

Evidence to Action: A Review of the National Immunization Technical Advisory Groups

Position Statement

September 2023

Introduction

The health and well-being of older adults globally were significantly impacted by the SARS-CoV-2 pandemic, resulting in lingering social and economic consequences causing delays in routine immunization and a sustained burden on the health system and health care professionals.

National Immunization Technical Advisory Groups (NITAGs) are multidisciplinary country-level expert committees tasked with providing independent, evidence-based advice to policymakers and program managers on immunization and vaccine policy issues. The study of interactions and effects of vaccines (and vaccination programs) on the epidemiology of vaccine-preventable diseases are the basic tools for NITAGs to inform governments and the national immunization strategy.

By virtue of their roles and responsibilities, NITAGs inform national immunization strategies and plans, which are also central to the World Health Organization (WHO) Immunization Agenda 2030 (IA2030). Global agendas, including the IA2030 and the UN Decade of Healthy Ageing, outline strategic actions and guidance to help implement policies to promote health and well-being at all ages. ^(1,2) Despite these linkages and detailed

evidence of the impact of vaccine-preventable diseases during and after the COVID-19 pandemic, the rates of routine adult immunization remain suboptimal globally.

The study “*Evidence to Action: A Review of the National Immunization Technical Advisory Groups*” sought to improve understanding of the processes, rigour, transparency, accountability, and composition of experts in line with the life course approach to immunization. Comprehensive environmental scans of NITAGs in 34 countries were undertaken using an integrated framework comprising the WHO process indicators of NITAG functionality and the TAPIC (Transparency, Accountability, Participation, Integrity and Capacity) governance framework. ^(3,4)

As a pivotal component to a more comprehensive national immunization strategy, findings from this review of NITAGs are intended to stimulate dialogue on the intrinsic value of these expert bodies in public health immunization across the life course with attention to the understated value to older people, one of the most at-risk groups.

Calls to Action

Representatives from global NITAGs, the Global NITAG Network, WHO and civil society organizations (CSOs) engaged in an interactive dialogue on the report findings, which informed the following recommendations to strengthen the role of NITAGs in line with a life course approach to immunization.

Governments are called upon to:

1. Improve governance, and transparency in the nature of operational mechanisms, and processes in developing and grading evidence-based recommendations of NITAGs.

Almost three-quarters of NITAGs have a strong secretariat that supports meetings with necessary background documents, reports, and recommendations. Yet there were significant variations across NITAGs in terms of publically available information; for example, online availability of meeting minutes and meeting agendas was limited to 32% of countries.

2. Expand the expertise of core NITAG members to reflect the needs of a life course approach to include those at high risk of serious and life-threatening complications from vaccine-preventable diseases.

A life course approach to immunization was not reflected in the NITAG composition in more than 80% of the countries studied with an over representation of members in the pediatric field. Only three countries (France, El Salvador, Canada) had experts in adult vaccination, geriatrics or the population ageing among their members.

3. Include real-world evidence in the NITAG deliberations represented by civil society organizations across sectors and across disciplines.

About 50% of countries studied publicly reported that NITAG meetings included external experts such as consultants from the WHO, industry experts and specialists. Despite the important role of civil society during the COVID-19 pandemic no countries involved this sector regardless of their expertise in ageing and immunizations.

4. Invest in population-based age disaggregated data on coverage and surveillance essential to guide comprehensive and equitable vaccination schedules across the life course.

The independence and autonomy of NITAGs in assessing and reviewing data and deliberating on decisions are essential when informing governments on immunization policies. Information on the processes and mechanisms used to inform and grade recommendations for their respective Ministries of Health was also not readily available in 10 countries.

Conclusion

For more than a decade, the WHO has called on Member States to invest in health systems and its infrastructure to improve health outcomes and drive economic and social stability. The IA2030, UN Decade of Healthy Ageing and the WHO Global Report on Ageism independently and collectively represent generational defining agendas with the potential to improve the health of citizens across the life course ^(1,2,6).

A comprehensive review of NITAGs has revealed the critical role of NITAGs in priority setting and contributing to policies which prevent and control vaccine-preventable diseases. Current demographic trends indicate an urgent need for NITAGs to take purposeful actions to include experts in line with the life course approach to serve the needs of global ageing populations and support health ageing more broadly.

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