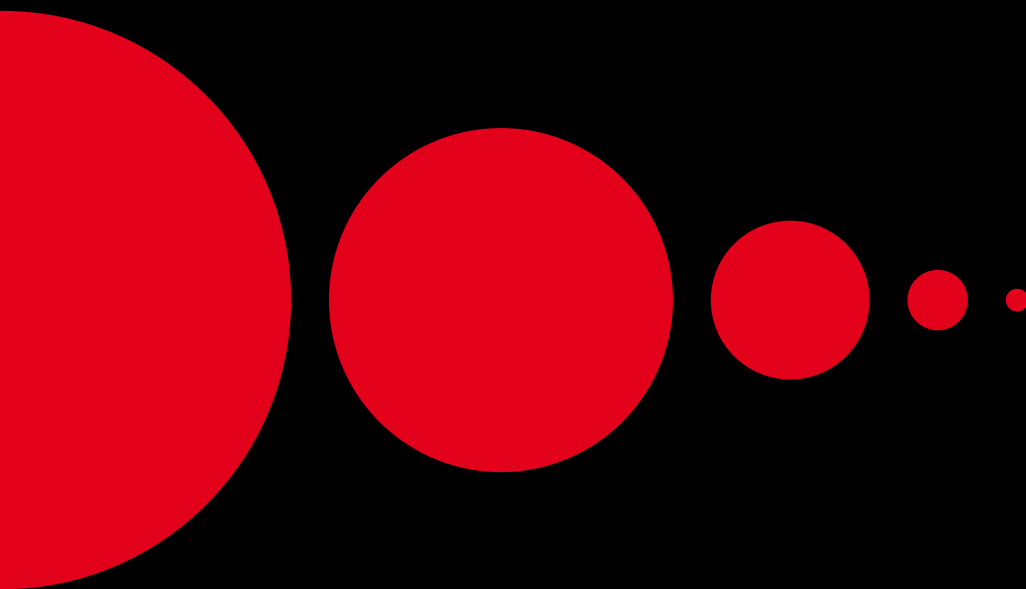


# **GLOBAL MEASLES AND RUBELLA**



**STRATEGIC PLAN**  
2012- 2020

WHO Library Cataloguing-in-Publication Data :

Global measles and rubella strategic plan : 2012-2020.

1.Measles – prevention and control. 2.Rubella – prevention and control. 3. Congenital Rubella Syndrome – prevention and control. 4.Immunization programs – trends. 5.Epidemiologic surveillance. 6.Disease outbreaks. 7.Vaccinations – economics. 8.Strategic planning. 9.World Health Organization.

ISBN 978 92 4 150339 6

[NLM classification: WC 500]

© World Health Organization 2012

All rights reserved. Publications of the World Health Organization are available on the WHO web site ([www.who.int](http://www.who.int)) or can be purchased from WHO Press, World Health Organization, 20 Avenue Appia, 1211 Geneva 27, Switzerland (tel.: +41 22 791 3264; fax: +41 22 791 4857; e-mail: [bookorders@who.int](mailto:bookorders@who.int)).

Requests for permission to reproduce or translate WHO publications – whether for sale or for noncommercial distribution – should be addressed to WHO Press through the WHO web site ([http://www.who.int/about/licensing/copyright\\_form/en/index.html](http://www.who.int/about/licensing/copyright_form/en/index.html)).

The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted lines on maps represent approximate border lines for which there may not yet be full agreement.

The mention of specific companies or of certain manufacturers' products does not imply that they are endorsed or recommended by the World Health Organization in preference to others of a similar nature that are not mentioned. Errors and omissions excepted, the names of proprietary products are distinguished by initial capital letters.

All reasonable precautions have been taken by the World Health Organization to verify the information contained in this publication. However, the published material is being distributed without warranty of any kind, either expressed or implied. The responsibility for the interpretation and use of the material lies with the reader. In no event shall the World Health Organization be liable for damages arising from its use.

Printed in Switzerland.

Photo credits: Most photographs in this document are © C. McNab/The Measles & Rubella Initiative with the exception of the following: Page 8 – #1 ©Daniel Cima/American Red Cross, #3 © UNICEF/NYHQ2010-2353/Olivier Asselin; Page 12 – #1 ©UNICEF/NYHQ2004-0431 Christine Nesbitt; Page 16 – #1 ©WHO/Thierry Parel; Page 18 – #2 CDC/ Cynthia S. Goldsmith; William Bellini, Ph.D.; Page 22 – #1 © UNICEF/NYHQ2007-0471/Christine Nesbitt; Page 24 – #2: ©Daniel Cima/American Red Cross, #3 WHO/David Featherstone; Page 26 – #3 © UNICEF/NYHQ2005-0252/Giacomo Pirozzi; Page 28 – #1 WHO/Rod Curtis, #3 © UNICEF/NYHQ2005-0252/Giacomo Pirozzi; Page 30 – #1 © UNICEF/NYHQ2006-0084 Shehzad Noorani; Page 31 – © UNICEF/NYHQ2006-1800/Josh Estey; Page 32 – © Gettyimages/Jamie Grill Photography; Page 33 – ©WHO/Christopher Black; Page 34 – #2 © GAVI\_2011\_Riccardo Gangale.

# CONTENTS

<b>Abbreviations and acronyms.....</b>	<b>4</b>
<b>Foreword .....</b>	<b>6</b>
<b>Executive summary .....</b>	<b>8</b>
<b>Introduction.....</b>	<b>10</b>
<b>Vision, goals and milestones.....</b>	<b>13</b>
<b>Global context .....</b>	<b>14</b>
<i>Measles vaccination .....</i>	<i>14</i>
<i>Rubella vaccination .....</i>	<i>15</i>
<i>Laboratory network.....</i>	<i>15</i>
<i>Current WHO global and regional targets .....</i>	<i>16</i>
<i>Potential future WHO global targets.....</i>	<i>16</i>
<i>Recent setbacks and risk of resurgence.....</i>	<i>18</i>
<i>Economic analyses of measles, rubella and CRS control and elimination.....</i>	<i>19</i>
<b>Strategy to eliminate measles, rubella and CRS .....</b>	<b>20</b>
1. <i>Achieve and maintain high levels of population immunity by providing high vaccination coverage with two doses of measles- and rubella-containing vaccines .....</i>	<i>20</i>
2. <i>Monitor disease using effective surveillance and evaluate programmatic efforts to ensure progress .....</i>	<i>21</i>
3. <i>Develop and maintain outbreak preparedness and respond rapidly to outbreaks and manage cases.....</i>	<i>22</i>
4. <i>Communicate and engage to build public confidence and demand for immunization .....</i>	<i>23</i>
5. <i>Perform the research and development needed to support cost-effective operations and improve vaccination and diagnostic tools.....</i>	<i>24</i>
<b>Guiding principles to eliminate measles, rubella and CRS .....</b>	<b>26</b>
1. <i>Country ownership and sustainability.....</i>	<i>26</i>
2. <i>Routine immunization and health systems strengthening .....</i>	<i>26</i>
3. <i>Equity.....</i>	<i>27</i>
4. <i>Linkages .....</i>	<i>27</i>
<b>Challenges to implementing the Strategic Plan.....</b>	<b>30</b>
1. <i>Financial risks.....</i>	<i>30</i>
2. <i>High population density and highly mobile populations .....</i>	<i>31</i>
3. <i>Weak immunization systems and inaccurate reporting of vaccination coverage .....</i>	<i>32</i>
4. <i>Managing perceptions and misperceptions.....</i>	<i>32</i>
5. <i>Conflict and emergency settings .....</i>	<i>33</i>
<b>Roles and responsibilities .....</b>	<b>34</b>
1. <i>National governments.....</i>	<i>34</i>
2. <i>Global and regional partners .....</i>	<i>34</i>
<i>The Measles and Rubella Initiative .....</i>	<i>35</i>
<i>The GAVI Alliance.....</i>	<i>35</i>
<b>Tracking progress.....</b>	<b>36</b>
<b>Conclusion.....</b>	<b>37</b>
<b>References .....</b>	<b>38</b>
<b>Annex 1 .....</b>	<b>42</b>

# ABBREVIATIONS AND ACRONYMS

AEFI	adverse event following immunization
ARC	American Red Cross
CDC	Centers for Disease Control and Prevention (USA)
CIDA	Canadian International Development Agency
cMYP	comprehensive multiyear plans for immunization
CRS	congenital rubella syndrome
DFID	Department for International Development, United Kingdom
DHS	Demographic and Health Survey
DTP	diphtheria-tetanus-pertussis [vaccine]
ELISA	enzyme-linked immunosorbent assay
EPI	Expanded Programme on Immunization
GIVS	Global Immunization Vision and Strategy
GPEI	Global Polio Eradication Initiative
HPV	human papillomavirus [vaccine]
IgM	immunoglobulin M
IPV	inactivated poliovirus vaccine
LabNet	Global Measles and Rubella Laboratory Network
LLIN	long-lasting insecticide treated bednet
M	measles [vaccine]
MCV	measles-containing vaccine
MCV1	first dose of MCV
MCV2	second dose of MCV
MDG	Millennium Development Goal
MR Initiative	Measles and Rubella Initiative
MICS	Multiple Indicator Cluster Survey
MMR	measles-mumps-rubella [vaccine]
MR	measles-rubella [vaccine]
RCV	rubella-containing vaccine
SAGE	Strategic Advisory Group of Experts on immunization
SIA	supplementary immunization activity
UNF	United Nations Foundation
UNICEF	United Nations Children's Fund
USA	United States of America
USAID	United States Agency for International Development
WHO	World Health Organization







# 1 FOREWORD



Implementation of this Global Measles and Rubella Strategic Plan can protect and improve the lives of children and their mothers throughout the world, rapidly and sustainably.

Overwhelming evidence demonstrates the benefit of providing universal access to measles- and rubella-containing vaccines. Globally, an estimated 535 000 children died of measles in 2000. By 2010, the global push to improve vaccine coverage resulted in a 74% reduction in deaths. These efforts, supported by the Measles and Rubella Initiative, contributed 23% of the overall decline in under-five deaths between 1990 and 2008 and are driving progress towards meeting Millennium Development Goal 4 (MDG4).

However, as we have seen in several countries in the African, South-East Asian, European, Eastern Mediterranean and Western Pacific Regions, measles returns when we let down our guard. Rubella also remains a threat to pregnant women and their fetuses in particular, with more than 100 000 children born each year with congenital rubella syndrome (CRS), which includes heart defects, blindness and deafness.

We can completely prevent these illnesses, deaths and disabilities, and the global imperative to invest in vaccination has never been stronger. Measles- and rubella-containing vaccines are among the most cost-effective public health tools available. All 194 World Health Organization (WHO) Member States remain committed to reduce measles deaths by 95% by 2015, and four of six WHO regions have set rubella control or elimination targets. As 2015 approaches, increased access to measles, rubella and other vaccines will immediately produce improved child-mortality outcomes.

This Strategic Plan provides the blueprint. It builds on years of experience in implementing immunization programmes and incorporates lessons from accelerated measles control and polio eradication initiatives. The Plan stresses the importance of strong routine immunization systems supplemented by campaigns, laboratory-backed surveillance, outbreak preparedness and case management, as well as research and development. It also reminds us that public health is about people, above all, and that our work to build public trust and demand for vaccination is as important as the work to build and maintain measles and rubella vaccine supply and cold chains.

In this Decade of Vaccines, let us use the Strategic Plan to expand global equitable access to these measles and rubella vaccines that have saved millions of lives over several decades.

With strong partnerships, resources and political will, we can, and must work together to achieve and maintain the elimination of measles, rubella and CRS globally.

**Margaret Chan**  
Director-General  
World Health Organization

**Thomas R. Frieden**  
Director  
U.S. Centers for Disease  
Control and Prevention

**Anthony Lake**  
Executive Director  
United Nations  
Children's Fund

**Gail J. McGovern**  
President and Chief Executive Officer  
American Red Cross

**Timothy E. Wirth**  
President  
United Nations Foundation







# 2

## EXECUTIVE SUMMARY



This Strategic Plan 2012–2020 explains how countries, working together with the MR Initiative and its partners, will achieve a world without measles, rubella and congenital rubella syndrome (CRS).

The Plan builds on the experience and successes of a decade of accelerated measles control efforts that resulted in a 74% reduction in measles deaths globally between 2000 and 2010 (1). It integrates the newest 2011 World Health Organization (WHO) policy on rubella vaccination which recommends combining measles and rubella control strategies and planning efforts, given the shared surveillance and widespread use of combined measles-rubella vaccine formulations, i.e. measles-rubella (MR) and measles-mumps-rubella (MMR). The Plan presents clear strategies that country immunization managers, working with domestic and international partners, can use as a blueprint to achieve the 2015 and 2020 measles and rubella control and elimination goals. The strategy focuses on the implementation of five core components.

1. Achieve and maintain high levels of population immunity by providing high vaccination coverage with two doses of measles- and rubella-containing vaccines.
2. Monitor disease using effective surveillance, and evaluate programmatic efforts to ensure progress.
3. Develop and maintain outbreak preparedness, respond rapidly to outbreaks and manage cases.
4. Communicate and engage to build public confidence and demand for immunization.
5. Perform the research and development needed to support cost-effective operations and improve vaccination and diagnostic tools.

The Plan provides the global context and an assessment of the current state of the world with respect to national, regional and global management of measles and rubella. It outlines guiding principles that provide a foundation for all measles and rubella control efforts, including country ownership, strengthening routine immunization and health systems, ensuring linkages with other health interventions and providing equity in immunization by reaching every child. Given the progress made to date, the plan includes a list of priority countries that require additional support to meet regional and global goals. It also examines key challenges to measles and rubella control and elimination, including: financial risks; high population density and highly mobile populations; weak immunization systems and inaccurate

预览已结束，完整报告链接和二维码如下：

[https://www.yunbaogao.cn/report/index/report?reportId=5\\_28451](https://www.yunbaogao.cn/report/index/report?reportId=5_28451)

