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## News

### World Health Assembly delegates agree on a new five-year strategic plan

Hayatee Hasan, WHO Headquarters



- 2 The World Health Assembly delegates agreed an ambitious new strategic plan for the next five years. The Organization's 13th General Programme of Work (GPW) is designed to help the world achieve the Sustainable Development Goals – with a particular focus on SDG3: ensuring healthy lives and promoting wellbeing for all at all ages by 2030.

- 3 It sets three targets: to ensure that by 2023, 1 billion more people benefit from universal health coverage; 1 billion more people are better protected from health emergencies; and 1 billion more people enjoy better health and wellbeing. WHO estimates that achieving this “triple billion” target could save 29 million lives.

- 4 Speaking to the Health Assembly, Director-General, Dr Tedros Adhanom Ghebreyesus told delegates that the new strategic plan was ambitious because “it must be”.

- 5 Delegates noted that the Organization will need to make a number of strategic shifts in order to achieve these targets, notably to step up its public health leadership; focus on impact in countries; and ensure that people can access authoritative and strategic information on matters that affect people's health.

[Read the news release](#)

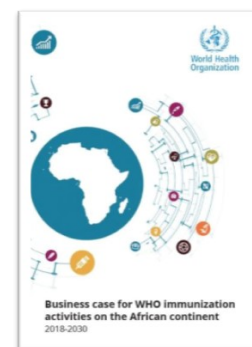
- 7 [More on the 13<sup>th</sup> Global Programme of Work](#)

### Official launch of the business case for WHO immunization activities on the African continent

- 8 As the Global Polio Eradication Initiative ramps-down and closes on the African continent and countries continue to transition from Gavi, the Vaccine Alliance support, there is a need for WHO to transform its way of working to support countries to attain global immunization goals and the Sustainable Development Goal (SDG) 3.

- 9 A technical briefing was held on Wednesday 23 May 2018 to illustrate WHO's future plans for immunization while responding to the evolving needs of tomorrow including the:

- 2030 ambition to save 1.9 million lives and avert 167 million vaccine-preventable diseases (VPD) cases.
- Paradigm change and new approach for immunization as a core component of Universal Health Coverage (UHC) & health-SDGs.
- Country categorization for the African continent.
- WHO immunization maturity grid.
- WHO new value proposition and country-tailored approach.
- WHO transformation of the immunization programme.



- 17-18 "The immunization business case in Africa is a powerful step in the right direction" said Dr Tedros Adhanom Ghebreyesus, WHO Director-General.

- 19 [More on the immunization business case](#)

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## WHO@70: Working for better health for everyone, everywhere

For seven decades, the World Health Organization has been working with partners to improve global public health. This video presents key statistics highlighting the huge progress that has been made and the challenges that lie ahead to keep the world safe, improve health and serve the vulnerable. [Watch the WHO@70 video](#)  
A brochure commemorating WHO's 70<sup>th</sup> anniversary have also been developed in the various languages. [Arabic](#) [Chinese](#) [English](#) [French](#) [Spanish](#) [Russian](#)

## Delegates discuss progress and challenges towards global immunization goals

Twenty-four speakers, including 19 delegates from Member States, two civil society organizations, Gavi, the Vaccine Alliance and the WHO secretariat took the floor during the discussion on the Global Vaccine Action Plan (GVAP).

Delegates welcomed the GVAP assessment report on progress towards the achievement of global immunization goals and commended the WHO Strategic Advisory Group of Experts (SAGE) on immunization for their recommendations.

While delegates noted the slow pace of progress towards the ambitious GVAP targets by 2020, they also widely acknowledged the immense health benefits vaccination programmes provide to the well-being of people everywhere and the necessity to preserve and strengthen the gains made to-date.

A frequent concern raised by Member States is the increasing number of vaccine-preventable diseases (VPDs) outbreaks, which demonstrate the existence of vaccination coverage gaps, often in the most fragile or mobile populations that do not have access to vaccination services.

[Read the full story](#)

## Using vaccines in the fight against Ebola virus disease

Hayatee Hasan, WHO Headquarters



More than 7,500 doses of the rVSV-ZEBOV Ebola vaccine have been deployed to DRC to conduct vaccination in the north-western Equator Province.

The vaccination follows the recommendation made by the Strategic Advisor Group of Experts (SAGE) at their meeting in April 2017 where SAGE recommends that the Ebola vaccine rVSV-ZEBOV – which is not yet licensed – be used under an expanded access/compassionate use protocol during Ebola outbreaks linked to the Zaire strains such as the on-going in DRC.

The SAGE working group on Ebola is closely following the developments in DRC and is reviewing the needs for any adjustments in the vaccination strategy. In addition, a SAGE working group meeting has been scheduled for June 2018 where the experts will discuss ways to gather more data on the safety and effectiveness of rVSV-ZEBOV, in accordance with the protocols for compassionate use of the vaccine.

[Read the full story](#)  
[SAGE April 2017 meeting report – conclusions and recommendations](#)

[News release](#): WHO supports Ebola vaccination of high risk populations in the Democratic Republic of the Congo  
[Frequently asked questions on Ebola virus disease vaccine](#)

## WHO Director-General calls for all countries to act to end suffering caused by cervical cancer

Hayatee Hasan, WHO Headquarters

Cervical cancer is one of the most preventable and treatable forms of cancer as long as it is prevented with HPV vaccination, detected early, and managed effectively. However, cervical cancer remains one of the gravest threats to women's lives, and worldwide, one woman dies of cervical cancer every two minutes. This suffering is unacceptable, and cannot continue.

In recognition of this, WHO Director-General, Dr Tedros Adhanom Ghebreyesus made a global call for action towards the elimination of cervical cancer.

[Read the call to action](#)

[WHO's work on cervical cancer](#)



## Largest cholera vaccine drive in history to target spike in outbreaks

Hayatee Hasan, WHO Headquarters

A spate of cholera outbreaks across Africa has prompted the largest cholera vaccination drive in history, with more than two million people across the continent set to receive oral cholera vaccine (OCV).

The vaccines, funded by Gavi, the Vaccine Alliance, were sourced from the global stockpile and are being used to carry out five major campaigns in Malawi, Nigeria, South Sudan, Uganda and Zambia. The campaigns, which will be completed by mid-June 2018, are being implemented by the respective Ministries of Health supported by the World Health Organization (WHO) and partners of the Global Task Force on Cholera Control (GTFCC), and mostly in reaction to recent cholera outbreaks.

In the 15 years between 1997 and 2012 just 1.5 million doses of cholera vaccines were used worldwide. In 2017 alone almost 11 million were used, from Sierra Leone to Somalia to Bangladesh. In the first four months of 2018 over 15 million doses have already been approved for use worldwide.

"Oral cholera vaccines are a key weapon in our fight against cholera," said Dr Tedros Adhanom Ghebreyesus, WHO Director-General. "But there are many other things we need to do to keep people safe. WHO and our partners are saving lives every day by improving access to clean water and sanitation, establishing treatment centres, delivering supplies, distributing public health guidance, training health workers, and working with communities on prevention."

[Read the news release](#)



## European Immunization Week utilized to help sustain the positive impact of vaccines

[Catharina de Kat](#), WHO Europe

In the light of stalling or even declining immunization coverage rates, and measles circulating in large parts of the European Region, the European Immunization Week (EIW) 2018 was utilized as an important platform to strengthen partnerships for action and raise awareness of the value and benefits of vaccination. This year's campaign (23-29 April 2018) focused on vaccination as an individual right and shared responsibility. Participating partners, governments and countless organizations and individuals used social media channels, workshops, group activities and media campaigns to promote the key message that vaccinating every eligible person is vital to sustain progress in the fight against vaccine-preventable diseases.

Dr Zsuzsanna Jakab, WHO Regional Director for Europe, was joined in supporting the initiative by HRH Crown Princess Mary of Denmark, Patron of WHO/Europe, who stressed the need for collective action: "Every one



of us plays a role in achieving a healthier future for all. By ensuring ourselves and our children are vaccinated we prevent the spread of dangerous infections".

The strength of EIW lies in simultaneous action and discussion across countries, cultures and stakeholders. Activities organized in countries across the Region by health authorities, professional associations, civil society groups, media, students as well as WHO, UNICEF and other international partners were as diverse as the countries themselves, targeting audiences on city squares to parliaments and from primary schools to universities. Campaign material was translated into numerous local languages to engage proactive dialogue at the national and sub-national level.

WHO and UNICEF also partnered up to create a photo exhibit illustrating successful collaboration efforts of vaccination campaigns in five countries across the globe to leave no one behind. This exhibit, located in UN City, Copenhagen, Denmark, and posted on the [WHO/Europe website](#), follows a long tradition of fostering strong inter-agency partnerships with other important stakeholders to make a difference - together.



Public EIW event to raise awareness in the former Yugoslav Republic of Macedonia. From left: Minister of Health Dr Venko Filipche; Dr Jihane Tawilah, WHO Representative in the former Yugoslav Republic of Macedonia; Minister of Labour and Social Policy Ms Mila Carovska (with her son), Professor Aleksandra Gzozdanova, President of the National Committee on Immunization.

## Vaccination Week in the Americas 2018 launches in Cuba

FPL, PAHO-Washington, DC; CMU, Washington, DC

Vaccination Week in the Americas (VWA) was launched on 23 April 2018 in Havana, Cuba – a first-time launch location for the 16-year-old campaign. This year's slogan was "Strengthen Your Defense! #GetVax #VaccinesWork" and had a football theme as the FIFA World Cup will be celebrated soon after.

"Vaccination is one of the most powerful tools we have to prevent disease and save lives," said Carissa F. Etienne, Director of PAHO, at the opening ceremony, which took place at the Victoria de Giron Institute of Basic and Preclinical Sciences. Ministers and other high-level health authorities from Latin America, the Caribbean, and other regions of the world participated in the launch.



VWA 2018 launch in Havana, Cuba. Credit: PAHO/WHO.



VWA 2018 launch in Havana, Cuba. Credit: PAHO/WHO.

Minister, Jose Angel Portal Miranda, emphasized that in Cuba "vaccination is available to everyone, free of charge, and can be accessed from primary health care providers. As a result, vaccination coverage in Cuba for all vaccines currently stands at 98%, resulting in high population immunity."

Portal Miranda also highlighted that an average of 4.8 million vaccines against 13 diseases are administered each year in Cuba, with eight of the 11 vaccines that are given being produced in the country itself. He

also reminded the audience that the first polio prevention campaign in Cuba

took place in 1962 with the vaccination of 2.6 million children and adolescents under the age of 15. Thanks to this and other initiatives, the country was the first in the Region to eliminate polio.



VWA 2018 launch in Havana, Cuba. Credit: PAHO/WHO.



VWA 2018 launch in Havana, Cuba. Credit: PAHO/WHO.



## Country activities for Vaccination Week in the Americas 2018

Elizabeth Thrush, Maite Vera Antelo, Lauren Vulanovic, Alba Maria Roper, Octavia Silva, PAHO-Washington, DC

Countries conducted a wide range of activities throughout this year's Vaccination Week in the Americas (VWA), from communication and social mobilization to community sensitization, health care worker training, and the vaccination of more than 70 million individuals, through a multitude of national vaccination efforts.

### Sustaining Measles Elimination

- Measles was declared as eliminated from the Americas in 2016 after the declaration of the elimination of rubella and congenital rubella syndrome (CRS) in 2015, culminating a 22-year mass vaccination effort against measles, mumps and rubella.



VWA is celebrated in Costa Rica. Credit: PAHO/WHO.

- Due to the risk of importation of measles and current outbreaks happening in our Region, more than 11 countries took VWA 2018 as an opportunity to intensify vaccination efforts against measles, with a goal of reaching approximately 6,000,000 people.

### Sustaining Polio Elimination

- At least 14 countries vaccinated against polio as part of VWA 2018 activities: Brazil, British Virgin Islands, Colombia, Cuba, Grenada, Guatemala, Guyana, Honduras, Jamaica, Nicaragua, Paraguay, St. Lucia, St. Maarten, and Turks and Caicos.
- Cuba conducted their 57th annual mass polio vaccination campaign to sustain polio elimination; this campaign reached more than 480,000 children.

### Efforts to Complete Basic Vaccination Schedules

- At least 22 countries and territories used VWA 2018 to intensify activities of the routine national immunization programmes and administer multiple vaccines to improve coverage by starting, updating or completing childhood vaccination schedules.



Guyana celebrates VWA. Credit: PAHO/WHO.

### Protecting Vulnerable Populations

- Every year, VWA is an opportunity to reach underserved populations. This year, 16 countries reached out to populations in situations of vulnerability, including pregnant and postpartum women, health workers, older adults, indigenous populations, individuals with chronic disease, and prisoners and prison workers, among other occupational risk groups and vulnerable populations.
- Several countries focused efforts to protect occupational health workers against a range of diseases such as Hepatitis B, tetanus, and influenza.
- As part of Brazil's Month of Vaccination of Indigenous Peoples, a combined effort of the National Immunization Programme and the Department of Indigenous Health was done to update the vaccination schedules of approximately 600,000 individuals in 1,373 indigenous communities, in addition to administering the annual dose of the influenza vaccine.

### Communication Activities

- 27 countries carried out activities to improve public awareness regarding the importance of immunization for good health. Examples of these include health fairs, sensitization sessions, and other public awareness activities.

### Integrated Health Activities

- The use of VWA for the integration of other public health activities together with vaccination has become systematized throughout much of the Region.
- 16 countries (Antigua and Barbuda, Barbados, Belize, Brazil, Colombia, Dominican Republic, Grenada, Guatemala, Guyana, Honduras, Jamaica, Nicaragua, Panama, Paraguay, St. Lucia, and Trinidad and Tobago) integrated other health interventions during VWA 2018.
- Examples include: Vitamin A distribution; deworming; prevention of mosquito borne diseases such as yellow fever, dengue, Zika, and chikungunya; health screenings for diabetes; vaccination of pets; promotion of healthy eating habits; domestic violence awareness; mental health screenings; and cancer awareness.



Vaccinators in Honduras heading to vaccinate populations in Moskitia and Garifuna for VWA. Credit: PAHO/WHO.



Chile celebrates VWA. Credit: PAHO/WHO.

## Regional communication campaign for Vaccination Week in the Americas 2018

FPL, PAHO-Washington, DC; CMU, PAHO-Washington, DC

This April marked the 16th anniversary of Vaccination Week in the Americas (VWA), and the sixth World Immunization Week (WIW). Inspired by 2018's FIFA World Cup in Russia, the regional slogan for this year's campaign was "Strengthen your defense! #GetVax #VaccinesWork." This slogan used the strengthening of a soccer team's defense as a metaphor for strengthening one's defense against diseases preventable through vaccination.

The [VWA web site](#) was revamped for the 2018 campaign and featured general campaign materials, as well as those geared at measles and rubella vaccination and surveillance activities.

To engage with staff in PAHO HQ and country offices, staff had the option to participate in a quiz each day. Everyone who correctly answered the question was entered to win a PAHO soccer ball. In the end, balls were won by one person in the PAHO office in Guyana, two people in the PAHO office in Honduras, and two people from HQ in Washington, DC.

On Twitter, we reached 458k people, 793 quizzes were submitted, Facebook posts reached 306k people, Instagram posts reached approximately 21k and LinkedIn posts reached approximately 15k people.

### Social Media Results

A social media package, featuring infographics, videos and images, was sent out to PAHO country offices. From the regional account alone:

More than 800,000 people reached through social media;

5,320 people visited the website for a total of 13,374 visits (some of the visits were repeat visitors);

Uruguayan football star Edinson Cavani shared our messages on his own Facebook, Twitter and Instagram accounts, receiving 250,000 likes; his video has received 545,000 views.

In terms of press, VWA was mentioned in over 200 articles in more than 28 countries in the Region and the world. Many articles focused on the importance of measles and rubella vaccination.

## Uruguayan footballer Edinson Cavani joins campaign for Vaccination Week in the Americas 2018

FPL, PAHO-Washington, DC; CMU, PAHO-Washington, DC

Uruguayan football star Edinson Cavani joined the Vaccination Week in the Americas 2018 campaign. The striker for the Uruguayan national team and League 1 club Paris Saint-Germain appears in a public service announcement (PSA) encouraging children, parents and the whole family to "make the best goal of their lives" and get vaccinated. Cavani shared our messages on his own Facebook, Twitter and Instagram accounts, receiving 250,000 likes; his video has received 545,000 views. You can see the PSA (in English, Spanish, French or Portuguese) at this [link](#).



Poster for Vaccination Week in the Americas 2018.



Screenshot of VWA 2018 PSA with Edinson Cavani.

## Vaccination: three women in Nicaragua take a different journey towards a common goal

Sonia Mey, Harold Ruiz, PAHO-Washington, DC

Karla Bethania Ortiz, 26, from Comarca Bosque de Xiloá, Nicaragua, never understood why she was not vaccinated as a child. Unlike her friends, she did not have a vaccination card.

One day when a “brigadista” or community health volunteer was walking near her home, she decided to chase her down and asked to be vaccinated. It happened to be “Jornada de Vacunación” – the day vaccines are provided to all in the community free of charge.

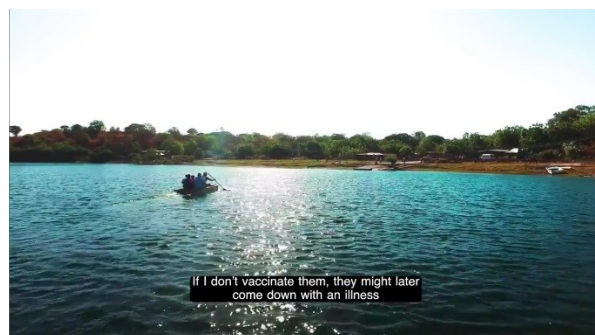
However, because Karla was a minor, she needed parental consent. Karla knew her mother, Silvia Elena Ortiz, did not believe in vaccines, but she decided to bring the health worker to her home to explain the benefits of vaccination. With more information, Silvia agreed to have Karla vaccinated. “I was very proud to receive my first vaccine and my vaccination card,” Karla says.

Now, with three children of her own, Karla never misses a “Jornada de Vacunación del Poder Ciudadano” organized by the Ministry of Health of Nicaragua and supported every year by WHO/PAHO, to vaccinate the community in hard-to-reach areas.

Today, Karla will take her two-month-old daughter, Franeichy, to receive her WHO-recommended vaccines at the Xiloá Health Centre. It’s six a.m. and Karla wakes up to prepare breakfast, bathe her children, and dress them for the special occasion. Karla and her entire family leaves the house at 8:30 a.m. and walk to Lagoon Xiloá, where a boat picks them up for a 10-minute ride to Xiloá.



Still of “An act of love in the land of lakes and volcanoes, Nicaragua.”



Still of “An act of love in the land of lakes and volcanoes, Nicaragua.”

Hours before Karla’s family wakes up, nurse Maritza Elena Pallavicini Cruz, 51, is at home preparing for the “Jornada de Vacunación” in Los Brasiles, Nicaragua—an hour’s journey from the health centre in Xiloá. After knowing two children who were paralyzed from polio when she was a child, Maritza decided she wanted to be a nurse. That was more than 30 years ago. “My wish is that no child in my country dies from disease that can be prevented through immunization,” she says.

This article was excerpted from a longer article on the PAHO site. Please click [here for the complete article](#) and [here](#) for “An act of love in the land of lakes and volcanoes, Nicaragua,” a video illustrating the story described above.



## The Night of Vaccines is celebrated in Argentina

PAHO-Argentina

Agustina receives the flu shot and runs to continue painting landscapes; Simon proves his dexterity with a ball made with socks and then responds to the call of his mother waiting in line for the measles dose; Elsa hurries with her cane while the vaccinator waits to give her the flu vaccine. In the background, a folkloric group plays on the stage, while around them children and adults try different sports and artistic games. This scene corresponds to "The Night of Vaccines," a vaccination initiative in the province of Córdoba, Argentina, held with support from PAHO/WHO to celebrate vaccination.

For six hours, from 8 pm to 2 am, the Pediatric Hospital of the Child Jesus (*Hospital Pediátrico Del Niño Jesús*) opened its doors to the community to



The Night of Vaccines, Córdoba, Argentina, April 2018. Credit: Ministry of Health-Córdoba/PAHO/WHO.

give the vaccines included in the national vaccination schedule for free and at the same time, offer various musical shows, games for children and soccer-tennis matches, among other forms of entertainment.

This was the fourth edition of the initiative, which is on the rise every year. In total, 6,305 doses were applied this year.

The Night of Vaccines takes place in the framework of Vaccination Week in the Americas, which was held from 21 to 28 April 2018 this year, with a focus on football in the context of the 2018 World Cup. For that reason, foot-

balls, shirts and blue and white hats – with the colors of the Argentine flag – were present throughout the night.



The Night of Vaccines, Córdoba, Argentina, April 2018. Credit: Ministry of Health-Córdoba/PAHO/WHO.

ba noted while waiting to receive the vaccine against hepatitis B in the long line of attendees.



The Night of Vaccines, Córdoba, Argentina, April 2018. Credit: Ministry of Health-Córdoba/PAHO/WHO.



The Night of Vaccines, Córdoba, Argentina, April 2018. Credit: Ministry of Health-Córdoba/PAHO/WHO.

## More than 3.3 million children vaccinated against Measles and Rubella in Togo

[Crepin Hilaire Dadjo](#), WHO/IST West Africa

Prior to the introduction of the first dose of Measles Rubella into their routine vaccination schedule, Togo organized a national Measles and Rubella vaccination campaign from 12-18 February 2018 which was integrated with Vitamin A and deworming tablets. The launch ceremony was presided over by the Acting Secretary-General of the Ministry of Health in the presence of high profile personalities including the WHO Representative, and other key partners such as UNICEF and Rotary International, among others.

Since 2001, Togo has adopted the measles mortality reduction strategies recommended by WHO and UNICEF. From



At the launching ceremony, Dr Lucile Imboua, WHO Representative – Credit: WHO/Togo

there until 2010, one catch-up campaign targeting children aged from nine months to 14 years, and three follow up campaigns targeting nine to 59 months were organized, reaching the recommended 95% of coverage in over 85% of districts of the country. Consequently, a 90% reduction of measles suspected cases was observed concurrently with a 94% reduction of deaths between 2001 and 2008. However, since January 2009 a resurgence of measles and rubella cases in children under 15 years was identified: 415 (2011), 451 (2012), 562 (2013), 392 (2014) and 300 (2015). A total of 857

cases were tested positive out of the 2120 suspect cases. During the same period, 211 positive cases of rubella were recorded.

As the country has now reached 80% measles coverage, it is eligible to introduce the first dose of measles and rubella vaccine. That is the reason why the February 2018 campaign was held, resulting in a total number of 3,336,410 children from nine months to 14 years (100.4% of the target) being vaccinated against measles and rubella.



A fixed post during the campaign – Credit Photo: WHO/Togo



At the launching ceremony, Dr Sossinou Awoussi, Acting Secretary General, MoH Togo – Credit: WHO/Togo.

## Sierra Leone introduces IPV



A cross section of officials, health workers and community members at the launch of the IP vaccine in Freetown- Credit: WHO/ Sierra Leone.

[Crepin Hilaire Dadjo](#), WHO/IST West Africa

On 23 February 2018, Sierra Leone officially introduced the injectable polio vaccine (IPV) into its routine immunization programme. The expected objective of this vaccine introduction is to further boost immunity against polio, and maximize their protection against polio.

Some 99,600 doses were available at the launching period targeting 69,927 children within three months, the target being to reach 95% of children aged under five years by end of 2018. Given at the 14<sup>th</sup> week after birth, IPV is available free of cost alongside the oral vaccine at every health facility within the country's 14 districts.

The last confirmed polio case in Sierra Leone was reported in 2010. Since then increased surveillance activities for the disease have been ongoing with support from WHO and other partners. In April 2018, Sierra Leone organized a polio campaign in synchronization with neighbouring countries. A total of 1,530,816 children under five were vaccinated, which represent 98.5% of the target.



## PAHO and Rotary prepare for the Global Certification of Polio Eradication

Ana Elena Chevez, Jennifer Sanwogou and Liz Thrush, PAHO-Washington; Edmond Gue, PAHO-Haiti; Jenny Neira, PAHO-Dominican Republic

As the world gets closer than ever to the eradication of polio, PAHO was invited to participate in meetings hosted by Rotary International to share advances, current challenges and the legacy of polio eradication in the Region of the Americas.

These meetings were held in Haiti on 27 April 2018 and in the Dominican Republic on 11 May 2018. The work done by Rotarians and countries around the world has been recognized as contributing to sustaining the Region free of polio for over 26 years.

In addition to PAHO sharing advances made on the preparation for global polio certification, they have also been sharing regional progress on measles, rubella and neonatal tetanus elimination; the control of diphtheria, and pertussis; and the introduction of new vaccines such as rotavirus, pneumococcal and human papilloma virus.

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



Dr Cuauhtemoc Ruiz-Matus speaking at the Rotary meeting in Haiti on 27 April 2018. Credit: PAHO/WHO.

## PAHO supports a diphtheria vaccination campaign in Haiti

Ana Elena Chevez and Jennifer Sanwogou, PAHO-Washington; Jean Andre and Edmond Gue, PAHO-Haiti



Meeting to discuss progress of vaccination campaign against diphtheria in Haiti. Credit: PAHO/WHO.

PAHO is actively supporting the implementation of a diphtheria vaccination campaign in Haiti. The country is planning to vaccinate more than two million children aged one to 15 years of age in 44 municipalities of nine out of the ten departments in Haiti: Artibonite, Center, Nippes, North, North-West, North-East, West, South, and South-East.

PAHO is promoting an integrated response, which includes the vaccination campaign, surveillance, improvement of case management and contact tracing. As part of the support, PAHO has deployed a group of international and national experts, including members of the Stop Transmission of Polio (STOP) Programme in Haiti.

The campaign was staggered, with the first phase implemented from 11-15 March 2018 in eight departments (Artibonite, Center, Nippes, North, North-West, North-East, West, South, South-East), and the second phase from 8-13 April 2018 in the West department. The vaccination campaign focused on concentrated populations, especially kindergartens and schools. The campaign will help build capacity among vaccinators, especially regarding injection safety and the cold chain.

Dr Luis Codina, PAHO Representative in Haiti and Dr Cuauhtémoc Ruiz-Matus, head of the Comprehensive Family Immunization unit, held meetings with the Minister of Health, Dr Marie Gréta Roy Clement, to discuss the progress of the campaign and how to continue improving the routine immunization programme.



Meeting to discuss progress of vaccination campaign against diphtheria in Haiti. Credit: PAHO/WHO.



## Past Meetings/Workshops

### Workshop to adapt the revised AFRO RED Guide by countries in the sub region

[Messeret E Shibeshi](#) & Machenkanyanga Zorodzai, WHO IST ESA

Location: Kenya, Nairobi, Sarova  
Panafric Hotel

Date: 21-24 March 2018

Participants: Total of 57 participants from MOH, WHO, Unicef, JSI country teams and 19 facilitators drawn from WHO regional office(1) , IST ESA FRH (8) , and WHO HQ (2) Unicef regional office for East and Southern Africa, (3) JSI (3), USAID (1) & CDC (1)

Purpose:

- To train participants on understanding the principles and tools of the revised RED guide for the adaptation and use specific to each country context.
- To reinforce the use of the standard full components of the RED strategies.
- To share lessons and practices on innovations of implementing the RED strategy.
- To reinforce country capacity for improved planning and implementation to reach every community and eligible target using the RED strategy guideline towards reaching the country, regional and global immunization targets
- To improve the integration of essential services along the life course to generate demand, and to strengthen routine immunization services and improve coverage.

Details: Seventeen countries with a total of 57 participants from East and Southern Africa attended the inter-country workshop to adapt the Revised 2017 WHO AFRO Reaching Every District (RED) Guide to their country immunization programme.

Presentations were made on the progress of the sub region in immunization, and broader child and adolescent health and nutrition interventions were presented. This included the progress on immunization services towards the Global Vaccine Action Plan. The workshop also shared the Regional Immunization Strategic Plan midterm review results and the country categorization as per their immunization performance, which will guide technical support from WHO to Member States.

Facilitators presented introductory standardized presentations for each chapter that were then used to guide country group work, also supported by facilitators. Countries updated their tools for each section and contributed to the plenary by sharing their best practices. The country working groups were systematically taken through all the five chapters and components of the RED guide. The sessions were interactive and practical from the shared experiences. All countries agreed that they would need an abridged version of the RED guide for the health facility level. Real time evaluation was conducted every day, and the results and observations by workshop participants was used to guide strengthening of the sessions. The next steps were identified by all, and were used to guide and to strengthen the sessions.

Details from the country presentations, plenary discussions and the conclusions of the working groups will be shared with the workshop report for follow up action with countries for monitoring progress.

The countries intend to adapt the tools at health facility level to suit their local situation, and will conduct stakeholder meetings to endorse the draft adapted guide and to allow inputs and further consultation by all relevant units prior to finalization.

Reference documents and relevant presentations linked to the revised RED guide were shared with all participants for further dissemination and use at country level as resource materials if needed.

## WHO/AFRO consultative workshop on access to affordable vaccines in Middle Income Countries in the African Region

Richard Mihigo, Joseph Okeibunor, Helena O'Malley, Amos Petu and Alexis Satoulou, WHO Africa Regional Office, Tania Cernuschi, WHO Headquarters

**Location:** WHO Regional Office for Africa (Brazzaville)

**Date:** 9-11 April 2018

**Participants:** Participants were drawn from 17 countries of the middle and upper middle income countries and countries that are soon to transition out of Gavi support in the WHO African Region. Other participants in the meeting included immunization partners, namely UNICEF, CDC, Gavi, GSK and donors (DFID, BMGF etc) as well as other WHO Regional offices with experiences in access to affordable vaccines in their MICs. These regions included EMRO, EURO, and PAHO.

**Purpose:**

1. Review country situation in relation to sustainable access to timely and affordable vaccines and country experiences with a focus on evidence-based decision-making, financing and procurement processes.
2. Share experiences from other regions on decision-making, financing and procurement processes.
3. Share information on tools available to countries.
4. Initiate discussions on feasibility of different decision-making, procurement and funding options.
5. Define region-wide priorities to tackle the MIC challenge.

**Details:** The consultation used the WHO Middle Income Country Strategy as the framework for analyzing experiences of Middle Income Countries (MICs) in Africa as they struggle with access to affordable vaccines and thus struggle to optimize their immunization programme. With a charge from the RD/AFRO that the consultation is designed as part of efforts “not to leave any child behind as far as vaccination is concerned, whether in LIC, MIC or HIC”, experiences from other regions (EMRO, EURO and PAHO) in terms of accessing affordable vaccines helped shape discussions.

Panel discussions and group work enabled country representatives and partners to drive deeper into the pillars of the MICS and propose actions at country level. Partner organizations advised on available resources and support to facilitate affordable access, ranging from information on market intelligence designed to support better decision-making (WHO Market Information for Access (MI4A)) on pricing and procurement, to funding through the vaccine independent initiative (VII) from UNICEF.

The consultation concluded that countries will have to improve procurement skills and knowledge; harmonize product choice & registration processes; and explore and use pooled procurement options. It was agreed that better communication on pricing and the use of the information on the V3P platform will encourage country staff in contracting and negotiating. The Regional Economic blocs (RECs) were identified as a platform, while a long term strategy is to create the enabling environment for more manufacturers to enter the market and encourage local production.

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## First NITAG side meeting at SAGE

Louise Henaff and Christoph Steffen, WHO Headquarters, Anthony Harnden, JCVI

Location: Geneva, Switzerland

Date: 19 April 2018

Participants: 29 participants representing NITAGs of 19 countries (Argentina, Australia, Belgium, Canada, Congo DRC, Jamaica, Lao PDR, Lithuania, Morocco, Norway, Palestine, Saudi Arabia, South Africa, Sweden, Thailand, Tanzania, Togo, Russia, United Kingdom), WHO HQ, GAVI, USAID, the Wellcome Trust and the European Commission

Purpose: To present the NITAG support at national, regional and global levels; exchange views on NITAG functioning in all regions; share NITAG's experiences on priority setting; and discuss NITAG evaluation instruments.

Details: A selection of National Immunization Technical Advisory Group (NITAG) members from all WHO regions were invited as observers to better understand how evidence-based recommendations are issued, how working groups report to SAGE members, but also to be informed of the latest recommendations and to network with fellow colleagues from other NITAGs. For the first time, a NITAG side meeting was organized on 19 April 2018 back-to-back to the SAGE meeting.

After an initial round-table allowing NITAG representatives to share their current priorities and challenges, representatives from Australia, Belgium, Canada, Palestine, and Togo discussed how priorities are set in their respective countries in a panel discussion.

US-CDC presented the self-assessment tool that is currently being developed at the request of recently established NITAGs. Once finalized, the tool will be made available to all NITAGs.

The Public Health Agency of Canada made an announcement regarding the upcoming third Global NITAG Network (GNN) meeting, which will be hosted in Ottawa on 6-7 December 2018. The Global NITAG Network as well as the GNN meeting is open to all NITAGs.

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## Teach to Reach Workshop: From Theory to Action

George Durham, [Heather Ferguson and Gina Kim, Linksbridge SPC](#); Molly Abbruzzese and Amanda Shortell, the Bill &

Location: Dar es Salaam, Tanzania

Date: 1-3 May 2018

Participants: 90 participants – 70 from country-level and implementing partner organizations such as WHO, UNICEF, Gavi, BMGF, CHAI, JSI, MoH and 20 facilitators, speakers, and subject-matter experts.



Purpose: The Teach to Reach (T2R) Workshop brought global and country-level partners together to work through specific workforce performance challenges alongside subject-matter experts in instructional design, learning theory, curriculum development, and measurement and evaluation.

Teach to Reach Workshop Participants

Details: The Teach to Reach Workshop was structured to enable a design-thinking approach to workforce improvement challenges through a series of facilitated workshop sessions. Participants were divided into workgroups that were either country-specific (e.g. Ethiopia, India, Nigeria, Pakistan, Tanzania) or focused on a similar challenging topic such as data and measurement.

Between workgroup sessions, participants attended plenary sessions on instructional design, monitoring and evaluation M&E, behavior change, and case studies on how innovative training methods have been used in the private sector and existing health settings. An evening poster session focused on sharing experiences with healthcare workforce performance improvement among different partners and countries.

At the close of the event, each group shared an action plan identifying the partners, audience, activities, and resources needed to implement its proposed solution(s), and developed a timeline for follow-up and continued engagement with group members.

## First meeting of the Regional Verification Commission (RVC) for measles and rubella (MR) elimination in the Eastern Mediterranean Region

[Amany Ghoniem](#), WHO EMRO

Location: EMRO/Cairo/Egypt

Date: 9-10 May 2018

Participants: Chairperson and members of Regional Verification Commission for measles and rubella elimination in the Eastern Mediterranean Region (EMR), and WHO EMRO immunization technical staff.

Purpose: To review and endorse the regional guidelines for verification of measles and rubella elimination in EMR based on the WHO framework and other documents that national verification committees (NVCs) should provide towards documenting the absence of measles and rubella endemic transmission in their countries for verifying measles elimination.



Participants in the first meeting of the RVC for MR in EMRO

Details: The Eastern Mediterranean Regional Verification Commission (RVC) for Measles and Rubella Elimination has been established by the Eastern Mediterranean Regional Office (EMRO) as an independent expert body with the mission of evaluating the documentation submitted by NVCs for Measles and Rubella Elimination in member States of EMR and to verify the elimination of measles and rubella in the Region. Dr Hyam Bashoor being one of the members of the RVC has been nominated as a chairperson by the Regional Director for EMRO. The vaccine-preventable diseases and immunization (VPI) unit of the EMRO serves as the RVC secretariat.

The RVC members include experts in the field of Pediatric /Epidemiology/ Public Health / laboratory and are from academia, UN and other international agencies, independent from national immunization programmes in accordance with the Terms of Reference of the RVC.

The meeting was chaired and moderated by RVC Chairperson Dr Hyam Bashoor. In the opening session of the meeting, Dr Nadia Teleb, Regional Advisor (Vaccine-Preventable diseases and Immunization) provided an overview of the status and major issues related to measles and rubella immunization and surveillance in Member States of EMR. Subsequently, the members reviewed the draft guidelines and related documents which had been drafted by VPI. Rich technical discussions ensued, whereby the RVC members sought clarifications from the secretariat on certain issues and provided their inputs. The experience and lessons learnt from different regional commissions shared by the RVC members were very useful in fulfilling the objectives of the meeting. By the end of the second day, RVC guidelines, related documents including the Standard Operating Procedures (SOPs) of the RVC were endorsed by the RVC.

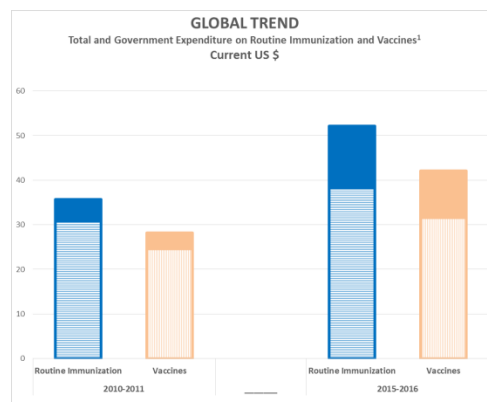
# Resources

## Immunization financing indicators of the WHO-UNICEF Joint Reporting Form (JRF): trends analysis and interactive maps available on the WHO website

Huang Xiao Xian, Antonello Lenti, Nikhil Mandalia and Claudio Politi, WHO Headquarters

Each year, WHO and UNICEF collect immunization financing data through the JRF. This information is routinely analyzed and reported annually in the GVAP secretariat report, as well as in dedicated financing indicators reports. The latest report, the *Immunization Financing Indicators of the WHO-UNICEF Joint Reporting Form Factsheet*, is now available on the WHO immunization financing website [here](#).

The factsheet outlines global progress in immunization financing between 2010 and 2016, whilst also providing a breakdown of trends in each WHO region, as well as Gavi-supported countries, and middle-income countries.



The most recent global level data 2015-16 (in 119 countries that reported time series) showed that the average total expenditures on vaccines and routine immunization grew to \$42.1 and \$52.2 per live birth, respectively. This represents an average annual increase of 8% since 2010-11. Government expenditure remained the main funding source, representing around 75% of total expenditure for both vaccines and routine immunization worldwide.

There are high variations across and within regions, both the Region of the Americas and the European Region exhibited expenditures of more than \$100 per live birth, whereas all other regions had an average outlay of less than \$50. The African Region registered the highest average annual growth in routine immunization expenditures with 21%, followed by 13% in the South-East Asian Region and 12% in the Western Pacific Region. For more details, click [here](#).

In addition, interactive maps displaying the JRF financing indicators have been updated to include the most recently reported country data. The maps illustrate the evolution of the six immunization financing indicators between 2006 and 2016. The data can also be filtered by country, region, year, income level and Gavi eligibility.

## WHO EpiBrief 1/2018

Catharina de Kat, WHO Europe



This issue of WHO EpiBrief provides an overview of official epidemiological data on measles and rubella in the WHO European Region based on country-level data for 2017 and the first months of 2018. The data is presented in a series of tables and charts, highlighting key findings and trends. The data is sourced from the WHO European Region's surveillance system, which collects and reports data on infectious diseases. The data is presented in a series of tables and charts, highlighting key findings and trends. The data is sourced from the WHO European Region's surveillance system, which collects and reports data on infectious diseases.

This issue of [WHO EpiBrief](#) provides an overview of measles and rubella in the WHO European Region in 2017 and in the first months of 2018. It also includes short reports on events of these diseases in Austria, Greece, Italy, Romania and Ukraine.

A brief report summarizing rotavirus surveillance data from Member States in the Region participating in the WHO-coordinated Global Rotavirus Surveillance Network (GRSN) is also included.



## Immunization Financing in MENA Middle-Income Countries

[Nahad Sadr-Azodi](#), UNICEF MENARO

This report examines health financing and, within that, immunization financing and vaccine procurement in the Middle East and North Africa (MENA) region, which consists of 14 middle-income countries (MICs) and six high-income countries. The report focuses on the MICs, given that their lower levels of health expenditure pose more challenges for financing immunization. Of the 14 MICs, Djibouti, the Sudan and Yemen have been eligible for Gavi assistance since 2000. Gavi is a source of support for the introduction of new and underused vaccines, operational costs of campaigns, cold chains, and health system strengthening. The three countries eligible for Gavi support have introduced pentavalent, pneumococcal conjugate and rotavirus vaccines, and procure vaccines through the UNICEF Supply Division (UNICEF SD) at favourable prices for Gavi countries. The MICs not supported by Gavi face challenges in introducing new vaccines due to competing priorities, highly constrained resources, the higher cost of new vaccines, information gaps, and procurement rules and procedures. In many cases, they lag behind countries eligible for Gavi support on new introductions.

Conflicts, instability and the prevailing geopolitical situation in the region have hit immunization programmes hard in several countries, including Iraq, Libya, the Syrian Arab Republic and Yemen. For example, World Health Organization/UNICEF estimates of coverage of the third dose of the diphtheria-tetanus-pertussis vaccine (DTP3) in the Syrian Arab Republic fell from 80 per cent in 2010 to 42 per cent in 2016. Conflicts and instability have spilled over into other countries. Refugees make up about 1 in 6 people in Lebanon, and 1 in 11 in Jordan. Large refugee populations are also found in Algeria, Egypt, Iraq and the Sudan. These Governments are stretched to provide health (and immunization) services to these populations and adapt delivery strategies to reach displaced persons. Nomads, recent urban migrants, certain ethnic groups and people living in more remote geographic areas, in addition to refugees, have less access to immunization services.

Link to the [publication](#).

Link to an [advocacy video](#).

Links to the November 2017 Consultative Review: [videos](#) and [presentations](#).

## PAHO Electronic Immunization Registry: Practical Considerations for Planning, Development, Implementation and Evaluation

This document is designed to support EPI managers and their teams in the implementation of information systems related to Electronic Immunization Registries (EIRs), using the various experiences compiled at the global level – and, especially, in the Region of the Americas – as a foundation.

Within this context, the main objectives of this document are as follows:

1) to generate knowledge related to information systems and immunization registries for immunization programme managers at the national and subnational levels; 2) to provide teams, EPI managers, and experts in health information systems with relevant background and experiences for development, implementation, maintenance, monitoring, and evaluation of EIR systems, so as to support planning of their implementation; 3) to provide technical, functional, and operational recommendations that can serve as a basis for discussion and analysis of the standard requirements needed for development and implementation of EIRs in countries of the Region of the Americas and elsewhere; and, 4) to serve as a platform for documentation and sharing of lessons learned and successful experiences in EIR implementation.

This document is structured into three major sections: background; EIR planning and design; and EIR development and implementation, considering the relevant processes and their structure. The content of the chapters is supported by a literature review of aspects related to EIR requirements and summarizes the experiences of the countries of the Region of the Americas and other regions that already have EIRs in place or are at the development and implementation stage.



[English](#) [French](#) [Spanish](#)

# Calendar

## June

3-4	BMGF Maternal Immunization 2018 Multi-stakeholder Meeting	Amsterdam, the Netherlands
6-7	Global Advisory Committee on Vaccine Safety	Geneva, Switzerland
12-14	Global Task Force for Control of Cholera (GTFCC)	Annecy, France
13-15	EURO Regional Verification Committee (RVC) meeting	Paris, France
18-22	27th Meeting of the TAG on immunization and vaccine-preventable diseases (GVAP) in the WPRO	Manila, Philippines
26-28	Global Immunization Meeting (GIM)	Kigali, Rwanda
26-29	WHO Global Measles and Rubella Laboratory Network (GMRLN)	Cascais, Portugal
29-30	Regional Immunization Technical Advisory Group (RITAG)	Kigali, Rwanda

## July

10-12	Immunization Practices Advisory Committee (IPAC) Annual Meeting	Geneva, Switzerland
16-20	SEARO ITAG & EPI Managers' meeting	TBD
31 Jul-2 Aug	3rd South East Asia Regional Verification Commission Meeting and National Measles Rubella Laboratory assessment	Kathmandu, Nepal

## August

27-29	<a href="#">13<sup>th</sup> International Rotavirus Symposium</a>	Minsk, Belarus
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## October

23-25	Strategic Advisory Group of Experts (SAGE) on Immunization	Geneva, Switzerland
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## December

5-6	Global Advisory Committee on Vaccine Safety	Geneva, Switzerland
6-7	Global NITAG Network meeting	Ottawa, Canada

## Links

### Organizations and Initiatives

American Red Cross  
[Child Survival](#)

Agence de Médecine Préventive  
[Africhol](#)  
[EpiVacPlus](#)  
[LOGIVAC Project](#)

Centers for Disease Control and Prevention  
[Polio](#)  
[Global Vaccines and Immunization](#)

Johns Hopkins  
[International Vaccine Access Center](#)  
[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  
[Maternal and Child Health Integrated 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 \(NESI\)](#)  
[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 \(Gavi\)](#)  
[The Pneumonia Newsletter \(Johns Hopkins Bloomberg School of Public Health\)](#)  
[Immunization Economics Community of Practice](#)