

# **Action Points – Day 1**

**Measles Global Management Meeting  
October 14-16, 2009**

**Geneva, HQ/WHO**

# Day 1 – Action Points

## ADVOCACY

### 1. Integrate Advocacy Efforts:

- Revamp and revitalize advocacy activities so that measles is included as part of improved messaging about immunization more broadly.
- Explore opportunities to join forces with re-launched GAVI Advocacy Task Force, GATEs/Task Force for Global Health, and Polio Eradication.
- Measles as a platform idea – pneumonia, vitA, malaria, deworming

### 2. Publish Measles Resurgence Analysis:

- Projected resurgence of global measles cases for various "what if" programmatic scenarios is a powerful advocacy tool and should be published (*proposed to be included in publication of 2008 measles mortality reduction estimates WER Dec 4/09*).



# Day 1 – Action Points

## ADVOCACY (2)

1. Contribution of measles to MDGs achievement:
  - Prepare publication and use for advocacy.
2. Plan Dec 3 2009 mortality reduction announcement:
  - Confirm partners spokespeople
  - Messaging about the measles goal in jeopardy.
  - Arrange conference call week of Oct 20<sup>th</sup>.
3. Participate in Nov 2<sup>nd</sup> World Pneumonia Day:
  - Highlight importance of measles vaccination in Global Action Plan for Pneumonia (GAPP)
  - Circulate GAPP Executive Summary document.



# Day 1 – Action Points

## IMPLEMENTATION

1. Facilitate eligible countries to prepare GAVI applications for routine MCV2 funding:
  - Hold discussions with countries (EPI Managers meetings & individually)
  - Arrange TA if needed; (*organize MCV2 workshop for countries?*)
  - Encourage/support use of MSP tool to help countries compare routine MCV2 strategic options.
  - Review and endorse (if appropriate) country applications to GAVI.
  - Submit proposals for MCV2 intro to GAVI by **March 4, 2010**.
  - Consider strategy with GAVI IRC & Board to replenish MCV2 window; submit report on progress, impact of this funding.
  - Calculate 2<sup>nd</sup> dose funds remaining with GAVI (after commitments) and cost projections for future countries introducing, to see how much additional funding may be required.



# Day 1 – Action Points

## IMPLEMENTATION (2)

### 2. Document routine MCV2 implementation experiences:

- Use/adapt HQ assessment tool/protocol to collect best practices and improve MCV2 performance.
- Support countries to complete assessments (HQ has TA & funds to help)
- Use findings to adjust/enhance MCV2 implementation
- Share learning/best practices with & encourage donor funding

### 3. Incorporate measles activities in cMYP's:

- Raise awareness with EPI Managers & technical staff in country of need to put measles activities & costs in cMYPs.
- Ensure that ALL measles activities (SIAs, surveillance, MCV1 & 2, training, etc) are included in countries' cMPY.
- Share list of countries who will be revising their cMPYs in 2010.



# Day 1 – Action Points

## IMPLEMENTATION (3)

4. Strengthen regional monitoring to end routine vaccine stock-outs:
  - Re-establish quarterly stock reporting to regions from countries
  - Find budget for staff person(s) to do this.
  
5. Develop method for monitoring routine MCV2 coverage:
  - Produce guidance materials for countries
  - Share good practices at EPI Managers Meetings



# Day 1 – Action Points

## MANAGEMENT

1. Planning of Global Measles Eradication Consultation Meeting:
  - Agree on dates Sept 2010? and location (pros/cons of Geneva vs elsewhere)
  - Explore hiring someone to coordinate the organization of the consultation.
2. Prepare 2009 Measles Initiative Annual Report:
  - Regions to submit 2009 results, activities and propose content ideas/materials.
  - HQ to coordinate preparation of joint report (hire consultant)
  - Submission due date: Feb 2010.
3. Next Global Measles Management Meeting Feb 4, 2010 (after GIM):
  - Regions to propose topics/content



# Day 1 – Action Points

## MANAGEMENT (2)

4. In view of the funding gap develop a list of priority countries for support in 2009:
  - Agree on list countries to receive funding that is currently available
  - Ensure governments understand need to contribute 50% of funding for ops costs.
  - Fund raise for countries not on priority list and for which funding is not currently assured.
5. Regions to complete budget spreadsheet for 2010 funds:
  - Submit to WHO HQ by October 23, 2009
6. Make senior management aware of 2010 GATEs funding for measles:
  - Use this initial funding to build support for future funding from GATEs.

