News

The Global Immunization Meeting: Successfully Navigating Transitions
WHO Headquarters

Last week, possibly the largest ever gathering of the immunization community took place in Kigali, Rwanda, co-hosted by WHO and UNICEF. From 26-28 June 2018 the Global Immunization Meeting (GIM) was attended by over 200 participants representing key immunization stakeholders and partners at global, regional, and country levels.

Unlike past GIMs that covered key issues related to routine immunization strengthening, the implementation of new and under-utilized vaccines, and accelerated disease control efforts, the 2018 theme of the GIM was Navigating Transitions. This provided an opportunity to work toward a common understanding of current changes such as Gavi transition and polio transition, and to explore new directions for action as the Global Vaccine Action Plan comes to a close in 2020.

The meeting objectives were to:

- Update global, regional, and country-level partners on key successes and challenges in immunization related to polio and Gavi transition
- Provide a forum for formal and informal exchange of new ideas and innovations
- Identify partner and country visions to achieve immunization programme goals after 2020.

The meeting consisted of a mix of multiple interactive session formats, providing many opportunities to engage and explore diverse aspects of immunization. The morning plenary sessions were dynamic and designed to challenge assumptions and bring new knowledge, and afternoon workshop sessions to provide an opportunity to explore technical topics in detail. Short sessions also took place to introduce new content areas and to share the latest updates on key themes. Lastly, a range of special sessions, including debates and ‘breakfast with an expert’ offered the occasion to dive into specific ‘hot’ topics. For staying up-to-date on all of the action, a meeting app equipped all participants with the agenda, notifications, and an activity tracker for sharing alerts and photos.

With the excellent quality of content across the board, attendees participated actively throughout the meeting. It would be impossible to pin-point any specific sessions in particular, however it should be noted that the plenary presentations were particularly thought-provoking. Prof. Helen Rees kicked off the meeting with a compelling presentation on the global shifts affecting the future of immunization, and day 2 featured Ola and Anna Rosling challenging our preconceptions about demographics, demonstrating that we’re not always right (apparently!), and why trends in global health are actually better than we think.

Thank you to the planning committee for the learning, inspiration, and connections made throughout the meeting!

For further information and the meeting agenda, please visit this [website](https://www.who.int/immunization/gin).
To view the plenary presentations from each day on the [YouTube channel](https://www.youtube.com) from the GIM.

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Madagascar declared polio free on 21 June 2018
Laure Dumolard, Yolande Vuo Masembe, Marcellin Nimpa Mengouo and Charlotte Faty NDiaye, WHO

All Global Polio Initiative (GPEI) partners in Madagascar are joining the Ministry of Public Health to congratulate the country for achieving the status of a polio free country. The African Regional Commission for Polio Certification made this declaration during a meeting in Abuja on 21 June 2018. This is an important milestone after the polio outbreak experienced in 2014-2015.

The World Health Organization (WHO), the Global Partnership on Polio Eradication (PMEI), the United Nations Children's Fund (UNICEF), Gavi, The Vaccine Alliance, The United States Agency for International Development (USAID), Rotary International, among others, have accompanied Madagascar in its efforts and greatly contribute to stop polio transmission. This is a disabling and potentially life-threatening disease.

To reach this milestone, polio eradication strategies were implemented in the country since 1997, including Acute Flaccid Paralysis surveillance, strengthening routine immunization as well as preventive and reactive Supplementary Immunization Activities (SIAs), A total of 13 campaigns were organized in the country between 2014-2018, targeting at least 4.5 million children under five years old. Efforts need to be sustained to move towards global polio eradication, as well as the continued commitment of partners to the global agenda of the government. In addition to strengthening routine immunization, additional polio immunization activities will continue, as will the strengthening of acute flaccid paralysis surveillance with specific attention to hard to reach, unsecured and poor performing areas at a subnational level.

Professor Noëline Ravelomanana, President of the National Polio Certification Committee, who has been fully involved in the process for several years, presented the documentation of the country, and coordinated the whole team of Madagascar.

Request for Proposal

Request for Proposal (RFP) to develop a generic guideline to establish and strengthen national Inter-agency Coordination Committees (ICC) in the WHO African Region

The purpose of this Request for Proposals (RFP) is to enter into a contractual agreement with a successful bidder and select a suitable contractor to carry out the following work: a value proposition of a generic guideline to establish and strengthen national Interagency Coordination Committees (ICC) in the WHO African Region.

WHO is an Organization that is dependent on the budgetary and extra-budgetary contributions it receives for the implementation of its activities. Bidders are, therefore, requested to propose the best and most cost-effective solution to meet WHO requirements, while ensuring a high level of service.

Further information are available at this link.

Proposals should be submitted until 15 July 2018 (attention, in the RFP document it is mentioned 15 June but an extension was approved until 15 July 2018) by email.
Past Meetings/Workshops

Gavi Health Systems Strengthening focal points and partners meeting

Allison Corsi, WHO Headquarters

Location: Geneva, Switzerland
Date: 26-27 February 2018

Participants: The World Health Organization (WHO) Health Systems Strengthening (HSS) Regional and Country Focal Points, WHO HQ, the Gavi Secretariat, The Global Fund and UNICEF.

Purpose:
(i) Learn about WHO Regional and Global Health System Strengthening (HSS) strategies, and how these link to Gavi and Global Fund investments
(ii) Share Regional HSS practices and innovations
(iii) Participate in a Marketplace to discuss and prioritize issues for WHO’s engagement with member states and partners
(iv) Develop country roadmaps with events and priority areas linked to meeting discussions and the marketplace. The goal was to develop a common understanding of the challenges and technical support needed to meet and sustain national coverage and equity targets.

Details:
This multifaceted meeting allowed participants to share knowledge, discuss successes and challenges, and strategize processes forward to increase the effectiveness of designing and implementing Gavi Alliance and other donor HSS-grant initiatives. The experience and lessons learnt from the WHO Regional perspectives added context and operational guidance to what is working in countries, and what are the implementation barriers. Partners’ presentations advised on application updates, programme results and strategic visions. An interactive Marketplace comprised of seven technical forums focused on key areas of HSS and Gavi strategies and facilitated ideas on innovations and bottlenecks.

HSS tools and strategies were reviewed, that can be used to increase the efficiency and sustainability of coverage, and enable the success of disease-specific programmes that are aligned with the National Health Strategy. Emergent topics included the need for greater partner coordination and collaboration on HSS support in countries; importance of integration of vertical services; mobilizing evidence and political will to support greater domestic financing; capturing quality data on marginalized populations; and much greater engagement of HSS experts and senior health authorities to build financial and programmatic capacities and sustainability. This information and the steps forward will be shared in the workshop report.
Immunization Data: Evidence for Action Workshop

Hallie Goertz, Tara Newton, Allison Osterman, Jessica Shearer and Laurie Werner, PATH; Marcela Contreras, Elsy Dumit Bechara, Robin Mowson, Martha Velandia, PAHO

Location: Washington, DC, USA

Date: 16-17 May 2018

Participants: Twenty-three participants including government representatives from four countries (Grenada, Uganda, Vietnam, Zambia), BMGF, Brown Consulting, CDC, Gavi, IVAC, JSI, PATH, PAHO, SAGE Data Quality Working Group, Shifo, UNICEF, WHO

Purpose: The Immunization Data: Evidence for Action (IDEA) project was designed to collect, synthesize, frame and share evidence-informed learnings and best practices around the improvement of data quality and use to improve immunization outcomes. The workshop objectives were to discuss research evidence and lessons from promising projects on what works to improve immunization data quality and use, identify potential implementation considerations for the evidence, and distill the evidence into practical and usable learnings tailored to support target audiences in taking action to improve data quality and use.

Details: Leading up to the workshop, PATH and PAHO reviewed over 370 unique documents from published and grey literature on what works to improve data quality and use to improve immunization outcomes. The review was guided by a theory of change that outlined the mechanisms that are considered key facilitators of data use in decision-making for immunization programmes. Findings from research evidence and lessons from promising projects were summarized in a draft report and evidence gap map, and shared with workshop participants prior to the workshop.

The workshop included focused discussions on evidence-based practices that have been shown to improve immunization data quality and use. We received valuable feedback on how to prioritize findings, which findings are most important to specific audiences, and where gaps in the evidence base still exist. The workshop concluded with attendees making a commitment to further this work by providing direct feedback on the report, sharing learnings, and providing access to additional resources.

The research team is reviewing additional literature to inform the findings, then will finalize and publish the report. Meanwhile, outputs from the workshop are being used to develop a strategy to synthesize and disseminate the findings from the report through various communication channels.
Global Urban Immunization Working Group Meeting

Rachel Belt, Pascal Bijleveld, Mathilde de Calan, Alex de Jonquieres, Hamadou Dicko, Jean-Charles Dubourg, Homero Hernandez, Marina Madeo, Ricard Monte, Cyril Nogier, Karian Sagar, Hani Launcha, Katja Schemionek and Raiswana Soundarje, Gavi the Vaccine Alliance; Richard Duncan, Godwin Mindra and Michelle Seidel, UNICEF; Blanche-Philomene Anya, Jhilmil Bahl, Shalini Desai and Jan Grevendonk, WHO; Craig Burgess, Iqbal Hossain, Folake Olayinka, JSI; Tim Crocker-Buque and Sandra Mounier-Jack, LSHTM; Bhupendra Tripathi, BMGF; Aaron Wallace and Brent Wolff, CDC

Location: Geneva, Switzerland

Date: 17-18 May 2018

Participants: Experts in various aspects of immunization programming and health system strengthening from GAVI, UNICEF, WHO AFRO and HQ, Jhilmil Bahl, Tim Crocker-Buque and Sandra Mounier-Jack, LSHTM; Bhupendra Tripathi, BMGF; Aaron Wallace and Brent Wolff, CDC participated in the meeting.

Purpose: The Urban Immunization Working Group was constituted in January 2017 to coordinate efforts of immunization partners including academia to improve immunization outcomes in urban areas especially in slum environments. This working group meeting was themed around data and aimed to develop tailored approaches to improve access to vaccines in urban areas, particularly in urban poor environments and to identify and leverage partnerships in urban areas to improve immunization outcomes, recognize opportunities in immunization supply chain to address inequities affecting urban poor populations and inform Gavi investments in countries to improve immunization outcomes.

Details: During the meeting, participants discussed the need to identify and prioritize an approach to reach every child in urban areas, especially in slum environments, with the aim to improve immunization coverage and equity and reduce the risk of disease outbreaks in urban areas.

The working group has developed a tool kit to complement existing immunization guidelines during planning, implementation and monitoring of immunization services in urban areas, targeting urban poor communities. The urban immunization tool kit is for all stakeholders involved in immunization programming, including community members, and is based on the following pillars;

- Planning, political will, coordination and management of resources
- Reaching all eligible populations
- Engaging with communities
- Monitoring and using data for action
- Supportive supervision
- Planning, coordination and management of resources

Below are a few recommendations from the working group meeting:

- Explore and improve the use of data systems to highlight immunization disparities in urban areas
- In country dialogue and planning, including in the development of applications for Gavi-support, identify opportunities (such as EPI reviews, Joint Appraisals, the development of new applications and in the planning for technical assistance etc.) for integrating the urban lens during in-country discussions, to improve planning and programming for immunization coverage and equity
- Disseminate urban immunization tool kit during Reaching Every District (RED) strategy rollout in East and Southern Africa region
- Use supply chain initiatives such as Gavi’s Cold Chain Equipment Optimization Platform (CCEOP) to improve immunization coverage and equity in urban areas
- Continue to refine and develop diagnostic and data collection tools for urban environments, regularly incorporating lessons learned
Expanded Programme on Immunization (EPI) Quarter One 2018 review meeting: Liberia

Pharm. Adolphus Trokon Clarke, Expanded Programme on Immunization, Ministry of Health, Republic of Liberia

Location: Buchanan, Grand Bassa County, Liberia

Date: 30 May – 2 June 2018

Participants: The participants came from the 15 political sub-divisions (counties) of Liberia, included but not limited to:
1. All County Health Officers, Community Health Department Directors and Child Survival Focal Persons from the 15 counties;
2. Directors (e.g. M&E, Community Health, County Health Services, Division of Infectious Disease Epidemiology, etc.) from MOH & NPHIL;

Purpose:
• To review immunization (routine & mass campaign) performances for all counties.
• Re-emphasize the importance of supportive supervision, monitoring and use of data for action (i.e. decision making).
• To identify immunization challenges/bottlenecks in relation to coverage and equity at all levels using information for actions.
• Re-emphasize the importance of fostering the culture of coordination and collaboration at all levels in improving immunization outcomes.
• To adapt a new approach for the implementation of Outreach and PIRI using a newly developed tools.

Details:
The EPI quarter one review meeting brought together participants from all spectra of the country (i.e. County Health Teams, Central MoH, National Legislature and Partners) to discuss issues relative to immunization.

After four days of interactive discussions on immunization from 30 May - 2 June 2018 during which time all counties presented on the quarterly performance in a structured and standardized manner, it was observed that seven (7) counties were identified as performing poorly or lagging behind when it comes to MCV1 coverage.

In order to clearly understand what were the drivers responsible for low MCV1 coverage and high dropout rates between Penta1 and MCV1, the participants were divided into three groups as indicated below:
• Group I: County Health Officers
• Group II: Community Health Directors & Child Survival Focal Persons
• Group III: Community Health Directors & Child Survival Focal Persons

The task of the group was to use the concept of strategic problem solving (SPS) to first define the problem, set objectives, do root-cause analysis, create alternative interventions and evaluate them, select the best intervention, develop both implementation and evaluation plan.

At the end of this exercise, three problems were identified:
• Low MCV1 coverage
• High dropout rate between Penta1 and MCV1
• About 70% of vaccinators not on government of Liberia payroll.

Lastly, applying the SPS concept it was agreed that the shared problem was low MCV1 coverage and as such all efforts are geared towards addressing this problem.

Detailed report on the outcome of the EPI Quarter one Review meeting will be shared in due course.
Resources

Publication of the 2017 Routine Immunization Data collected through the Joint Reporting Form

Here are some useful links that will help you find the data collected through the JRF process.
Main data page of the website.

Country profiles with a subset of the data collected in the JRF (and data from various other sources).

Immunization indicators selection. Also available in excel.

National Immunization schedule reported for 2017. Also available in excel.
You can also access an excel spreadsheets with status & year of introduction from this page.
(this year we added a page for the DTP containing vaccines booster dose).

Immunization schedule by disease selection page.

Information on Home base records are available.

Coverage time series page: (reported country official estimates). Also available in excel.

Administrative coverage data. For the HPV administrative data, please access it from this page.
Note that the subnational coverage data needs some more management and analysis and will be published on 15 July 2018.

Reported cases time series of selected vaccine presentable diseases. Also available in excel.
This data is currently being analysed and queries are being sent to the countries. Another update is schedule on 15 July 2018.

As usual do not hesitate at reporting to us any data error you might see.

Training modules for healthcare workers on pneumococcal disease and PCV10 new four-dose vial presentation – now available in English and French

Carine Dochez, Network for Education and Support in Immunization (NESI)/University of Antwerp, Belgium and Jhilmil Bahl, World Health Organization, Headquarters

Presently used Pneumococcal Conjugate Vaccines (PCV) in national immunization programmes include PCV10 and PCV13. Both vaccines are highly effective and protect against severe forms of pneumococcal disease, such as meningitis, pneumonia and bacteræmia.

PCV10 presentations currently in use, include a single and two-dose vial without preservative. Recently a new presentation of PCV10 has been developed, a four-dose vial with preservative. When countries start using the new four-dose presentation, healthcare workers need to be trained on the correct use of this new presentation, including the use and handling of PCV10 multi-dose vials in accordance with WHO multi-dose vial policy.

To facilitate this process, NESI/University of Antwerp in collaboration with WHO/HQ, developed training modules on pneumococcal disease and PCV10 new multi-dose vial presentation. The training consists of seven modules, with a total duration of approximately three hours. Any country switching from the PCV10 single or two-dose vial to the four-dose vial can use the training modules to prepare for the switch.

The training modules are available in English and French:

| Module 1: Pre-test questions/Questions de test préliminaires |
| Module 2: Key facts on pneumococcal disease/Données essentielles sur les pneumococcies |
| Module 3: Key facts on pneumococcal vaccine/Données essentielles sur le vaccin antipneumococcique |
| Module 4: Storage and handling of PCV10 4-dose vial/Conservation et manipulation des flacons de 4 doses de PCV10 |
| Module 5: Organising an immunisation session with PCV10 4-dose vial/Organiser une séance de vaccination avec un flacon de 4 doses de PCV10 |
| Module 6: Communication with caregivers on pneumococcal disease and vaccine/Communication avec les accompagnants sur la pneumococcie et le vaccin |
| Module 7: Post-test questions/Question de post-test |
## Calendar

### July
- **10-12** Immunization Practices Advisory Committee (IPAC) Annual Meeting<br>Geneva, Switzerland
- **16-20** SEARO ITAG & EPI Managers’ meeting<br>New Delhi, India
- **16-20** AFRO West and Central Sub-Regional Working Group meeting<br>TBD
- **17-19** Gavi ATT Sustainability meeting<br>New York, USA
- **25** Global Coordinating Committee of Regional Measles and Rubella Verification Commissions<br>Geneva, Switzerland
- **26-27** MRI Partner meeting<br>Geneva, Switzerland
- **29 Jul-1 Aug** Third Meeting of the South-East Asia Regional Verification Commission for Measles Elimination and Rubella/CRS Control (SEA-RVC)<br>Kathmandu, Nepal

### August
- **21-22** Japanese Encephalitis Control, the Final Mile at The Bill & Melinda Gates Foundation<br>Seattle, USA
- **27-29** 13th International Rotavirus Symposium<br>Minsk, Belarus

### September
- **10-11** 3rd Gavi Vaccine Investment Strategy (VIS) meeting<br>Geneva, Switzerland
- **25-28** AFRO West and Central EPI Managers’ meeting<br>Abidjan, Cote d’Ivoire

### October
- **8-12** WHO & UNICEF Meeting on Monitoring National Immunization Systems<br>Budapest, Hungary
- **15-19** Fifth Annual MenAfriNet Partners’ meeting<br>Dakar, Senegal
- **23-25** Strategic Advisory Group of Experts (SAGE) on Immunization<br>Geneva, Switzerland

### November
- **26-30** Global Rotavirus and Pediatric Diarrhea and Invasive Bacterial Disease Surveillance Meeting<br>South Africa

### December
- **5-6** Global Advisory Committee on Vaccine Safety<br>Geneva, Switzerland
- **6-7** Global NITAG Network meeting<br>Ottawa, Canada
- **11-12** SEARO/WPRO Bi-Regional Rotavirus meeting<br>Manila, Philippines
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
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
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