardization of vaccination plans in the countries of the Americas, the achievement of high vaccination coverage, a timely response to outbreaks and other
health emergencies, and the rapid introduction of “new vaccines” against rotavirus, pneumococcus, human papillomavirus, and, recently, influenza A(H1N1) virus;

Recognizing that protecting national and regional immunization programs is essential to sustaining the achievements of all the Member States and that reducing vaccination levels in any country directly affects the others,

**RESOLVES:**

1. To urge the Member States to:
   (a) endorse national immunization programs as a public good;
   (b) support the Regional Strategy for Immunization and its vision and meet the following objectives:
      • sustain the achievements: a Region free of polio, measles, rubella, and congenital rubella syndrome, with control of diphtheria, whooping cough, and Hib;
      • complete the unfinished agenda: elimination of neonatal tetanus; epidemiological control of hepatitis B, seasonal influenza, and yellow fever; ensure that all municipios have coverage of over 95% (using DPT3 as the tracer); and complete the transition from an immunization approach geared to children to one focused on comprehensive family immunization;
      • tackle new challenges: introduce new vaccines that contribute to the achievement of the MDGs; improve national decision-making capacity; promote the financial sustainability of the EPI; and strengthen vaccination and immunization services within the framework of systems and services based on primary health care;
      • support the PAHO Revolving Fund for Vaccine Procurement as the strategic cooperation mechanism that enables the Member States to have timely and equitable access to their supplies of the immunization programs.

2. To request the Director to:
   (a) continue providing technical support to the Member States to strengthen the operating capacity of national immunization programs within the framework of primary health care, using strategies that ensure action in municipios with low coverage as well as among hard-to-reach populations in vulnerable situations;
(b) provide technical assistance to the Member States for evidence-based decision-making through the ProVac Network of Centers of Excellence;

(c) strengthen and maintain the Revolving Fund as an active, efficient mechanism based on the principles and procedures that have yielded successful results over its 30 years of operation;

(d) continue to support strong advocacy and social mobilization, in light of growing anti-vaccination sentiments which continue to challenge immunization efforts.

(Sixth plenary, 29 September 2010)