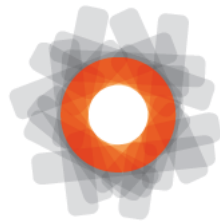


Maternal Immunizations: A Core Component of a Lifecycle Approach to Girl's and Women's Health

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Vaccinating women: triple return on investment

- Improves the health of girls and women
- Improves the health of newborns and infants
- Improves the health and wellbeing of children and families

Two approaches

- Maternal immunizations
- Immunization schedule for girls and women along the life cycle

Both involve integration of vaccines with other health care platforms

Maternal immunizations: Integrating vaccines with antenatal care

- Why ANC?
 - ANC is widely accepted and utilized
 - Tetanus immunization are included in WHO FANC guidelines and it is one of the interventions with the highest and most equal coverage
 - Still, in some countries coverage of tetanus immunization is still very low
 - No data on coverage of other vaccines for pregnant women, but probably very low

Challenges: Supply side

- Limited data on content of antenatal care available
- Studies provide evidence of low quality of ANC
- Weak health systems:
 - Logistic barriers
 - Insufficient and overburdened health workforce
 - Knowledge gaps and misinformation
 - Siloed budgets and program streams

Challenges: Demand side

- Population's misperceptions and lack of knowledge about the safety of vaccines and severity of diseases they prevent
- Cultural barriers
- Access barriers

Opportunities

- Momentum around quality of antenatal care and integration of maternal and newborn health care
- Closer maternal health and immunization communities
- Solid community health workers programs in some key countries
- Relevant lessons from other fields (e.g., HIV/AIDS and PMTCT)
- Programmatic and technological innovations

In sum

- Integrating MI and ANC: improve quality; increase immunization coverage; increase utilization of ANC at an earlier gestational age
- ANC platform better prepared for introduction of other vaccines in the pipeline
- Integrating MI with ANC would increase health systems' capability to address other diseases
- Mothers and babies health would improve, with spill over benefits for the rest of the family

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Immunization schedule for girls and women along the life cycle

- Girls: ensure access to full immunization schedule during infancy and childhood, especially in places with skewed sex ratio in vaccine coverage
- Adolescents: increase coverage of HPV vaccine and ensure protection against rubella, measles, tetanus, typhoid, and potentially malaria
- Pregnant women: tetanus and influenza vaccines, plus vaccines in the pipeline
- Older women: pneumonia, herpes zoster, influenza, etc.

Challenges

- Fragmented approaches to women's health along the life cycle
- Health system weaknesses: workforce, logistical problems, infrastructure
- Multiple delivery platforms would be needed, in settings where collaboration between sectors is limited
- Entrenched social and cultural factors
- No political will

Benefits of a life cycle approach

- It would benefit girls and women, and protect next generation
- It would normalize vaccines for girls and women and help overcome cultural barriers and misperceptions
- It would help overcome gender gaps
- It would create or strengthen multiple service delivery platforms
- It would provide coverage data disaggregated by sex
- It would empower and enable community health workers, most of whom are women

Lack of evidence: research is needed!

- Generate the evidence to:
 - Encourage national policy makers to create an enabling environment
 - Stimulate donors and development agencies to invest in this field
 - Change public opinion

Research priorities

- Developing new vaccines for girls and women, including MI
- Making full immunization schedules available for all girls and women:
 - Document barriers to access and utilization
 - Understand health systems' strengthening needs for introduction and integration of immunizations into multiple service delivery platforms
 - Design and implement interventions to address supply and demand issues and create an enabling policy environment
 - Evaluate effect of programs and policies on vaccination coverage, quality of care, reduction of equity gaps, and health outcomes



THANK YOU!

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