National Immunization Strategy (NIS)

What is NIS and why is it important?

A National Immunization Strategy defines the strategic direction that a country will take on immunization.

It specifies the country's immunization priorities and objectives, identifies the obstacles and organizes the sequence of interventions to get there, within a defined time-frame.

As part of the NIS, countries bring together national stakeholders, partners and donors to, first, develop the immunization strategies, and then, determine the amounts and sources of financing resources needed to reach the objectives identified. By integrating resource mobilization discussions into the NIS development process, a country can ensure that its immunization strategy is not only financially sustainable, but also politically endorsed.

A dedicated and separate *National Immunization Strategy* will help ensure that each of the strategies and interventions is building towards agreed objectives and optimizes use of scarce resources. A well-designed NIS is comprehensive and streamlined. It reduces the fragmentation in immunization planning and efforts – a problem that has led to challenges and inefficiencies in the past. It seamlessly integrates all components of immunization: from program management, human and financial resources, vaccine supply and cold chain, to delivery of vaccines, immunization data monitoring, disease surveillance, and demand generation and communication.

A country's National Immunization Strategy is developed considering Universal Health Coverage (UHC) and should be aligned with both its National Health Sector Strategy, the Immunization Agenda 2030 and Regional Framework. The NIS provides the foundation for supporting other Primary Health Care (PHC) services. A strong immunization strategy is a mean to strengthen the health system more generally.

Once finalized, the NIS will become an invaluable advocacy tool to hold stakeholders, partners and donors accountable for the commitments they made towards immunization in a country. It also helps prepare countries for internal or external alterations in financing and funding, such as decentralization, new financing opportunities, transition out of Gavi support, out of Global Polio Eradication Initiative or COVID-19 funds.

NIS at a glance

01 Vision priorities and objectives

Where do we want to be at the end of the NIS time-frame? What priorities and objectives should we set to achieve our vision?

02 Main barriers and their root causes

How and what needs to be achieved to overcome the barriers and effect change?

O3 Approach, interventions and resources needed

How do we get there? What are the interventions needed? Which interventions should be prioritised? What are the resources required?

When should a country develop a NIS?

When a government wants to plan strategically for immunization and improve efficiency

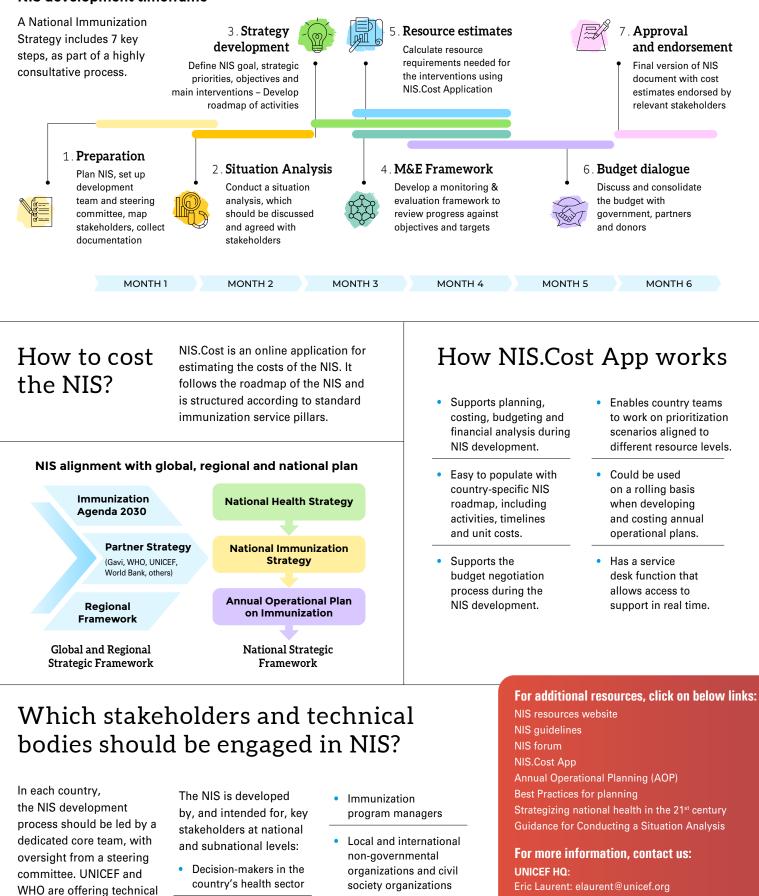
When there is a need to ensure financial sustainability for a country's immunization program – either as a sole proactive decision, or in response to changes in the funding and financing landscape

At the end of a period covered by the previous immunization strategic plan (e.g. cMYP)

At the time of any major change that requires a review and an update to priorities and available resources

With the need to align with the National Health Sector Strategy, IA 2030, and Regional Framework

NIS development timeframe



Eric Laurent: elaurent@unicef.org Ulla Griffiths: ugriffiths@unicef.org WHO HQ: Johanna Fihman: fihmanj@who.int WHO & UNICEF Regions: AFRO - ESARO - WCARO PAHO – AMRO – LACRO EMRO – MENARO EURO – ECARO

country's health sector

assistance to countries

to help create and refine

their NIS, and translate

them into roadmaps.

- Decision-makers in other • relevant Government sectors, like the Ministry of Finance
- Immunization partners at national, regional and global levels (e.g. WHO, UNICEF)
- society organizations
- Policy-making bodies, such as National Immunization Technical Advisory Committee
- Oversight committee, e.g. Interagency Coordination Committee, Health Sector **Coordination Committee**

SEARO – ROSA WPRO – EAPRO