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PAHO launches 17th Vaccination Week in the Americas in Brazil

[Larissa Domingues](#), Lely Guzman and Luís Felipe Sardenberg, PAHO-Brazil

The Pan American Health Organization (PAHO) launched the 17th edition of Vaccination Week in the Americas on 22 April 2019. The initiative was celebrated by 45 countries and territories in the Region. This is the second time that Brazil has hosted the launch, as the regional 2011 inauguration took place in Manaus, on the border between Peru and Bolivia.



Photo exhibition in PAHO office in Brazil, showing the work of the different partners promoting vaccination in the country, during a meeting of municipal, state and federal health authorities. Credit: Erasmo Salomão/ ASCOM/MS.



Dr Carissa F. Etienne along with Dr Luiz Henrique Mandetta, Minister of Health of Brazil, participating in the Vaccination Week in the Americas launch. Credit: Erasmo Salomão/ ASCOM/MS.

PAHO Director Dr Carissa F. Etienne said that the resurgence of measles and diphtheria outbreaks, as well

as the occurrence of yellow fever, are challenges that must be faced in the Region. Brazil's Minister of Health, Dr Luiz Henrique Mandetta, called on all countries to cooperate and ensure that all populations are vaccinated.

Brazil has included an increase in vaccination coverage as one of its 35 Strategic Priorities and launched the inter-institutional campaign *Movimento Vacina Brasil*.

According to the PAHO/WHO Representative in Brazil, Dr Socorro Gross, PAHO has joined this mobilization and congratulates the government's efforts in reaffirming the value of vaccination and in promoting health for all.

Additionally, PAHO has organized and participated in a series of actions to promote vaccination throughout the year, including trainings, data analyses and communications, such as a photo exhibition involving different partners promoting vaccination in the country.

For more information, please visit this [website](#).



Photos from the photo gallery as shown on PAHO's Vaccination Week in the Americas [web site](#).

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Papua New Guinea: Over one million children to be vaccinated against measles-rubella and polio

Hayatee Hasan, WHO Headquarters

Herman Luk, a two-year old boy from Finschafen District of Morobe Province, was vaccinated against measles, rubella and polio in the most unconventional way. The new Prime Minister of Papua New Guinea Hon. James Marape personally administered the oral polio vaccine and hugged him afterwards at the vaccination post in Angau Hospital in Lae on 14 June 2019.

"If you think your child is important, then bring your child (under five years old) to be vaccinated", Prime Minister Marape highlighted in his message to the parents. "We must make Papua New Guinea polio-free again."

Herman is just one of the more than one million children under five years old in Papua New Guinea who are targeted in the ongoing nationwide free vaccination campaign against three dangerous diseases: measles, rubella and polio. The three-week campaign that started on 11 June 2019 is led by the National Department of Health, with support from WHO, UNICEF and other partners.

The integrated measles-rubella and polio campaign implemented in the country follows a series of polio vaccination campaigns in Papua New Guinea after a confirmation of a polio outbreak in June 2018. To date, the country has conducted seven rounds of polio campaigns since.

More than 3.3 million children under 15 years old have received multiple doses of the polio vaccine in the last 10 months.

[Read the news release](#)

Niger: The use of new technologies to monitor integrated administration of polio vaccine, vitamin A and deworming of children 0-5 years of age in June 2019

Blanche Anya, Oumarou Batoure, Ishagh El Khalef, Aichatou Gbaguidi, Moussa Haladou, Abdoul Hakim Mokhtar, Emmanuel Nomo and Harouna Tombokoye, WHO Country Office, Niger

WHO recommends that countries use every opportunity to deliver high-impact health interventions to children and vulnerable populations. Integrating these interventions can help strengthen basic routine services and the health system itself.

In this context, [Niger](#) conducted national immunization days from 13-16 June 2019, combined with vitamin A supplementation and deworming.



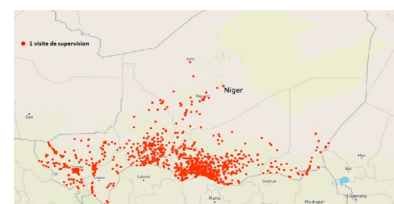
Team at work during the campaign. Credit: WHO/NIGER

Immunization Activity (SIA) with capacity building of regional and district teams. Independent monitoring and Lot Quality Assurance Sampling (LQAS) were conducted in 47 Health Districts out of 72 in the country. Thirty-nine of the 47 Health Districts sampled were certified.

A total of 6,099,883 children were vaccinated with bOPV, including 53,448 children who had never received a dose of polio, 48,078 displaced children and 52,694 refugees. A further 5,330,183 children received Vitamin A and 4,876,683 children received Albendazole.

Unlike the traditional monitoring approach that does not allow real-time feedback to improve the implementation of the ongoing activity, the ODK tool was found to be user-friendly and helpful in obtaining real-time results on the 2,775 proximity supervision visits, timely availability of funds, existence of micro plans and local recruitment of teams.

For more information, click on this [link](#).



Areas visited during the campaign. Credit: WHO/NIGER

Upcoming Meeting

Immunization Economics iHEA pre-congress session

[Christian Suharlim](#), on behalf of the Immunization Economics iHEA Special Interest Group

Please note that registration for this meeting is still open.

To learn more visit this [web site](#).



Past Meetings/Workshops

First consultation of the South-East Asia Regional Expert Panel for Verification of Hepatitis B Control (SEA REP)

Dr Sigrun Roesel, WHO SEARO

Location: New Delhi, India

Date: 28-29 May 2019

Participants: Members of the South-East Asia Regional Expert Panel (SEA REP) and a WHO Secretariat composed of staff from the Immunization and Vaccine Development (IVD), Child and Adolescent Health (CAH), Maternal and Reproductive Health (MRH) and Communicable Diseases (CDS) teams.

Purpose:

- To provide current status/overview of global and regional situation of hepatitis B control;
- To discuss and finalize the draft 'Guidelines for verification of achievement of hepatitis B control target through immunization in the WHO South-East Asia Region'; and
- To finalize a verification workplan and timeline for verifying the status of the hepatitis B control target in the WHO South-East Asia Region.

Details: The SEA REP has been established to verify countries achieving the Regional goal for the control of hepatitis B through immunization, established by the South-East Asia Regional Immunization Technical Advisory Group (ITAG) in its meeting in 2016. The ITAG set a target of $\leq 1\%$ Hepatitis B surface antigen (HBsAg) seroprevalence among children aged five years, by 2020; in alignment with the Global Health Sector Strategy on Viral Hepatitis.

The consultation reviewed the current status of the global and regional situation of hepatitis B control, finalized the 'Guidelines for verification of achievement of hepatitis B control target through immunization in the WHO South-East Asia Region' and prepared a workplan and timeline for verification. Experts in the panel are health specialists from Bangladesh, India, Indonesia, Myanmar, Nepal, Thailand, an academic institution in Australia and the US Centers for Disease Control and Prevention.

The main evidence needed for verification includes the prevalence of chronic hepatitis B among vaccinated cohorts and sustained high immunization coverage. If other sources of data are available, they may be included as supplemental information to help the SEA REP decide on verification.



Group photo from the SEAR expert panel for verification of HepB control. Credit: WHO SEARO

WHO Immunization Information System (WIISE) Focal Points Meeting

Sebastien Antoni, Laure Dumolard and Marta Gacic-Dobo, WHO Headquarters

Location: Munich, Germany

Date: 28-30 May 2019

Participants: WIISE Focal Points from HQ, AFRO, AMRO, EMRO, EURO and WPRO. Partner Organizations: BMGF, GAVI, US CDC



WHO Immunization Information System (WIISE)
Technical Focal Points Meeting, Munich, Germany, 28-30 May 2019



Group photo from the WISE focal points meeting

Purpose: Update Focal Points and Partner Organizations on the development of the WIISE platform.

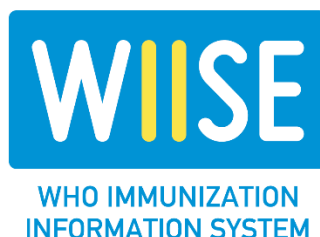
Details: The WIISE project aims to develop a package of applications to collect, manage, analyze and disseminate immunization and vaccine-preventable diseases surveillance data gathered by WHO worldwide. The project is a joint effort between WHO Regional Offices and WHO Headquarters.

The project team updated participants on the status of the development of the WIISE applications. A first release of xMART, the corporate data warehouse to be used in WIISE, is expected during the summer.

A brand-new immunization data portal will be developed and released by the end of the year. It will serve as a one stop shop for all immunization stakeholders to access immunization data collected by WHO.

An online tool to collect data annually during the Joint Reporting Form (JRF) process will also be developed and pilot tested by several countries during next year's JRF exercise.

The meeting participants reiterated their commitment to the project and confirmed their overall satisfaction with the progress so far.



Documenting Grenada's experience implementing an Electronic Immunization Registry

Isabella Chan, Marcela Contreras, Robin Mowson and Martha Velandia, Pan American Health Organization (PAHO)

Location: St George's, Grenada

Date: 11-14 June 2019

Participants: Qualitative researchers and technical officers from PAHO and members of the Ministry of Health (MOH) Grenada.

Purpose: 1) Document Grenada's experience implementing a national electronic immunization registry (EIR) to identify challenges, innovative solutions, and lessons learned;
2) Record strategies to improve vaccination data quality;
3) Understand how the country context impacts EIR implementation and sustainability.

Details: Grenada's MOH began EIR implementation in 2015 with the aim of improving vaccination data quality and use. This visit applied a case study approach to retrospectively document Grenada's experience with EIR implementation and usage to date. The methodology involved semi-structured interviews and focus group interviews with key actors in the EIR implementation process, programme supervisors, end users, and non-users. The team conducted seven semi-structured interviews, three focus groups and three health facility site visits, which included direct observations of the EIR system and five unstructured interviews with key personnel.

The team was able to share these preliminary thematic findings with the MOH:

1. There is great support for the EIR system among EPI staff, including strong acceptability and commitment to using it, cultivated throughout the process through the dedication and reliability of the information technology (IT) team.
2. Hands-on trainings were widely regarded as helpful although there were recommendations to tailor training to the different levels of computer literacy of the staff and provide on-going training opportunities to strengthen such skills.
3. Notable progress has been made in addressing the recommendations from the 2018 PAHO/CDC Data Quality Self-assessment (DQS) Plus, including convening an EIR technical working group, reducing the burden of paper and electronic reporting, and addressing infrastructure-related growing pains by providing more clinics with computers and expanding internet connectivity.
4. While transitioning to the EIR continues, on-going data verification between systems is encouraged to strengthen data quality. However, it is acknowledged that this situation is temporarily increasing workload and decreasing data confidence.
5. Recommendations to be shared with other countries include: incentivizing integration of private providers into the system; convening an EIR Steering Committee early on to meet regularly and share responsibilities with the EPI manager; having nationwide unique identifiers to facilitate patient identification; and sustainable allocation of funds and support from the MOH throughout the process.

Next steps include dual-coding, thematic analysis, and elaboration of a final report to be shared with the country for feedback as well as the development of a manuscript on the implementation of EIR for dissemination to other Member States.

PAHO is grateful to Grenada for providing the opportunity to follow their EIR journey from inception to full implementation and will continue providing technical support, as requested. The country's achievements and experiential knowledge deserves to be shared to provide lessons learned and potential paths that other Member States can follow.

Resources

A Decade of Sustainable Immunization Financing: A New Report from the Sabin Vaccine Institute

Anupama Varma, The Sabin Vaccine Institute

Many low- and middle-income countries that currently receive financial support for their immunization programmes will no longer be eligible by 2020 due to their growing economies and must therefore transition away from external financing and toward country ownership. Two challenges arise as a result of this economic growth: making informed decisions regarding vaccine introduction and establishing reliable immunization financing from their own national budget. From 2008 to 2018, the Sabin Vaccine Institute's Sustainable Immunization Financing (SIF) Programme worked closely with national leaders in 23 low - and middle-income countries in Africa, Asia and Eastern Europe to help them prepare for this transition. Through the SIF Programme, Sabin helped countries establish and secure national immunization budgets and find domestic funding solutions that would ensure reliable financing for immunization for decades to come.



At the Second International Colloquium on Sustainable Immunization Financing in 2013 in Dakar, Senegal, representatives from participating countries present a poster detailing their new or planned sustainable immunization financing practices.

Sabin's new report, *A Decade of Sustainable Immunization Financing*, catalogues the methods, accomplishments and lessons learned over the course of the SIF Programme to inform other countries embarking on the important road to country ownership of their immunization programmes.

Read more on the [Sabin website](#).

Rotavirus Disease and Immunization

[Rose Weeks](#), International Vaccine Access Center

The ROTA Council, launched in 2011, includes 23 independent technical leaders from over 15 countries. Chaired by Dr Mathu Santosham and hosted by the International Vaccine Access Center, the Council accelerates the introduction of rotavirus vaccines through the use of evidence and strategic communications targeting policymakers and other key decisions makers.

Rotavirus Disease and Immunization



Credit: Monica Tiwari, 2018.

The ROTA Council is pleased to launch [Rotavirus Disease and Immunization](#), a seven-brief series covering the global status of vaccine introduction and the latest evidence on disease burden and vaccine impact. This comprehensive series is tailored to support immunization policy, focusing on key topics most critical for decision-making on introducing vaccines and ensuring maximum impact.

Six rotavirus-focused briefs cover epidemiology and disease burden, available vaccine products, the impact of vaccination, economic costs of rotavirus disease and the value of vaccines, vaccine safety, and introduction and coverage status. The Council's series also includes a supplemental brief on the broad impact of early childhood diarrhoea. Explore the briefs [here](#).

Vaccine procurement in the Middle East and North Africa region: Challenges and ways of improving programme efficiency and fiscal space

[Nahad Sadr-Azozi](#), UNICEF Regional Office for the Middle East and North Africa (MENARO)

Improving vaccine procurement performance has been a priority concern of national health authorities in the Middle East and North Africa (MENA) region for years, particularly in terms of its role in accessing new vaccines and assuring a steady supply of quality vaccines at affordable prices. [This article](#) reviews the vaccine procurement mechanisms in the MENA region; analyzes the factors and drivers affecting demand for, and supply of, vaccines; discusses the main challenges; and suggests measures which can increase efficiency gains and generate the budgetary room to introduce life-saving vaccines.

Based on in-depth analysis of available data and interviews with key informants at the regional and country level, this paper explains why most of the current strategies do not sufficiently recognize the specific characteristics of vaccine markets and best practices in procurement given these markets. The paper suggests potential efficiency gains for governments and global partners from pooling demand and moving from transaction-based purchasing to strategic purchasing in order to strengthen immunization services and introduce more life-saving vaccines.

WHO advice for international travel in relation to measles

Hayatee, Hasan, WHO Headquarters

Measles is one of the world's most contagious diseases, with the potential to be extremely severe. In 2017, the most recent year for which estimates are available, measles caused approximately 110 000 deaths.

Even in high-income countries, complications result in hospitalization in up to a quarter of cases, and can lead to lifelong disability, from brain damage and blindness to hearing loss.

The best protection against the disease is through receiving two doses of the measles vaccine, which is often incorporated with mumps and/or rubella vaccines.

Over recent months, spikes in case numbers have occurred including in countries with high overall vaccination coverage as the disease has spread fast among clusters of unvaccinated people.

Unvaccinated young children are at highest risk of measles and its complications. Any non-immune person (i.e. who has not been vaccinated with two doses of measles containing vaccine) can become infected.

[Read](#) the WHO travel-related recommendations to prevent the international spread of measles.

For more information on international travel and health, visit this [website](#).



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2019

July

7-9	EMRO Regional Working Group meeting	TBD
8-12	SEARO Technical Advisory Group meeting	TBD
9-11	25th Meeting of PAHO's Technical Advisory Group (TAG) on Vaccine-preventable Diseases	Colombia
30-1 Aug	12th African Rotavirus Symposium	Johannesburg, South Africa

September

11-12	M&RI Partner Meeting	Washington DC, USA
13-15	Asian Vaccine Conference (ASVAC)	Yangon, Myanmar
17-29	12th meeting of the South-East Asia Regional Certification Commission for Polio Eradication	Dhaka, Bangladesh
24-26	EPI Managers' meeting for West African countries	Cotonou, Benin

October

8-10	Strategic Advisory Group of Experts (SAGE) on Immunization	Geneva, Switzerland
21-23	20th DCVMN Annual General Meeting	Rio de Janeiro, Brasil

November

26-28	Africa Regional Immunization Technical Advisory Group (RITAG) meeting	Brazzaville, Republic of the Congo
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December

4-5	Global Advisory Committee on Vaccine Safety	Geneva, Switzerland
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2020

February

24-25	Global NITAG Network Meeting	Atlanta, USA
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June

3-4	Global Advisory Committee on Vaccine Safety	Geneva, Switzerland
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Organizations and Initiatives

American Red Cross

[Child Survival](#)

Centers for Disease Control and Prevention

[Polio](#)

[Global Vaccines and Immunization](#)

Johns Hopkins

[International Vaccine Access Center](#)

[Value of Immunization Compendium of Evidence \(VoICE\)](#)

[VIEW-hub](#)

JSI

[IMMUNIZATIONbasics](#)

[Immunization Center](#)

[Maternal and Child Health Integrated Program \(MCHIP\)](#)

[Publications and Resources](#)

[Universal Immunization through Improving Family Health Services \(UI-FHS\) Project in Ethiopia](#)

PAHO

[ProVac Initiative](#)

PATH

[Better Immunization Data \(BID\) Initiative](#)

[Center for Vaccine Innovation and Access](#)

[Defeat Diarrheal Disease Initiative](#)

[Vaccine Resource Library](#)

[Malaria Vaccine Initiative](#)

[RHO Cervical Cancer](#)

Sabin Vaccine Institute

[Sustainable Immunization Financing](#)

UNICEF

[Immunization](#)

[Supplies and Logistics](#)

USAID

[USAID Immunization](#)

[USAID Maternal and Child Survival Program](#)

WHO

[Department of Immunization, Vaccines & Biologicals](#)

[ICO Information Centre on HPV and Cancer](#)

[National programmes and systems](#)

[Immunization planning and financing](#)

[Immunization monitoring and surveillance](#)

[National Immunization Technical Advisory Groups Resource Center](#)

[SIGN Alliance](#)

Other

[Coalition Against Typhoid](#)

[Confederation of Meningitis Organizations](#)

[Dengue Vaccine Initiative](#)

[European Vaccine Initiative](#)

[Gardasil Access Program](#)

[Gavi the Vaccine Alliance](#)

[Immunization Economics resource](#)

[International Association of Public Health Logisticians](#)

[International Vaccine Institute](#)

[Measles & Rubella Initiative](#)

[Multinational Influenza Seasonal Mortality Study](#)

[Network for Education and Support in Immunisation \(NESI\)](#)

[Stop Pneumonia](#)

[TechNet-21](#)

[Vaccine Safety Net](#)

[Vaccines Today](#)

WHO Regional Websites

[Routine Immunization and New Vaccines \(AFRO\)](#)

[Immunization \(PAHO\)](#)

[Vaccine-preventable diseases and immunization \(EMRO\)](#)

[Vaccines and immunization \(EURO\)](#)

[Immunization \(SEARO\)](#)

[Immunization \(WPRO\)](#)

UNICEF Regional Websites

[Immunization \(Central and Eastern Europe\)](#)

[Immunization \(Eastern and Southern Africa\)](#)

[Immunization \(South Asia\)](#)

[Immunization \(West and Central Africa\)](#)

[Child survival \(Middle East and Northern Africa\)](#)

[Health and nutrition \(East Asia and Pacific\)](#)

[Health and nutrition \(Americas\)](#)

Newsletters

[Immunization Monthly update in the African Region \(AFRO\)](#)

[Immunization Newsletter \(PAHO\)](#)

[The Civil Society Dose \(GAVI CSO Constituency\)](#)

[TechNet Digest](#)

[RotaFlash \(PATH\)](#)

[Vaccine Delivery Research Digest \(Uni of Washington\)](#)

[Gavi Programme Bulletin \(Gavi\)](#)

[Immunization Economics Community of Practice](#)