

Immunization and Vaccination Policy Promotion Project

A Life Course Approach to Immunization and Vaccination Policy – Five Perspectives and Recommended Actions

Health and Global Policy Institute (HGPI)

Perspective 1 – Immunization and vaccination policies based on a life course approach should be advanced.

- 1. Eligibility requirements for routine vaccinations should be expanded to cover people with certain underlying medical conditions and risk factors so high-risk individuals can receive the benefits of vaccination.
- 2. Special measures should be taken that expand catch-up vaccinations among unvaccinated people or people who have lived abroad and that reduce the cost burden on people who receive catch-up vaccinations.
- 3. To improve access, more facilities should be allowed to provide vaccinations.
- 4. Steps to offset the cost burden of vaccinations should be considered. These may include establishing progressive out-of-pocket payment rates by income bracket, granting public health insurance coverage, or revising the medical service fee schedule.
- 5. Methods of managing individual vaccination records should be reviewed, individual vaccination records over the life course should be made viewable, and those records should be sharable among municipalities.

Perspective 2 – Dissemination, awareness-building, and communication strategies that target healthcare professionals and the public should be created.

- 1. Departments responsible for science and risk communication should be established, and efforts should be made to promote the dissemination of and awareness-building for immunizations and vaccinations by providing appropriate information at appropriate times.
- 2. Training systems should be introduced and best practices should be shared with the goal of improving awareness and literacy among healthcare professionals.

Perspective 3 – To achieve science-based policy decision making and evaluation, steps should be taken to promote the creation of a system that analyzes and shares the epidemiological effects of vaccinations by linking vaccination practices with information systems that track outbreaks of targeted diseases.

- The systems for gathering information and managing vaccination ledgers should be revised and a joint platform that
 is useful to healthcare professionals and municipalities, who are the parties responsible for entering registry
 information, should be built.
- 2. An information registration system for accurately recording individual vaccination histories and that makes effective use of medical IDs and other such tools should be built.
- 3. Steps should be taken to make information on adverse events viewable by revising the information utilization system for evaluating vaccinate effectiveness and safety.
- 4. A unified evaluation system for the collection and analysis of adverse event information should be built.

Perspective 4 – Steps should be taken to create a system that enables multi-stakeholders to hold continuous discussions on vaccine policy.

- 1. The public and specialist organizations should be invited to participate in efforts to foster social consensus.
- 2. Protective measures should be developed to guard against biased, alarmist disinformation or medical misinformation.

Perspective 5 – Investments should be accelerated in immunization policies that address both non-emergency and emergency situations and anticipate future vaccine demand.

- Special approval processes that reflect the significance of vaccination during public health crises must be established.
 A system that remains operational during non-emergencies must be built for distributing vaccines, selecting targeted groups for vaccination, and assigning vaccination priorities.
- 2. A domestic R&D and provision system for vaccines must be established.

Perspective 5 – Investments should be accelerated in immunization policies that address both non-emergency and emergency situations and anticipate future vaccine demand. All stakeholders involved in vaccine research and development, policy making, and implementation must understand and be able to respond to the various requirements that vaccines must meet in the policy decision-making cycle. In particular, the domestic vaccine industry has been late to respond to Coronavirus Disease 2019 (COVID-19). Although the Government is working as fast as possible to vaccinate the public against COVID-19, it is still difficult for people to return to life as normal. More experts should be involved in vaccine policy and a more efficient, cross-ministerial decision-making system should be established. In 2007, the MHLW formulated the Vaccine Industry Vision as a cross-departmental vision for the Economic Affairs Division and Research and Development Division of the Health Policy Bureau, the Tuberculosis and Infectious Diseases Control Division of the Health Service Bureau, and the Blood and Blood Products Division and the Pharmaceutical Evaluation Division of the Pharmaceutical and Food Safety Bureau. Based on that Vision, the Government should make preparations during non-emergencies to ensure vaccine research and development undertaken as a crisis management measure can proceed rapidly during emergencies. Anticipation is high for the Government to provide regular support for R&D for infectious disease control technologies and collaboration among industry, academia, and Government in those efforts; to demonstrate to companies that there is a biopharmaceutical market where they can utilize those technologies and reliably forecast the minimum necessary revenue; to incentivize companies to make the necessary investments in R&D and production; and to provide for the execution of investments in R&D that will also cover rapid clinical development during emergencies. Third-party evaluations of policies implemented in response to COVID-19 and discussions on the best methods of allocating resources, developing laws, and providing assistance to the private sector are also needed.

1. Special approval processes that reflect the significance of vaccination during public health crises must be established. A system that remains operational during non-emergencies must be built for distributing vaccines, selecting targeted groups for vaccination, and assigning vaccination priorities.

COVID-19 has led to widespread recognition of the significance of vaccines during pandemics. At the same time, it is extremely important to build systems to prepare for public health crises and that anticipate emergencies during normal times. To prepare for future pandemics, discussions should be held on vaccination policies for public health crises. The special approval of vaccines is governed by the Act on Securing Quality, Efficacy and Safety of Products Including Pharmaceuticals and Medical Devices, while vaccinations are governed by the Immunization Act and the Quarantine Act. These laws and their accompanying systems must be examined to ensure that effective responses can be made for future emerging infectious diseases.

2. A domestic R&D and provision system for vaccines must be established.

During the SARS-CoV-2 pandemic, Japan has not been able to develop or supply vaccines domestically. There is no guarantee that stable supplies of vaccines from other countries will be available during future pandemics. Discussions should be held on establishing an R&D and supply system with a long-term perspective, and such a system should be established as soon as possible. The supply chain during emergencies, the ideal structure of the vaccination provision system, and publicly-funded vaccinations should be sufficiently verified and revised from the perspective of health security.

