

A WHO REPORT OF THE

Eliminate Yellow Fever Epidemics (EYE)
Strategy Annual Partners' Meeting

2018













WHO/WHE/IHM/2019.7

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Cataloguing-in-Publication (CIP) data. CIP data are available at http://apps.who.int/iris.

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Acronyms

AFRO WHO Regional Office for Africa

CDC The Centers for Disease Control and Prevention (United States)

DRC Democratic Republic of the Congo

ELISA Enzyme-linked immunosorbent assay

EYE End Yellow Fever Epidemics

FIND Foundation for Innovative New Diagnostics

Gavi, the Vaccine Alliance

ICG International Coordinating Group on Vaccine Provision

IFRC International Federation of Red Cross and Red Crescent Societies

IHM Infectious Hazards Management

LG Leadership Group

MCV Measles-containing-vaccine

MMR Measles, mumps and rubella vaccine

PAHO Pan American Health Organization

PCR Polymerase chain reaction

PMG Programme Management Group

UNICEF United Nations Children's Fund

UNICEF SD United Nations Children's Fund Supply Division

WHO World Health Organization

WHO HQ World Health Organization Headquarters

YF Yellow fever

Executive summary

The comprehensive global strategy to Eliminate Yellow Fever Epidemics (EYE) was developed by WHO, UNICEF, Gavi the vaccine alliance, and more than fifty partners to build a global coalition that will tackle the increased risk of yellow fever (YF) epidemics in a coordinated manner by 2026.

The annual EYE Strategy Partners Meeting was held on the 11–13 September in Dakar, Senegal, and hosted by UNICEF West and Central Africa Regional Office (WCARO). More than 70 participants, including partners, country representatives, vaccine manufacturers, donors, and experts came together to discuss the EYE Strategy achievements to date, and the main challenges that are anticipated going forward.

The main objectives of the meeting were:

- To review and discuss the EYE Strategy future plans and the way forward,
- To strengthen partners', particularly country partners', engagement,
- To discuss key issues relating to the Strategy's implementation.

The meeting opened with a summary of the Strategy's progress to date and situational updates from the WHO Regional Office for Africa (AFRO) and Pan American Health Organization (PAHO). This was followed by presentations on emerging research issues in YF control and updates from by the Strategy's working groups, including the new Immunization Operational Guidance working group. The EYE Secretariat also presented its work on the development of the EYE Country Guidance Toolkit, a resource for country-level partners with targeted and relevant advice on scaled-up approaches to rolling out YF control activities from epidemic investigation to immunization. The second day comprised of presentations from individual countries, and overview of vaccine supply and demand, and presentations from vaccine manufacturers. The third and final day included expert panel discussions and the presentation of proposed work plans by the working groups. The meeting ended with a summary and outline of the Strategy's next steps, followed by a guided tour of the Pasteur Institute in Dakar—the YF reference laboratory for the African Region.



The Strategy is currently on track to meet its objectives, and a number of achievements were highlighted. The EYE Governance Framework is operational with increasing interactions and engagement from representatives in the Programme Management Group, Leadership Group, and working groups. The new Immunization Operational Guidance Working Group was also established and the role of the Supply and Demand Working Group was expanded to improve coordination between vaccine supply and demand. Delegates also noted the significant progress that has been made towards the target of establishing three regional YF reference laboratories in the African Region. There has also been an increase in global vaccine supplies as a result of combined efforts by partners and strong engagement from vaccine manufacturers. The need to improve readiness in urban areas to protect populations was also highlighted, particularly as outbreaks in recent years have been unpredictable and the factors driving YF risk have changed. It was also noted that although the coverage gap between YF and other vaccine-preventable diseases such as measles is closing, challenges remain in terms of improving the performance of routine immunization for YF. Finally, improved information on YF risk and vaccine coverage is needed to inform campaign prioritization, identify populations most at risk and improve the visibility of vaccine needs.

Delegates provided their valuable input on how to move EYE forward in terms of governance, planning and implementation. Important technical priorities were identified, including effective prioritization of resources at a global level through assessment of YF risk, strengthening implementation of immunization (particularly routine immunization), and enhancing surveillance and laboratory capacity. All partners agreed on the key role of country commitment and ownership in unlocking the potential of the Strategy by implementing mass preventive immunization campaigns and scaling up routine immunization with the support of the EYE Programme Management Group (PMG) comprising representatives from WHO, Gavi and UNICEF. Other achievements in terms of the Strategy's governance include the establishment of the new Immunization

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