

Strategic plan for Measles Elimination and Rubella and Congenital Rubella Syndrome Control in the South-East Asia Region

2014-2020

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Acronyms

AD Auto-disable

AEFI Adverse events following immunization

CBAW Child Bearing Aged Women
CRS Congenital rubella syndrome

EPI Expanded Program on Immunization

GFIMS Global Framework for Immunization Monitoring System

GIVS Global Immunization Vision and Strategy

GVAP Global Vaccine Action Plan

IgM Immunoglobulin M

IMCI Integrated management of childhood illness
ITAG SEAR Immunization Technical Advisory Group

JRF Joint reporting form

MCV1 First dose of measles-containing vaccine
MCV2 Second dose of measles-containing vaccine

MDG Millennium Development Goal

MMR Measles, mumps and rubella vaccine
MR Measlesrubella / measles and rubella
NML National measles-rubella laboratory
NRAs National regulatory authorities

NVC National Verification Committee (For measles elimination)

RC Regional Committee

RCV Rubella-containing vaccine
RED Reaching every district

RRLs Regional reference laboratories

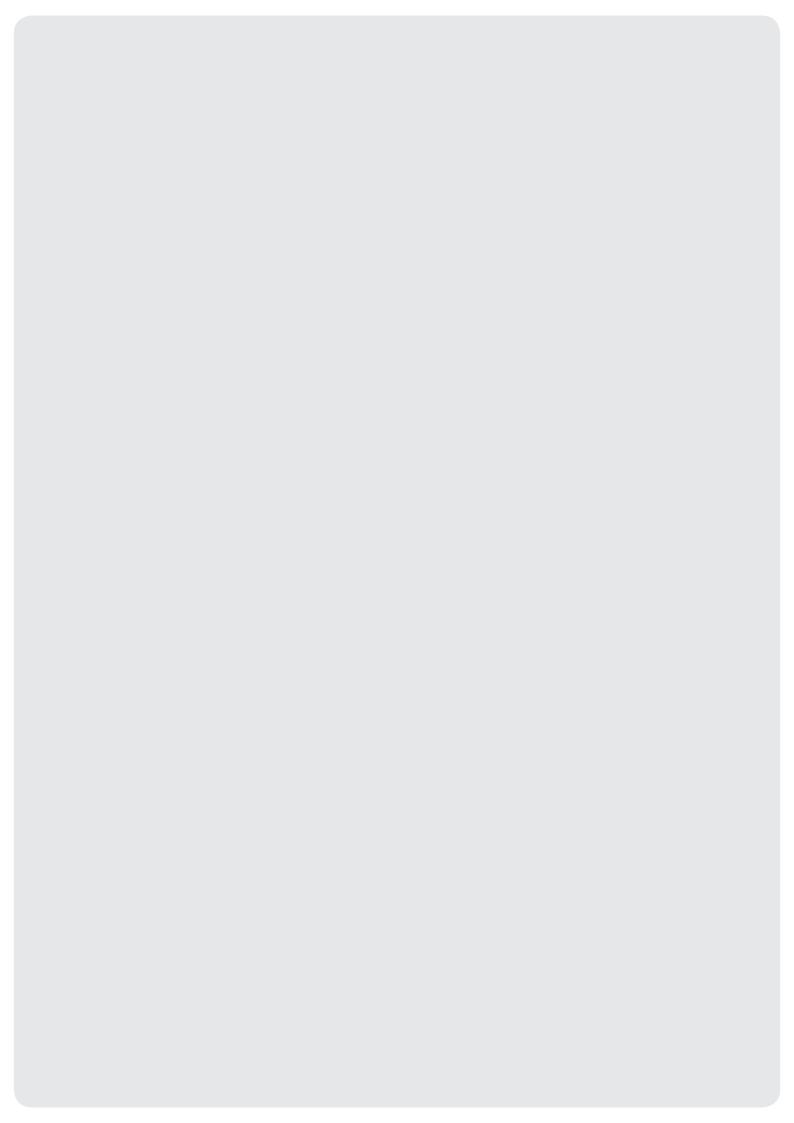
RT-PCR Reverse transcription polymerase chain reaction

RVC Regional Verification Commission (for measles elimination)

SEAR South-East Asia Region

SIAs Supplementary immunization activities

VPD Vaccine preventable diseases
UNICEF United Nations Children Fund
WHO World Health Organization



Foreword



In 2012, the World Health Assembly (WHA) endorsed the Global Vaccine Action Plan (GVAP) and its objective to eliminate measles in 4 WHO Regions by 2015. Since then, Member States of all 6 WHO Regions, including the South-East Asia Region have adopted measles elimination goals.

The Strategic Plan for Measles Elimination and Rubella and CRS Control in the South East Asia Region provides a framework for the 11 Member States towards strengthening surveillance systems to meet the measles elimination and rubella/CRS control goal by 2020 (Resolution SEA/

RC66/R5, Sept 2013). This Strategic Plan is based on years of experience in implementing immunization programmes and incorporates lessons learned from polio eradication activities. The strategy stresses the importance of strong routine immunization systems supplemented by campaigns, laboratory-based surveillance, outbreak preparedness and case management, as well as linkage and partnerships and building public trust.

To achieve measles elimination, the strategies outlined in this document will need to be implemented. Policy and practice gaps leading to missed opportunities for measles vaccination need to be addressed. To continue on the trajectory of progress towards achieving the 2015 MDGs, global measles control targets and regional measles elimination goals, the 11 Member States in this Region and partners need to increase the visibility of measles elimination activities and make the investments needed to strengthen health systems and achieve equitable access to immunization services.

Measles elimination and rubella/congenital rubella syndrome control is one of our flagship programs in this Region and will be supported and monitored by WHO. With strong partnerships, resources and political will, we can, and will work together to achieve and maintain the elimination of measles, and control of rubella and CRS in the South East Asia Region by 2020. Let us use this Strategic Plan to expand equitable access to measles and rubella vaccines to reach the unreached population to save many more precious lives that are our are the future of the globe. I believe that this goal, endorsed by the Sixty-sixth Session of the WHO Regional Committee for South-East Asia in September 2013 will protect and improve the lives of children and their

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