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Delivering much needed COVID-19 vaccines to communities living in remote, hard-to-reach areas

Souliya Channavong, [Vannaseng Insal](#) and Irene Tan, WHO Country Office, Lao PDR

In October 2021, Ngoi District, a serene and picturesque village up on the mountain in the northern part of Laos, became a cluster site with more than 100 positive COVID-19 cases. This tiny district, home to a large group of Hmong ethnic minority, was at high risk of being exposed to widespread community transmission.

A central team from the Ministry of Health, UNICEF, and the World Health Organization was dispatched immediately to Ngoi District to support the case investigation and provide villagers with much-needed COVID-19 vaccines. They were joined by 46 provincial and district health officials including medical students, and they were divided into six teams to administer vaccines to the local villagers.

When they arrived in the district, one of the teams was assigned to manage the fixed vaccination site in Nong Khieaw village, while the other five conducted house-to-house vaccinations to reach the elderly, people with disabilities, people with underlying health conditions, and pregnant women.

Most communities have poor road access, which made providing vaccine difficult, as boats and farmers' tractors are often used to get to affected villages. Furthermore, many locals choose to stay on their farms in the middle of the farming season. The district of Ngoi has one district health office and eight health centers serving more than 32,000 people in 75 villages.

With funding support from USAID on the readiness, delivery, and monitoring of COVID-19 vaccines to Lao PDR, the team spent 12 days in Ngoi District and administered more than 6,500 doses of vaccines to the villagers.

The support contributed to safe vaccine distribution and waste disposal practices, improving monitoring and evaluation of COVID-19 vaccine roll-out, and expansion of pre-registration via the Government's vaccination website for better documentation.

Read more about COVID-19 vaccination in Lao PDR at this [link](#).



Ms Chansamay, a nurse from Sop Khing Health Center carries her vaccine box to reach the villages. Credit: WHO Souliya Channavong.

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Using Scientific Evidence to Strengthen Intersectoral Collaborations: Involving Religious Leaders in COVID-19 Vaccination Communication Efforts

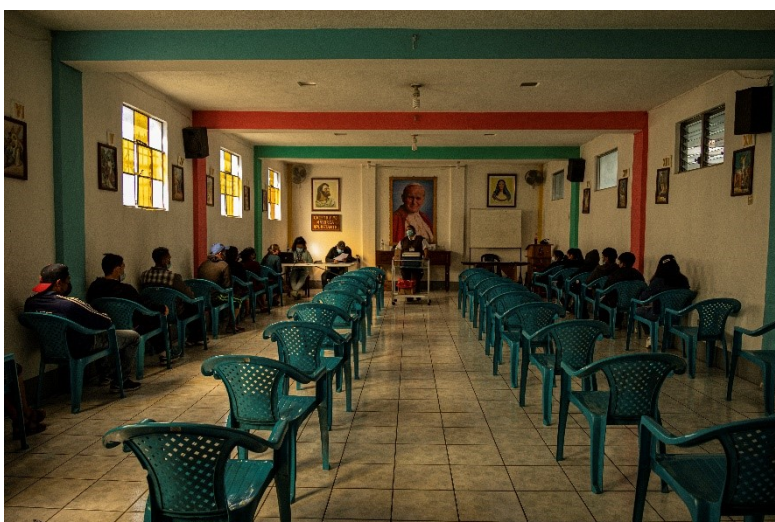
Victoria Peláez, Guatemalan Inter-Religious Dialogue/Religions for Peace, Mónica Berger, Universidad del Valle de Guatemala, Antonio Paredes, Guatemalan Ministry of Public Health and Social Welfare, Lourdes Álvarez, Claudia Jarquin and Marc Rondy, Pan American Health Organization, Guatemala, Margherita Ghiselli, [Pan American Health Organization](#), Washington DC

COVID-19 vaccination was launched in Guatemala in February 2021. As vaccine implementation advanced, differences in coverage between urban and rural areas were observed. Misinformation at national and local levels has been one of the main factors contributing to vaccine hesitancy. In-country ethnoanthropological studies highlighted the key role of local religious and community leaders in individuals' decision to vaccinate.

To support the Ministry of Health (MoH) in advancing COVID-19 vaccination in Guatemala, PAHO partnered with the Guatemalan Inter-Religious Dialogue for Development and Religions for Peace (DIRGD/RfP) to engage faith leaders in vaccine advocacy. The goal was to integrate faith leaders in the MoH's vaccination communication efforts. This partnership benefits from an ongoing multifaith collaboration at the national level (DIRGD/RfP) to demonstrate the trust that religious communities place in the vaccine and transfer this trust and science-based information to local levels.

A webinar was hosted by DIRGD/RfP in March 2022 for national and local religious leaders to obtain first-hand scientific information about COVID-19 vaccines and their role in controlling the ongoing pandemic. The webinar included presentations on the regional and national context of the COVID-19 pandemic, vaccine efficacy and impact, results from a nation-wide ethnoanthropological evaluation identifying vaccination barriers, and a discussion on collaboration opportunities for religious leaders to support COVID-19 vaccination. Presenters included representatives from the MoH, PAHO, Universidad del Valle de Guatemala, and leaders from the Evangelical congregation, Maya spirituality, Church of Jesus Christ of Latter-Day Saints, and Catholic community. We expect these approaches to help local religious leaders promote vaccination and advocate for the health of their communities.

Bridging knowledge gaps related to COVID-19 vaccines is key in advocating for and advancing vaccination campaigns throughout the country and paving the way for improving vaccine uptake throughout 2022.



A church in San Raymundo used as a local vaccination center. Photo credit: PAHO Guatemala.

Gavi Board approves funding to support malaria vaccine roll-out in sub-Saharan Africa

[Kristen Kelleher](#), WHO Headquarters

On 2 December 2021, the board of Gavi, the Vaccine Alliance (Gavi), approved an investment to support the malaria vaccine introduction, procurement and delivery for Gavi-eligible countries in sub-Saharan Africa in 2022-2025. By securing investment in the long-awaited malaria vaccine, the decision assures that many more children at risk will benefit from this life-saving and additional malaria prevention tool.

An initial investment of close to US\$ 160 million for 2022-2025 will initiate the implementation of this additional tool to “help drive down child mortality in Africa,” according to Gavi.

“This global investment is another milestone for the first malaria vaccine, which will boost child survival and extend the reach of malaria prevention through the existing platform of childhood vaccination,” said Dr Katherine O’Brien, Director of WHO’s Department of Immunization, Vaccines and Biologicals. “This international financing of malaria vaccine doses for country implementation is a concrete step forward to increase access to the RTS,S malaria vaccine.”

Read the Gavi press release announcing the decision [here](#).

Read WHO’s reaction to the news [here](#).



Credit: WHO Ghana.

Introducing Gavi’s new immunization learning network for middle-income countries

[Christina Shaw](#), Results for Development



Health worker builds trust in vaccines among H’mong community in Vietnam. Credit: Paul Zetter for Common Thread, 2020

[Results for Development \(R4D\)](#), [Curatio International Foundation \(CIF\)](#), and the [Institute for Health Policy \(IHP\)](#) have launched the Gavi-funded **Linked Immunisation Action Network (Linked)**, which aims to strengthen immunization programmes through peer-to-peer learning and action. Representing an integral component of Gavi’s new strategic approach to engaging with middle-income countries (MICs), Linked will bring together immunization practitioners, policymakers, and partners from MICs and support them to identify practical solutions and best

practices to mitigate and prevent backsliding in vaccine coverage, drive the sustainable introduction of key missing vaccines, and promote increased immunization equity and sustainability. Linked is an evolution of its predecessor, the Learning Network for Countries in Transition (LNCT), which served as a platform for collaborative learning among countries transitioning out from Gavi support. LNCT brought together immunization practitioners from over 20 countries to collectively solve problems and share lessons learned.

Learn more and stay up-to-date on learnings from the network by visiting the [website](#) and signing up for the [email list](#).

The quality of immunization coverage data in 194 countries appears to have improved over the past 20 years, according to a new analysis

Cornelius Rau, University of Hamburg, [Carolina Danovaro](#), Laure Dumolard, Marta Gacic-Dobo and Jan Grevendonk, WHO Headquarters

Immunization data are key to decision-making and monitoring of performance at all levels. Yet for more than two decades, the quality of immunization coverage data has been known to be problematic.

For the first time since 1998, the quality of reported child immunization coverage data for all 194 WHO Member States has been assessed in a global analysis [published in PLOS Global Public Health](#) in February 2022.

The assessment regarded coverage as reported to WHO and UNICEF through the Joint Reporting Form on Immunization (JRF) for Bacillus Calmette-Guérin (BCG) vaccine birth dose, first and third doses of diphtheria-tetanus-pertussis-containing vaccine (DTPI, DTP3), and first dose of measles-containing vaccine (MCV1) between 2000 and 2019. Using proxy measures based on existing WHO guidance and criteria proposed by the SAGE Working Group on the Quality and Use of Global Immunization and Surveillance Data in 2019, the completeness, consistency, integrity, and congruence of the data were assessed, and data quality flags were assigned in case “data anomalies” were detected in coverage reports.

In total, 18.2% of coverage reports between 2000 and 2019 contained potential data quality issues. Across WHO World Regions, South-East Asia had the lowest rate of potential data quality issues, while the share of quality flags in reports from the Americas and Africa was higher than the global mean.

Over the past 20 years, the global proportion of potentially problematic data declined significantly by 5.1% per year. This improvement was highest in Africa, followed by Europe and the Americas, and in countries of all income levels except lower-middle income countries. However, not all country groups showed significant reductions in data quality flags.

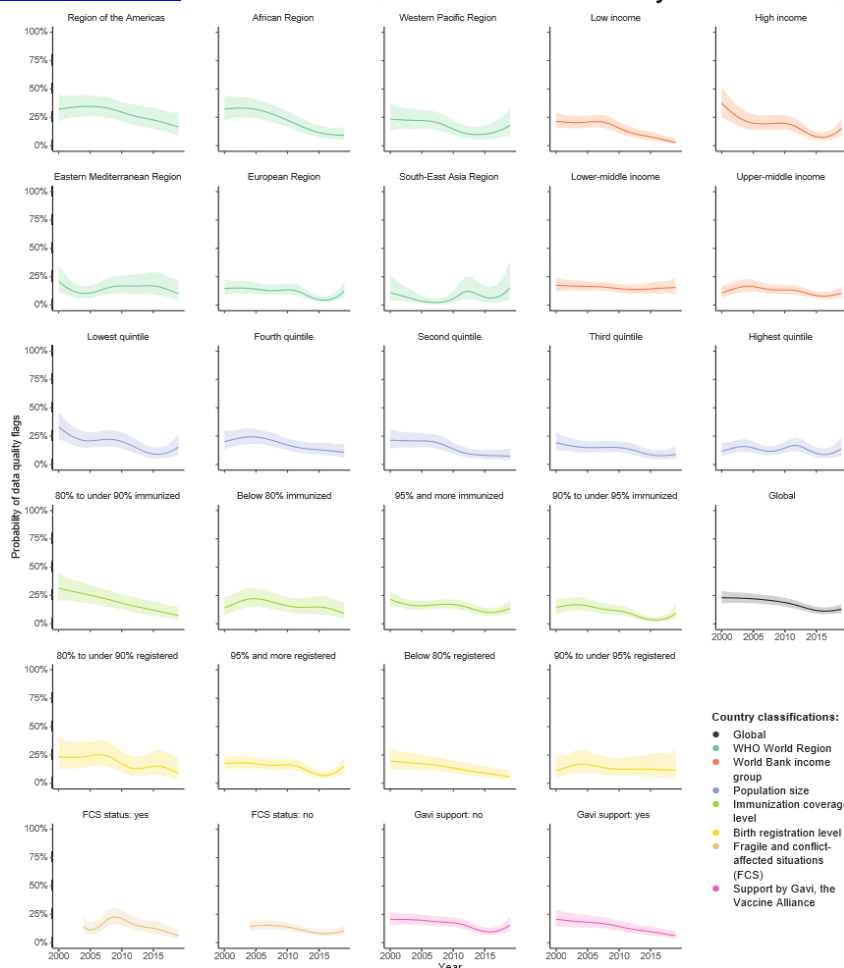
The findings of this analysis can inform national and international policy and action to strengthen national immunization information systems. Therefore, the Immunization Agenda 2030 provides momentum to enter the next era of global vaccination programmes driven by high-quality data.

KEY RESULTS:

- About one in five vaccine coverage reports (18.2%) contained data that warrant further quality investigation.
- Three out of six WHO Regions had data that suggested improvements in the quality of their coverage data (AFR, EUR, AMR), while the quality in the other three WHO regions was stable.
- Progress has been made in improving the quality of global immunization coverage data, but some country groups require further support.

REFERENCES:

- Rau C, Lüdecke D, Dumolard LB, Grevendonk J, Wiernik BM, Kobbe R, Gacic-Doco M, Danovaro-Holliday MC. Data quality of reported child immunization coverage in 194 countries between 2000 and 2019. *PLOS Global Public Health*. 2022;2(2):e0000140. <https://www.doi.org/10.1371/journal.pgph.0000140>



Most country groups were found to have experienced an improvement in their data quality.

CDC's STOP Programme Recruits Global Public Health Professionals to Support Polio Eradication and Other Emerging Disease Threats

A.J. Williams, U.S. Centers for Disease Control and Prevention (CDC); Margherita Ghiselli, [PAHO-Washington, DC](#)

The STOP Programme (STOP), previously known as the Stop Transmission of Polio Programme, was founded by the U.S. Centers for Disease Control and Prevention (CDC) in 1998. STOP supports global polio eradication efforts as part of the Global Polio Eradication Initiative (GPEI), in partnership with the World Health Organization (WHO), UNICEF, Rotary International, Gavi, the Vaccine Alliance, and the Bill and Melinda Gates Foundation. STOP has been recruiting consultants from around the world since 1999 and provides opportunities for public health professionals to develop specific skills, gain field experience, and contribute to the global polio eradication effort.

To date, STOP has recruited, trained, and deployed over 2,200 participants serving on over 4,800 assignments in 80 countries across all six WHO regions. As CDC's largest global workforce programme, STOP team members have supported governments to enhance surveillance for vaccine-preventable diseases (VPDs), strengthen routine immunization systems, support supplemental immunization activities, use data for action, utilize communication and advocacy for immunization, and respond to disease outbreaks. STOP's contributions to the success of the GPEI have not only helped advance polio eradication efforts, but also supported regional and national responses to emerging infectious diseases, including the COVID-19 pandemic.

STOP continues to support work in the PAHO region and started programmes in Haiti in 2006. In 2013, during the implementation of the Haiti Task Force project to strengthen VPD surveillance, STOP in-country consultants played a key role in training, supervising, and evaluating National Assistant Epidemiologists. STOP consultants were critical to the improvement of acute flaccid paralysis (AFP) and measles/rubella surveillance performance through active case



Dr Edmond Gue with Dr Ana Elena Chevez. Credit: A.J. Williams.

search efforts to identify unreported cases. As a direct result of this work, Haiti was certified free of measles, rubella, and congenital rubella syndrome by the PAHO Regional Certification Committee in 2016.

Today and following Haiti's first reported case of COVID-19 in March 2020, STOP consultants in the country have been instrumental to the implementation and monitoring of local COVID-19 response plans in the Ouest, Sud-Est, Nord-Ouest, and Grand'Anse departments.

For many STOP alumni, work on deployments and international experience has helped boost future career opportunities. Dr Edmond Gue (pictured below) is a perfect example. Dr Gue was a STOP team member from Burkina Faso who was selected to support Haiti from 2013-2014. Following his two deployments with STOP, he was hired by the WHO-Haiti country office as an immunization advisor and played a vital role in support of the STOP Team at CDC Headquarters in Atlanta.

STOP is expanding recruitment in the PAHO region and plans to start accepting applications in May 2022. For more information on the STOP Programme and how to apply, visit [CDC's STOP Programme webpage](#).

Global Affairs Canada and PAHO Provide the Dominican Republic with 20 Refrigerators for COVID-19 Vaccines

Communications team and Yenny Neira, PAHO-Dominican Republic; [Nora Lucía Rodríguez](#), PAHO-Washington, DC

The introduction of the COVID-19 vaccine in the Dominican Republic has required expansion of storage and transport capacities of vaccines at all levels, as well as adaptation of processes aimed at strengthening the cold chain. As part of the planning process to introduce the vaccine in 2020, the Expanded Programme on Immunization (EPI) updated the inventory of cold chain equipment, identifying storage and distribution gaps, both at vaccination sites and collection centers at the provincial level for the introduction of COVID-19 vaccines.

Global Affairs Canada (GAC) in collaboration with PAHO supported the first shipment of 20 refrigerators for the EPI. This shipment was part of the refrigeration equipment to support the cold chain, expand the storage capacity for vaccines in province-level, collection centers prioritized by the country, with an emphasis on those located in border areas. Additionally, it is expected that two cold rooms for the national warehouse will arrive in April. This donation will contribute not only to the fight against COVID-19, but also to improve access to the other vaccines that are part of the country's immunization programme.

During the [delivery ceremony](#), PAHO/WHO Representative (PWR) in the Dominican Republic, Dr Olivier Ronveaux, highlighted the importance of said donation in strengthening the collective health of the country. While the General Consul of Canada, Collin Holditch, on behalf of his government, expressed the satisfaction of supporting the Dominican Republic in this regard. Likewise, the Deputy Minister of Collective Health of the Dominican Republic's Ministry of Public Health, Dr Eladio Pérez, indicated that the contribution comes at the right time to fight for the public health of the country. "I know this is something that will not only contribute to the fight against COVID, but also contribute to our work with other vaccines, the 17 that are part of the immunization programme in the country. Above all, in border areas where we have the greatest need," Hernández added.

The Government of Canada, through PAHO, has provided more than US\$400,000 to strengthen the storage and distribution capacities for vaccines in the country, in addition to strengthening other components of the EPI, such as epidemiological surveillance, training, and supervision, among others.



National and Canadian authorities with PWR in the Dominican Republic, Dr Olivier Ronveaux, at the arrival of 20 vaccine refrigerators at the national vaccine store. Credit: PAHO/WHO.

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“The best part is when I am able to use my initiative”: health workers in immunization share what motivates them

Ian Steed, [The Geneva Learning Foundation](#) (TGLF)

"Effective collaboration, teaming, innovation and recognition of roles and contributions of team members give me motivation, and the lack of these things demotivates me."

Over 3000 sub-national and national health workers (85+ countries, 25% Health Facility level; 27% District level) applying to join a [Movement for Immunization Agenda 2030](#) have described what motivates and demotivates them in their work.

The survey uses established research questions to explore why respondents continue working in challenging circumstances, and how they feel about their work. Respondents also have the option to share qualitative descriptions of how work affects their well-being.

"If you made a plan but you can't implement it due to lack of sufficient funding, it's really a great challenge."

Join us in exploring what motivates health workers:

[Lightning Chat with Sharath Jeevan](#), author of “Intrinsic”, about the role of motivation in health worker performance

[Lightning Chat with Kate O'Brien \(WHO\)](#) about the significance of sub-national staff experience and insights

Join special sessions on motivation at Teach to Reach Connect 5 (4 March 2022) in [English](#) and [French](#).

"The best part is when I do mentorship in the districts. The worst part is when there are vaccine stock outs. I find motivation and feel involved when we work as a team with all members being committed. Covid-19 didn't really make me feel scared about my job. But it challenged me to work harder with the belief that hard and emergency situations call for more concerted effort and dedication to work."

TGLF's Insights Unit works in partnership with Bridges to Development and the International Vaccine Access Center (IVAC). Enquiries from researchers and global partners interested in learning from the Unit's work can be sent to this [address](#).

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Virtual Regional Meeting on the Electronic Joint Reporting Form (eJRF)

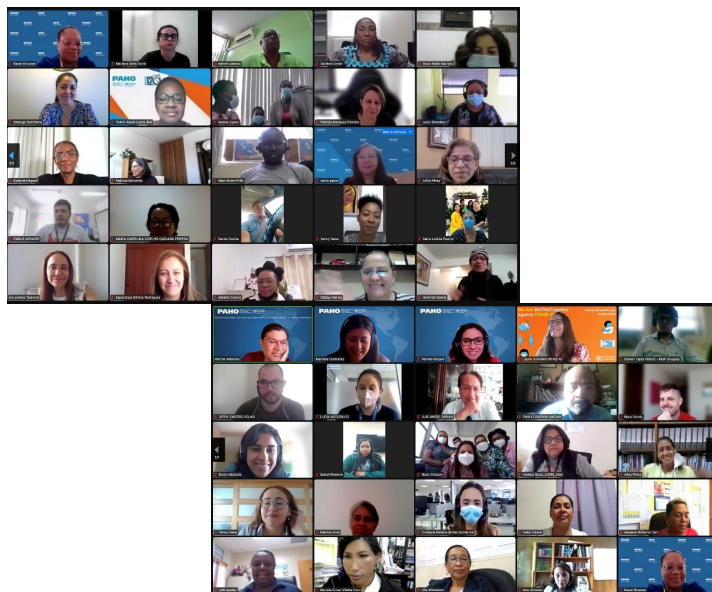
[Marta Velandia](#), Carilu Pacis, Pamela Burgos, Marcela Contreras - PAHO

Location: Washington DC, USA

Date: 18 February 2022

Participants: eJRF users.

Purpose: Support the countries of the Region of the Americas in ensuring the quality of the data reported in the eJRF as an official source for monitoring the new Immunization Agenda 2030, as well as regional plans and monitoring of immunization in the Region.



Participants at the Virtual Regional Meeting on the eJRF. Credit: PAHO/WHO.

Details: This virtual meeting was attended by 159 eJRF users from all countries of the Region of the Americas. During the meeting, WHO's eJRF team presented the global context and the importance of the eJRF as an official reporting tool for monitoring and evaluating the [Immunization Agenda 2030 \(IA2030\)](#) and emphasized how PAHO and countries utilize the information shared through the eJRF for technical decision-making.

The Region's performance in terms of delivery, delivery opportunities, and quality of reported data was reviewed, highlighting challenges and areas for improvement. A special emphasis was placed on the closure of forms and modifications to the review process to facilitate feedback from all reviewers and to be able to conclude the process in a more timely and complete manner.

The meeting also considered experiences from country representatives in the Ministries of Health of Barbados and Paraguay, who have shown excellent performance in the use and delivery of information through the eJRF platform. Dr Karen Broome, immunization advisor for the Caribbean subregion, and who has the role of reviewer for 22 countries in the subregion, also shared her experience. Sharing these experiences underlined the high commitment from countries, as well as the importance of prior preparation and collaboration among the various areas responsible for filling out the eJRF, improving the practices in using the tool, and complying with the commitments of sending official information.

The performance and uses of information from the monthly COVID-19 forms were also presented, as well as how monitoring COVID-19 vaccination has been strengthened through reports to PAHO and the development of dashboards and country reports.

The last part of the meeting provided information on the activities planned for the new eJRF 2022 process. WHO presented changes in the form, as well as the dates and contents of the trainings and webinars that will be held to strengthen improvements in eJRF data.

Strengthening Immunization Cold Chain and Supply Chain Capacities in Guatemala: Training of Trainers

[Maria Olga Bautista](#)¹, Evelyn Balsells², Ingrid Contreras³, Nora Lucía Rodríguez⁴, Alejandro Ortega^{4,5}, José Trinidad Martínez^{4,6}, Alfredo Rivera², Cecilia de Bustos³, Sharon Reyes², Marc Rondy²

¹Guatemalan Ministry of Public Health and Social Welfare

²Pan American Health Organization, Guatemala

³UNICEF, Guatemala

⁴Pan American Health Organization, Washington DC

⁵Pan American Health Organization, Nicaragua

⁶Pan American Health Organization, Honduras

Location: Guatemala City, Guatemala

Date: 14-18 March 2022

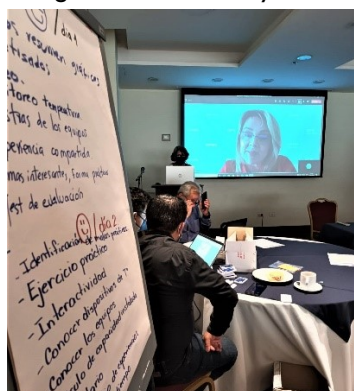
Participants: 27 participants, including representatives from the Guatemalan Ministry of Public Health and Social Welfare (MoH), United Nations Children's Fund (UNICEF) Guatemala, and Pan American Health Organization-Guatemala (PAHO)

Purpose: Following a "training of trainers" model, the workshop aimed to provide technical training to the national immunization programme, Guatemalan Institute of Social Security professionals, and healthcare workers to increase their competencies and knowledge about tools and technologies related to cold and supply chain management and vaccine handling. The workshop focused on topics related to equipment used to support routine and COVID-19 immunization, including solar equipment, and temperature monitoring, among others. Participants were trained in planning storage capacity, cold chain equipment (CCE) inventories, transportation, supply, and distribution. Participants will act as facilitators from the national level, and train health personnel at all levels in the future.

Details: Cold chain and supply chain needs for national immunization schedules have increased constantly in recent years. The introduction of COVID-19 vaccines has further increased the need for more complex, storage and transport capacities. PAHO and UNICEF have worked together to strengthen the technical competencies of health personnel on vaccine management, storage, and distribution of vaccines - essential components for the appropriate vaccine delivery at the national and local levels.

The Guatemalan MoH, with additional support from UNICEF and PAHO, held a Training of Trainers workshop from 14-18 March in Guatemala City to train 27 participants on cold chain and supply chain operations and vaccine management. The objectives of this workshop were to strengthen technical knowledge among national immunization programme officers, cold chain technicians, and health professionals to ensure proper vaccine handling, storage, and distribution. The workshop was also an opportunity for participants to learn about the use of new tools and equipment in the country, including hands-on activities at the National Vaccine Store. The workshop allowed participants to discuss planning storage capacity, CCE inventory management, transportation, and vaccine and supply distribution processes.

During 2022, participants will replicate the workshops locally to continue strengthening adequate vaccine management and delivery mechanisms.



International experts participated face-to-face and virtually to train staff in Guatemala on immunization cold chain management. Credits: UNICEF and PAHO Guatemala.



Participants in a hands-on practice session at the National Biologics Center (CNB) at the Ministry of Health. Credits: UNICEF and PAHO Guatemala.

Resources

PAHO Publishes TAG Report on Tailoring SAGE's Recommendations on COVID-19 Booster Doses to the Americas

Margherita Ghiselli, [Octavia Silva](#)-PAHO

Originally established in 1985 to discuss strategies for polio eradication, PAHO's Technical Advisory Group (TAG) on Vaccine-Preventable Diseases convened its 27th meeting on 27 January 2022 to tailor the SAGE Roadmap to the requirements of the Americas and the strategic use of COVID-19 booster doses. [Link to the report.](#)

PAHO Publishes Report from 35th Meeting of Caribbean EPI Managers

Jennifer Sanwogou, [Octavia Silva](#)-PAHO

PAHO 
THIRTY-FIFTH MEETING
OF THE CARIBBEAN
IMMUNIZATION MANAGERS

Virtual Meeting
3–5 November 2021

FINAL REPORT

The 35th Caribbean EPI Managers' Meeting was held virtually from 3-5 November 2021. The meeting convened 71 participants from 28 countries and territories of the English, Dutch and French-speaking Caribbean. Participants included representatives from the Ministries of Health, the Caribbean Public Health Agency (CARPHA), the Caribbean Community (CARICOM) and the Pan American Health Organization/World Health Organization (PAHO/WHO).

The overall objective of the meeting was to analyze achievements for 2020, review the challenges of 2020 and 2021 in the context of the COVID-19 pandemic, and plan activities for 2022 while sharing country experiences on the immunization programme. [Link to the report.](#)

PAHO Publishes Issue of the Immunization Newsletter in Honor of Recently Retired Doctor Cuauhtémoc Ruiz Matus

Martha Velandía, [Octavia Silva](#)-PAHO



The Immunization Newsletter is published four times a year, in English, Spanish, French and Portuguese by the Comprehensive Family Immunization Unit of the Pan American Health Organization (PAHO), Regional Office for the Americas of the World Health Organization (WHO). The purpose of the Immunization Newsletter is to facilitate the exchange of ideas and information concerning immunization programmes in the Region and beyond. References to commercial products and the publication of signed articles in this Newsletter do not constitute endorsement by PAHO/WHO, nor do they necessarily represent the policy of the Organization.

This is a special issue of the Immunization Newsletter, as it is a compilation of dedications to Cuauhtémoc Ruiz Matus, former chief of PAHO's Comprehensive Family Immunization Unit and co-editor of the Immunization Newsletter, who recently retired after 14 years leading the unit and advancing immunization in the Region of the Americas. The issue includes personal dedications from former colleagues, friends, as well as photos from different periods of his tenure at PAHO. During Dr Ruiz's tenure, progress was made in the areas of controlling vaccine-preventable diseases,

raising vaccination coverage, introducing new vaccines, supporting the Region during the COVID-19 pandemic, and playing a key role in the Vaccination Week in the Americas campaign, among other achievements.

This issue of the Immunization Newsletter is available in [English](#), [Spanish](#), [French](#) and [Portuguese](#).

First-ever malaria vaccine recommendation published in a position paper and in the WHO guidelines for malaria

[Kristen Kelleher](#), WHO Headquarters

WHO, on 4 March 2022, published an updated position paper on the RTS,S/AS01 malaria vaccine that includes the October 2021 recommendation calling for wider use of the vaccine among children living in regions of moderate-to-high *P. falciparum* malaria transmission. The paper, published in WHO's *Weekly Epidemiological Record*, complements the recent addition of the recommendation to the *WHO Guidelines for malaria*.

"The first malaria vaccine is a major step forward for malaria control, child health and health equity. If implemented broadly, the vaccine could save tens of thousands of lives each year," said Dr Katherine O'Brien, director of WHO's Department of Immunization, Vaccines and Biologicals. "This guidance is essential to countries as they consider whether and how to adopt the vaccine as an additional tool to reduce child illness and deaths from malaria," she added.



Credit: WHO Ghana..

The WHO recommendation was informed by a full evidence review of the RTS,S/AS01 malaria vaccine by WHO's global advisory bodies for malaria and immunization – the Strategic Advisory Group of Experts (SAGE) on immunization, the Malaria Policy Advisory Group (MPAG) – and was approved by the WHO Guidelines Review Committee.

[WHO position paper on malaria vaccine](#) (March 2022)

[Updated WHO guidelines for malaria](#)

Read more about the new guidance in this WHO [web story](#).

Policy and practice of checking vaccination status at school, a global overview

[Stephanie Shendale](#), WHO Headquarters

Checking vaccination status at school is widely recommended as a strategy to strengthen routine childhood vaccination coverage. Documentation of approaches, challenges, strengths, and impact of this strategy in a variety of contexts is key to enhancing adoption and implementation, however until now, understanding of the prevalence of such policies and practices has been limited.

To gain a more detailed understanding about the policy and practice of checking vaccination status at school, a one-time supplementary survey was circulated along with the JRF in 2019 to all WHO member states and non-member state reporting entities.

Responses to the survey were submitted by 130 of 194 member states, and 15 reporting entities. 46% of survey respondents reported having a law or policy requiring proof of vaccination to enter at least one level of education. 77% of respondents reported that a child's vaccination status was routinely checked at one or more levels of the education system (not necessarily linked to a vaccination requirement for entry).

The findings from this survey have been published this week, full manuscript available at this [link](#).

For [additional WHO resources](#) on school vaccination and school-linked immunization activities.

Guide and Workbook for Conducting a Situation Analysis of Immunization Programme Performance—Now available in French

[Samir Sodha](#), WHO Headquarters

The [working drafts](#) of the *Guide and Workbook for Conducting a Situation Analysis of Immunization Programme Performance* is now available. This guide is now available in [French](#).

A situation analysis or desk review is commonly recommended for many activities including EPI Reviews and National Immunization Strategy (NIS) development. The objective of this guidance is to enable national immunization programmes to conduct these situation analyses or desk reviews in a systematic way to identify and prioritise critical programme barriers, highlight programme success, and identify evidence gaps to be addressed. This process has been piloted in multiple countries (Burkina Faso, Indonesia, Liberia, Zambia) in the context of different activities, including EPI Reviews. The accompanying Excel-based workbook is a useful tool to assess and document the status of the immunization programme under review. It provides a detailed list of barriers and targeted questions for a step-by-step systematic documentation of available evidence.

For further information or an expression of interest to use this methodology in the countries you are working with please contact [Samir Sodha](#) or [Dijana Spasenoska](#).

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[Gardasil Access Program](#)

[Gavi the Vaccine Alliance](#)

[Global Polio Eradication Initiative](#)

[Immunization Academy](#)

[International Association of Public Health Logisticians](#)

[Immunization Economics resource](#)

[International Vaccine Institute](#)

[Measles & Rubella Initiative](#)

[Multinational Influenza Seasonal Mortality Study](#)

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

[Stop Pneumonia](#)

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[Vaccines Today](#)

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

[Immunization \(PAHO\)](#)

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

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

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