

Gaps in vaccine coverage highlighted with new report and online tool

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As the 69th World Health Assembly discusses progress on the [Global Vaccine Action Plan](#), a new data visualization platform—from the [International Vaccine Access Center \(IVAC\)](#) at the [Johns Hopkins Bloomberg School of Public Health \(JHSPH\)](#)—provides stark numbers on where shortfalls exist in vaccine introduction and coverage.

The [Vaccine Information Epidemiology Window \(VIEW-hub\)](#) incorporates data on Haemophilus influenzae type B (Hib) [vaccine](#), [pneumococcal conjugate vaccine](#) (PCV) and rotavirus vaccine. Despite their effectiveness in preventing pneumonia and diarrhea, these pathogens and the conditions they cause continue to be leading causes of death worldwide among children under 5 years of age.

VIEW-hub shows where children are unvaccinated because either their country has not introduced the vaccine, or the country's routine immunization services are not reaching them. For example:

- 42 percent of the world's infants (56.1 million) are not receiving Hib vaccine;

60 percent (80.7 million) are not receiving PCV;

76 percent (102.8 million) are not receiving rotavirus vaccine.

What's more, 72 percent of the global burden of pneumonia and diarrhea child deaths occur in just 15 [countries](#)—India, Nigeria, Pakistan, DRC,

Angola, Ethiopia, Indonesia, Chad, Afghanistan, Niger, China, Sudan, Bangladesh, Somalia and the United Republic of Tanzania. The two countries with the greatest absolute burden, Nigeria and India, are in the early stages of introducing these vaccines.

"Asia, in particular, lags in rotavirus vaccine introduction," points out Mathuram Santosham, MD, MPH, senior advisor at IVAC and chair of the Rotavirus Organization of Technical Allies (ROTA) Council. "No country in South or South-East Asia has introduced rotavirus vaccine nationally, and only three—India, Thailand and the Philippines—have introduced sub-nationally."

Even among countries that have introduced Hib, PCV and rotavirus vaccines, coverage is not reaching target levels. According to the [Global Action Plan for the Prevention and Control of Pneumonia and Diarrhoea \(GAPPD\)](#), from WHO and UNICEF, at least 90% of children should be immunized in countries where the vaccines are available.

In Africa, for example, 44 out of the 54 countries have introduced the PCV vaccine. However, only 8 countries have reached very high coverage rates (90-100 percent); close behind are only 9 countries with high coverage rates (80-89 percent), based on the 2015 WHO/UNICEF Estimates of National Immunization Coverage (WUENIC) for 2014. This suggests that governments have made progress in decision making, but are lagging in policy implementation.

"If the ultimate goal is to reach as many children as possible with vaccines, introduction data isn't enough," says Kate O'Brien, MD, MPH, Executive Director of IVAC, "we need to look at coverage, how many kids in the country are actually getting the vaccines. New policies to allow vaccines into a country's routine schedule does no good for children if they aren't actually receiving them."

With real-time data updates, VIEW-hub can be used to monitor introduction and implementation, and to develop strategies for accelerating progress on global and country levels. Data sources include the World Health Organization, Centers for Disease Control and Prevention, UNICEF, Gavi, Bill and Melinda Gates Foundation, government Ministry of Health websites and vetted media sources. VIEW-Hub is also monitoring vaccine impact evaluations, including for PCV and [rotavirus vaccine](#).

More information: www.jhsph.edu/research/centers...b-Report-2016May.pdf

Provided by International Vaccine Access Center

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