

RESOLUTION

OF THE

WHO REGIONAL COMMITTEE FOR SOUTH-EAST ASIA

SEA/RC66/R5

MEASLES ELIMINATION AND RUBELLA/CONGENITAL RUBELLA SYNDROME CONTROL

The Regional Committee,

Noting a significant reduction in global measles mortality by 71% between 2000 and 2011, from an estimated 542 000 deaths in 2000 to 158 000 in 2011, and an increase in the global routine measles immunization coverage from 72% in 2000 to 84% in 2011;

Concerned that measles mortality is one of the barriers to achieving Millennium Development Goal 4, and that the South-East Asia Region accounted for approximately half of global measles deaths (158 000) in 2011;

Recognizing that the South-East Asia Region hosts major vaccines manufacturing capacity, and that one Member State is the largest manufacturer of measles vaccines in the world;

Noting progress in the South-East Asia Region of an increase in first-dose measles vaccine coverage from 61% to 79% between 2000 and 2012;

Recalling resolution WHA65.17, urging Member States to apply the vision and strategies of the Global Vaccine Action Plan to develop the vaccines and immunization components of their national health strategy and plans;

Cognizant that in order to achieve elimination, the vaccine coverage target of two doses of measles-containing vaccine needs to be greater than 95% in all country districts, and that this can be achieved through a combination of routine services and periodic mass campaigns;

Concerned that the South-East Asia Region is the only WHO region without a measles elimination goal and that circulating viruses pose a threat to countries and regions which have already eliminated measles or are close to doing so;

Recognizing that various health systems challenges need to be addressed in the efforts towards measles elimination and rubella/congenital rubella syndrome (CRS) control, in particular sustaining a high level of routine immunization coverage, other public health priorities that compete for limited resources, and maintenance of high-quality surveillance systems;

Noting concern about the social and political implications from adverse events following immunization (AEFI) and stressing that utmost efforts need to be made to ensure vaccines and injections are safe and that effective information, education and communication strategies and responses to AEFI are in place;

Noting with concern the inadequately addressed burden of rubella and CRS in the South-East Asia Region;

Acknowledging the early stage of rubella/CRS control in the Region and the challenges that remain, and recognizing that measles elimination is an opportunity for rubella/CRS elimination and that with use of combined measles-rubella vaccine, when measles is eliminated, rubella/CRS will also likely be eliminated;

Citing the results of the February 2013 regional consultation of technical and policy officials in Kathmandu on feasibility of measles elimination and rubella/CRS control, and the recommendation by the South-East Asia Region Immunization Technical Advisory Group;

1. DECIDES to adopt the goal of measles elimination and rubella/CRS control in the South-East Asia Region by 2020;

2. URGES Member States:

- (1) to strengthen immunization and surveillance systems in the context of health systems, including laboratory capacity, for increasing and sustaining high levels of immunization coverage, high-quality case-based surveillance and well-functioning AEFI monitoring systems;
- (2) to conduct epidemiological assessments of population susceptibility to measles and rubella/CRS as a way of informing policy and planning preventive strategies to increase immunity levels uniformly;

- (3) to develop measles elimination and rubella/CRS control policy strategies using evidence-based data;
- (4) to mobilize political, societal and financial support to eliminate measles and control rubella/CRS in the South-East Asia Region by 2020;

3. REQUESTS the Regional Director:

- (1) to provide technical support to Member States in their efforts to develop elimination policy and strategies, while strengthening their immunization and surveillance systems and improving their programme performance;
- (2) to mobilize the required resources, build on existing partnerships and foster the development of new ones in support of measles elimination and rubella/CRS control efforts;
- (3) to report to the Regional Committee every two years on the status of global measles elimination and rubella/CRS control targets, milestones and progress of ongoing activities in countries towards achieving the goal by 2020 in the South-East Asia Region.

Sixth session, 13 September 2013