MALI INTRODUCED PNEUMOCOCCAL CONJUGATE VACCINE (PCV 13)
31/03/2011 from Crépin Hilaire DADJO, WHO/AFRO IST West

According to WHO estimates, Mali is among countries where the incidence rate of pneumococcal diseases in children under 5 years of age is very high. The prevention of pneumococcal diseases through vaccination is one of the three strategies recommended in the WHO/UNICEF Global Action Plan for Prevention and Control of Pneumonia (GAPP).

After a successful application to GAVI for support to introduce the PCV 13 into the routine immunization programme, Mali officially launched the introduction of the new vaccine on 15 March 2011 in Bamako. The ceremony was presided over by the Minister of Health, in the presence of WHO and UNICEF Representatives.

The set objective for the national authorities is to immunize at least 95% of children under 12 months. It is hoped that the vaccination coverage will improve and the Millenium Development Goals 4 and 5 will be soon met.

First Shot of PCV13 given by Dr Doctor Badra Aliou MACALOU, Minister of Health of Mali
Technical Information

GLOBAL MNTE PARTNER’S MEETING - 22-23 FEBRUARY 2011
31/03/2011 from the MNTE team, UNICEF New York

UNICEF and partners successfully convened a global MNTE meeting from 22-23 February 2011 in New York. The meeting participants included technical partners: UNICEF and WHO (Headquarters, Regional immunization/MNT Advisors) and country representatives - Nepal, Yemen and Somalia (via video link), UNFPA, USAID/ JSI, CDC, and financial partners: BD, Kiwanis International, P&G-Pampers, US Fund for UNICEF. Representatives from the Ministry of Health of Nepal were representing the national government.

The forum provided an opportunity for both technical and financial partners to reaffirm their commitment to the goal of global elimination of MNT by 2015. The global and regional progress on MNT elimination was presented in the meeting, and selected country presentations (Somalia and Yemen) highlighted on the challenges and opportunities in achieving MNT elimination goal. The key resolutions of the meeting included:

- The urgent need for partners to intensify fundraising efforts for timely and predictable funding for MNTE given the rising cost of vaccine delivery especially now that the focus is on reaching women in the hardest-to-reach and insecure areas (Afghanistan, Somalia etc) identified through the high risk approach.
- Technical partners proposed encouraging countries to switch from TT to Td in line with the WHO recommendation.
- The use of the MNTE data review process as a platform for integrated programme review of other MNH interventions.
- Supporting countries in exploring mechanisms for maintaining elimination through regular data review, promoting innovations in improving skilled attendance at birth (e.g. providing incentives to encourage women to deliver at facilities - the case of Nepal) and boosting school based TT immunization and other recommended interventions.

DELEGATES GATHER IN ETHIOPIA FOR WORLD’S FIRST CONFERENCE ON IMMUNIZATION FINANCING
31/03/2011 from Sandra Keller, SIF Sabin

From 28-29 March 2011, the Sustainable Immunization Financing (SIF) Program, of the Sabin Vaccine Institute, hosted a colloquium which brought together over 100 ministers of health and finance, parliamentarians and other health financing experts to share best practices for achieving sustainable immunization financing in SIF’s 15 pilot countries (Cambodia, Cameroon, DR Congo, Ethiopia, Kenya, Liberia, Madagascar, Mali, Nepal, Nigeria, Rwanda, Senegal, Sierra Leone, Sri Lanka and Uganda).

The “First Sabin Vaccine Institute Colloquium on Sustainable Immunization Financing (SIF)” opened with remarks from Sabin’s Executive Vice President, Dr. Ciro de Quadros, and featured presentations from representatives of the World Health Organization, GAVI Alliance, Pan American Health Organization, and the World Bank.

Delegations representing each of SIF’s 15 pilot countries, as well as representatives from El Salvador, Bolivia and Colombia, offered first-hand accounts of the immunization financing landscape in their respective countries.

While vaccines represent an incredible tool for reducing mortality and morbidity rates, as well as improving education and economic indicators, the cost of fully immunizing a child with available vaccines is around US$30. Lower income countries finance less than 40% of their routine immunization programmes.

Sabin’s Sustainable Immunization Financing Program assists countries with finding ways to reduce partner dependence by increasing national immunization budgets and ensuring that the distribution of life-saving vaccines is not interrupted.

For more information on the colloquium visit, click here.
Technical Information

NEW VERSION OF CMYP COSTING AND FINANCING TOOL
31/03/2011 from Claudio Politi, WHO/HQ

The cMYP Costing and Financing Tool version 2.5 has been released.

The tool is designed to assist countries in developing and updating the comprehensive Multi-Year Plan for immunization. In particular, it helps to estimate past costs and financing of immunization, to make projections of costs and financing needs to achieve programme objectives and to analyse the corresponding financing gaps.

The new version of the tool includes:
- Updated vaccine prices provided by UNICEF Supply Division;
- Updated estimates of unit cost per infant for surveillance;
- Revised methods to estimate vaccine buffer stocks; and
- Revised section to calculate government co-financing of vaccine costs supported by GAVI.

English and French versions of the cMYP Costing and Financing Tool version 2.5 - with the related User Guide and cMYP Guidelines- are available on the WHO Immunization Financing website. For more information, please click here.

VIDEOS FOR USERS OF TECHNET21.ORG
31/03/2011 from the James Cheyne, PATH

The new TechNet21.org website has recently added a series of English and French video clips to help new users. Currently there are eight videos in English and one in French that vary in length from 21 minutes for the overview of the site to two minutes on how to submit a web link to TechNet21.
For the links to the tutorials, click here. You do not need to login to see the videos.
If the link does not work, simply go to TechNet21.org, put the cursor over the ‘Home’ tab at the top of the page and click ‘Tutorials’.

The full list of tutorials in English includes:
- Introduction and overview
- Network tutorial
- Link tutorial
- Forum tutorials
- Event manager tutorial
- Tools depot tutorial
- Document library tutorial
- Photo gallery tutorial

At present there is one French language tutorial that gives an introduction and overview of the site.

There are other instructions on how to use the site in the TechNet21 Forum. For example instructions on how to login to TechNet21.org can be seen by clicking on ‘Resources’, ‘Forum’, ‘Login and registration’ (at the bottom of the page), ‘How do I login?’
Technical Information

New Publications

THE IMMUNOLOGICAL BASIS FOR IMMUNIZATION SERIES: MODULE 17: RABIES
(ISBN 978 92 4 150108 8)

This IVB document is now online. The main purpose of the modules of the series - which are published as separate/vaccine specific modules - is to give immunization managers and vaccination professionals a brief and easily-understood overview of the scientific basis of vaccination. This module focuses on Rabies.

SUSTAINING THE USE OF GAVI-SUPPORTED VACCINE IN RESOURCE-POOR COUNTRIES
31/03/2011 from Patrick Zuber, WHO/HQ

This document is now available online. Since 2000, GAVI provided essential support for an unprecedented increase in the use of hepatitis B (HepB) and Haemophilus influenzae type b (Hib) containing vaccines in resource poor countries. This increase was supported with significant funding from international donors, intended to be time-limited. To assess the sustainability of this important expansion of the global access to vaccines, supply chains, financial resources for procurement and decision-making in countries that introduced hepatitis B or Hib vaccines with GAVI support were reviewed. During the period studied, the types of vaccine products supplied fluctuated rapidly in relationship with the number of suppliers and availability of more combination products. The price of the cheaper vaccines decreased while that of pentavalent DTwP-HepB-Hib remained stable. In average, vaccine introduction was associated with an increase of national programs budget, with new vaccines representing more than half of that increase, while the part of GAVI contributions to the budget went from 25\% to 46\%. Less than 20\% of the vaccine introductions were decided by a national advisory body. Strengthening supply chains, adjusting funding schemes and increasing national ownership will be key to the sustained use of hepatitis B and Hib vaccines, and the eventual addition of other important vaccines where they are the most needed.

Country Information by Region

AFRICAN REGION

ANNUAL EPI MANAGERS’ MEETING FOR CENTRAL AFRICA
31/03/2011 from Auguste Ambendet, WHO/AFRO IST Central

This meeting took place on 2-3 March 2011 in Libreville, Gabon. Delegations from Angola, Burundi, Cameroon, the Central African Republic, Chad, Congo, the Democratic Republic of the Congo (DRC), Equatorial Guinea, Gabon, and Sao Tome and Principe were composed of EPI directors and EPI focal points from WHO and UNICEF, as well as other collaborators.

This meeting was co-organized by WHO/HQ and UNICEF/WCARO. Other partners, such as GAVI Secretariat, RotaryInternational, CDC, the Maternal and Child Health Integrated programme (MCHIP) and USAID DELIVER from USAID, the Coordination Organization for the Fight Against Endemic Diseases in Central Africa (OCEAC) and the Sabine Vaccine Institute also took part in this meeting. For the third time, the members of the Task Force on Immunization (TFI) also participated in this meeting.

The meeting consisted of three sessions:
- The Initiative for Polio Eradication;
- The accelerated control of diseases (Measles and maternal and neonatal tetanus);
- Reaching all target groups through routine immunization.

Special attention was given to Angola, Chad and DR Congo. These three countries were chosen due to the persistent circulation of the wild polio virus and to the large number of non-vaccinated children. A special meeting was organized with these countries to help them better refine the strategies in preparation for interrupting the circulation of the poliovirus by end December 2011.
Country Information by Region

AFRICAN REGION

SUB-REGIONAL WORKING GROUP FOR CENTRAL AFRICA
31/03/2011 from Auguste Ambendet, WHO/AFRO IST Central

This working group's first meeting for the year took place in Libreville, Gabon, from 4-5 March 2011. This meeting was held after the annual EPI managers' meeting mentioned above, and attended by WHO (HQ, Regional Office, AFRO IST Central and West), UNICEF/WCARO, GAVI Secretariat, AMP, the Coordination Organization for the Fight Against Endemic Diseases in Central Africa (OCEAC), the Sabin Vaccine Institute, and EPI managers from Angola, Chad and Congo.

The main objective of the meeting was to agree on the appropriate strategies for country support, in particular for reducing the number of unvaccinated children, introducing new vaccines and financial sustainability. A support plan to countries concerned was elaborated and executed immediately, taking into account the deadline for submission to GAVI Alliance for support for new vaccines. A peer review of the draft submissions is also planned from 4-9 April 2011 in Dakar, Senegal for the West African countries, and from 11-16 April 2011 in Douala, Cameroon for the Central African countries.

ANNUAL EPI MANAGERS’ MEETING FOR WEST AFRICA PROMOTES AFRICAN VACCINATION WEEK
31/03/2011 from Crépin Hilaire DADJO, WHO/AFRO IST West

EPI Programme Managers from countries of the West African subregion met in Ouagadougou, Burkina Faso, from 22-23 February 2011 to review the progress made in the implementation of regional priorities set in 2010 in the control of vaccine-preventable diseases. The second objective consisted of making recommendations and action points to address identified gaps.

Under particular scrutiny were the status of achievement of the Polio milestones 1 and 3 as contained in the Global Polio Eradiction Strategic Plan 2010-2013, the reduction by 50% of the un-immunized and under-immunized children in the subregion, the control of the major vaccine preventable diseases including measles, yellow fever, meningitis and the challenge of maintaining high quality of immunization monitoring and surveillance data. This year, participants were in agreement concerning the need to shift focus from communication for campaigns to sustained communication for routine immunization in their national programmes.

To sustain the gains made in polio eradication and the control of other vaccine-preventable diseases, as well as the strengthening of the national immunization systems, the institution of the African Vaccination Week (AVW) has been announced. This Week will be commemorated for the first time this year, and will take place jointly with three other WHO regions during the last week of April 2011. Member States of the WHO African Region through their Health Ministers had adopted the institutionalization of an annual African Vaccination Week with the aim of sustaining advocacy for immunization, expanding community participation and improving immunization service delivery during the 60th session of the WHO Regional Committee for Africa in September 2010 (AFR/RC60/14).

"MOVING WAREHOUSE" UP-AND-RUNNING IN SENEGAL
31/03/2011 from Alison Brunier, WHO/HQ

A month after the first deliveries of its new “moving warehouse”, health officials in Senegal's Saint Louis district are excited about the prospect of huge efficiency gains in the supply of vaccines and medicines to health centres. "It is still early days", said Dr Mamadou Diop, the Regional Medical Officer, "but it is already clear that this integrated system will help us meet demand for vaccines and medicines much more quickly and efficiently than we have in the past."

Full story
AFRICA

MATERNAL AND NEONATAL TETANUS ELIMINATION ACHIEVED IN UGANDA
31/03/2011 from Jacinta Sabiti and Amos Odiit, MoH Uganda and Annet Kisakye, WHO/Uganda

Since 2002, the Ugandan Ministry of Health embarked on a number of key strategies to eliminate maternal and neonatal tetanus. As a result several achievements were attained, among which are a high TT vaccination coverage through TT SIAs and a low number of reported neonatal tetanus (NT) cases.

In May 2010 a pre-validation assessment was done using district-level data and results showed that Kibaale district had the highest risk for maternal and neonatal tetanus (MNT). In February 2011 a validation survey was done to confirm whether MNT had been eliminated in Uganda following the programmatic successes observed. A community–based NT mortality survey using a protocol combining lot quality assurance and cluster sampling survey methodology (LQA-CS) was used. One thousand four hundred and sixty one (1,461) live births were surveyed out of which 33 neonatal deaths were detected. It was established that none of these was caused by tetanus, thus confirming MNT Elimination in Kibaale district. A subset of 324 mothers of eligible live births was surveyed for supplemental information, and of these 40% delivered in a health facility; 70% applied substances/remedies on the umbilical cord and 77% had received at least 2 TT doses by card and history.

Conclusion: Kibaale district was purposely selected as the "highest-risk" district for MNT in Uganda. If MNT elimination had been demonstrated in Kibaale, the other, better performing districts are also considered as having eliminated MNT. MNT is therefore not a public health problem in Uganda at the time of the survey. The high TT2+ coverage estimate obtained in the survey corroborates the high reported coverage from the TT SIAs. However, a high proportion of unclean deliveries is taking place in the district and a high proportion of mothers is still applying high risk traditional substances including herbs, ashes and animal dung on the umbilical stump.

Recommendations for sustaining MNT elimination in Uganda include maintaining and increasing high levels of routine immunization of pregnant and non-pregnant women of child bearing age, increase the percentage of clean deliveries and proper cord care and strengthening an active surveillance system for NT.

AMERICAS

VACCINE STOCK SUPPLIES MANAGEMENT (VSSM) EVALUATION IN PARAGUAY
31/03/2011 from Nora Lucia Rodriguez, WHO/PAHO

Between 7-11 March 2011, the Ministry of Health of Paraguay, in collaboration with PAHO and WHO, conducted an evaluation of a pilot project to improve vaccine management using WHO’s Vaccine Stock Supplies Management Software (VSSM). VSSM is a MS Access-based software to be used for managing vaccine inventory at storage facilities. Paraguay implemented the VSSM at the national vaccine warehouse in May 2010 and five regional warehouses in July 2010.

The evaluation had the following objectives: 1) determine the usefulness of VSSM for decision-making in warehouse operations, 2) evaluate the impact of using the VSSM in warehouse operations, and 3) document the experience and difficulties related to the use of the software. The teams visited the national warehouse and warehouses in four regions. Evaluation teams interviewed staff and observed the use of the software. The evaluation included comparing physical stocks against the VSSM stock reports.

The evaluation demonstrated that the personnel at the vaccine warehouses were proficient in the use of the VSSM and its reports. The personnel interviewed considered VSSM to be very useful, effective, and reliable for managing warehouse operations, highlighting that one database contained all data needed to make decisions in real-time. Users stated that using VSSM has resulted in improvements in warehouses operations, i.e., reception, storage, and distribution of vaccines and other injection supplies. No difficulties with the use of the software were reported. The Ministry of Health of Paraguay has decided to implement the VSSM nationwide.

Of the four countries pilot testing the VSSM in the Americas, Paraguay is the first to evaluate the usefulness of this tool developed by WHO.
Country Information by Region

AMERICAS

IMPROVING IMMUNIZATION SERVICES IN HAITI: PARTNER SUPPORT MEETING
31/03/2011 from Carolina Danovaro, WHO/PAHO

On 8-9 March 2011, the Pan American Health Organization (PAHO) hosted a meeting for immunization partners to discuss how to best support Haiti’s immunization plan of action 2011-2015. Participants included representatives from Haiti’s Ministry of Public Health, PAHO, UNICEF, the US Centers for Disease Control and Prevention, Canadian International Development Agency (CIDA), the United States Agency for International Development (USAID), and other partners.

The new multi-year strategic plan for Haiti aims to improve vaccination coverage and vaccine management, maintain the country free of polio, measles, and rubella, eliminate neonatal tetanus, and introduce new vaccines with the help of numerous donors and partners. It covers routine vaccination, epidemiological surveillance, social mobilization and communication, training and management from 2011 through 2015, with detailed costs and plans for inclusion of pentavalent (DTP-Hib-Hep B) and other new vaccines.

Dr. Ciro de Quadros of the Sabin Vaccine Institute, who chaired the meeting, said, “This plan shows the great work being done on immunization and the strong commitment to improve immunization services, and the international community backs the plan in Haiti.”

Haiti’s health officials are working with PAHO and partners to refine the new strategies and detail the vaccination plans, as well as to ensure it is funded and can be sustained for the next five years. Country ownership and the coordination of all the actors involved were discussed as key elements for the success of the plan. Equity was clearly identified as the overarching principle of the plan.

“We hope to start this multi-year immunization plan as soon as possible in order to save lives and protect Haitians,” said Dr. Ariel Henry of Haiti’s health ministry.

MEETING OF THE INTERNATIONAL EXPERT COMMITTEE AND NATIONAL/ SUBREGIONAL COMMISSIONS FOR DOCUMENTING MEASLES, RUBELLA, AND CRS ELIMINATION IN THE AMERICAS
31/03/2011 from Pamela Bravo and Christina Marsigli, WHO/PAHO

From 21-22 March 2011, this meeting was convened at PAHO Headquarters in Washington D.C., to review the process and the timeline for the implementation of activities to complete the documentation and verification process; as well as to provide sound recommendations to the commissions in the implementation of the process at the country level.

The progress made by PAHO’s Member States toward the goals of measles, rubella, and CRS elimination is remarkable. Thirty-four countries and France, the Netherlands, and UK territories in the Caribbean have established national or sub-regional commissions, while an additional number of countries have either completed their field work and/or reports. The remaining countries committed to submit their final reports to the IEC by December 2011, in order for the IEC to verify the regional achievement of elimination and present a report to the Pan American Sanitary Conference in 2012.

PAHO technical support will be available for countries, with a focus on strengthening measles, rubella and CRS surveillance systems in order to provide strong evidence for the interruption of endemic measles and rubella in their countries. In addition, countries were encouraged to strengthen the coherence between epidemiology and the laboratory and to document the occurrence of the last endemic CRS case, implementing retrospective CRS case searches if necessary.
Country Information by Region

EASTERN MEDITERRANEAN

PREPARATION FOR VACCINATION WEEK IN WHO EMR
31/03/2011 from Nahad Sadrazodi, TO, VPI/DCD, WHO EMRO

In less than one month, the WHO Eastern Mediterranean Region will be celebrating the second Vaccination Week in the Eastern Mediterranean during 24 – 30 April 2011. Great progress has been made thus far, under very tenuous circumstances.

The Regional Office has provided the essential Tools (Framework, Guide, Background paper, Summary sheet), Training (2011 VWEM Briefing, Communicating with Media), and Design Solutions and Promotional Materials (visual identity, representations, key messages, Regional Director’s message and video). Moreover, preparations are underway for the Regional Launching Ceremony which is scheduled to take place at the WHO Regional Office in Cairo, Egypt.

Furthermore, countries are continuing to improve their action plans and adapt the design solutions to fit their local context and priorities. Importantly, they are taking into account several key considerations: ensuring that the theme “partnership for immunization” is reflected in the national plan of action and promotional materials; target audiences are clearly defined; there is a plan for evaluating the proposed activities and their outcomes; and the media (TV, radio, internet, print, etc) are well engaged in this initiative.

EMR GAVI CORE REGIONAL WORKING GROUP MEETING
31/03/2011 from Irtaza Ahmad Chaudhri, TO, VPI/DCD, WHO EMRO

The EMR GAVI Core Regional Working Group (RWG) meeting will be held at WHO regional office for Eastern Mediterranean, Cairo, Egypt from 11-13 April 2011. The objective of the meeting is to review the draft GAVI Annual Progress Reports (APRs) 2010 from the EMR countries, and provide them with feedback before the final submission to the GAVI Secretariat. The meeting will be attended by representatives from WHO HQ, GAVI Secretariat, UNICEF ROs, as well as staff from WHO EMRO VPI and HSS. This review process in the recent years has provided valuable feedback to the countries enabling them to submit high quality APRs, thus ensuring uninterrupted GAVI support.

WESTERN PACIFIC REGION

CHINESE NATIONAL REGULATORY AUTHORITY MEETS INTERNATIONAL STANDARDS
31/03/2011 from Alison Brunier, WHO/HQ

A WHO-led team concluded on 1 March 2011, at the end of a comprehensive review by experts from six countries, that the national regulatory authority of China, the State Food and Drug Administration (SFDA), and affiliated institutions, meets WHO indicators for a functional vaccine regulatory system. With a regulatory system for vaccines documented to comply with international standards, vaccine manufacturers in China are now eligible to apply for WHO prequalification of specific products. It is expected that vaccines from China could be pre-qualified 1-2 years from now. The eventual ability of United Nations procuring agencies to source vaccines from Chinese manufacturers is expected to have a significant, beneficial impact on global supply of vaccines of assured quality.

Full story

HSS= Health Systems Strengthening; IST = Inter Country Support Team; ISS = Immunization Services Support; INS = Injection Safety Support; NVS = New Vaccine Support; DQA = Data Quality Audit; DQS = Data Quality Self Assessment; RED = Reach Every District; cMYP = Fully costed multi-year plan; NITAG = National Immunization Technical Advisory Group; NRA = National Regulatory Authority

Professor Ali Rezza Esteghamati and Dr Patrick Zuber acknowledged by Shanghai Food and Drug Administration Director for their review and advice of the municipal vaccine adverse event monitoring system.

Credit: WHO
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<th>Title of Meeting</th>
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<th>Location</th>
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<td>SEAR Immunization Technical Advisory Group meeting</td>
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<td>Bi-regional NRA Forum collaboration with HQ</td>
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<td>PAHO’s ProVac Initiative International Working Group Meeting to implement the ProVac tools and methodologies in other Regions</td>
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<td>AFRO E&amp;S Workshop to finalize GAVI Applications</td>
<td>18-Apr</td>
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<td>EURO regional meeting for EPI Managers from GAVI eligible countries</td>
<td>April</td>
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<td>PAHO/SIREVA II Workshop on the diagnostic and characterization of <em>Streptococcus pneumoniae</em>, <em>Haemophilus influenza</em> and <em>Neisseria meningitidis</em> to strengthen epidemiological surveillance of bacterial pneumonia and meningitis</td>
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<td>Paraguay and Ecuador</td>
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<td>Second African workshop on Coordinated approaches to pneumonia and diarrhoea prevention and Control</td>
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<td>Fifth Bi-regional Meeting on Japanese Encephalitis Prevention and Control and JE Labnet Meeting</td>
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<td>International consultation of experts: NRA process and indicators, revision and update</td>
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<td>WHO Global Meeting on Implementing New and Under-utilized Vaccines</td>
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<td>PAHO</td>
<td>PAHO Technical Advisory Group on Vaccine-preventable Diseases (TAG)</td>
<td>06-Jul</td>
<td>08-Jul</td>
<td>Buenos Aires, Argentina</td>
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<tr>
<td>Global</td>
<td>GAVI Board Meeting</td>
<td>07-Jul</td>
<td>08-Jul</td>
<td>Geneva, Switzerland</td>
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<tr>
<td>SEARO</td>
<td>SEARO EPI Managers’ meeting</td>
<td>26-Jul</td>
<td>28-Jul</td>
<td>New Delhi, India</td>
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<tr>
<td>AFRO</td>
<td>AFRO West and Central Africa Sub Regional Working Group Meeting</td>
<td>July</td>
<td>July</td>
<td>Abuja/Accra</td>
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<tr>
<td>WPRO</td>
<td>20th Meeting of the WPR Technical Advisory Group (TAG) on Immunization &amp; Vaccine Preventable Diseases</td>
<td>03-Aug</td>
<td>06-Aug</td>
<td>Philippines</td>
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<tr>
<td>WPRO</td>
<td>Pacific Immunization Programme Strengthening Workshops (PIPS)</td>
<td>22-Aug</td>
<td>27-Aug</td>
<td>Fiji</td>
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<tr>
<td>WPRO</td>
<td>Subregional Certification Commission (SRCC)</td>
<td>22-Aug</td>
<td>27-Aug</td>
<td>Fiji</td>
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<tr>
<td>WPRO</td>
<td>Third Meeting on Vaccine Preventable Disease Laboratory Networks in the Western Pacific Region</td>
<td>29-Aug</td>
<td>02-Sep</td>
<td>Philippines</td>
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<tr>
<td>WPRO</td>
<td>Regional Verification Committee for Measles Elimination</td>
<td>12-Sep</td>
<td>13-Sep</td>
<td>Philippines</td>
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<td>Global</td>
<td>Global IBD Surveillance Meeting</td>
<td>12-Sep</td>
<td>14-Sep</td>
<td>Geneva, Switzerland</td>
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<td>Global</td>
<td>Global Measles/Rubella and Polio Labnet Meeting-HQ</td>
<td>12-Sep</td>
<td>16-Sep</td>
<td>Geneva, Switzerland</td>
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<td>PAHO</td>
<td>Measles Initiative Annual Meeting</td>
<td>13-Sep</td>
<td>14-Sep</td>
<td>Washington, D.C., USA</td>
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<td>SEARO</td>
<td>Bi-regional Regional Working Reference Standards (RWRS) workshop</td>
<td>13-Sep</td>
<td>15-Sep</td>
<td>Goa</td>
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<tr>
<td>EURO</td>
<td>Regional workshop on rotavirus for health care professionals and medical academicians</td>
<td>19-Sep</td>
<td>20-Sep</td>
<td>Yerevan, Armenia</td>
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<tr>
<td>Global</td>
<td>GAVI Programme &amp; Policy Committee</td>
<td>Sep</td>
<td>Sep</td>
<td>TBD</td>
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<tr>
<td>AFRO</td>
<td>AFRO West and Central Africa Sub Regional Working Group Workshop</td>
<td>Oct/Nov</td>
<td>Oct/Nov</td>
<td>Kinshasa, DRC</td>
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<tr>
<td>Global</td>
<td>SAGE Meeting</td>
<td>08-Nov</td>
<td>10-Nov</td>
<td>Geneva, Switzerland</td>
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<td>WPRO</td>
<td>Regional Commission for the Certification of Poliomyelitis Eradication in the Western Pacific Region</td>
<td>14-Nov</td>
<td>18-Nov</td>
<td>Viet Nam</td>
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<tr>
<td>EURO</td>
<td>Regional workshop for MICs on economical evaluations of new vaccines</td>
<td>Nov</td>
<td>Nov</td>
<td>TBD</td>
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<tr>
<td>PAHO</td>
<td>PAHO Regional New Vaccines Meeting</td>
<td>Nov</td>
<td>Nov</td>
<td>Washington, D.C., USA</td>
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<tr>
<td>Global</td>
<td>GAVI Board Meeting</td>
<td>Dec</td>
<td>Dec</td>
<td>TBD</td>
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# Links Relevant to Immunization

## Global Websites

- Department of Immunization, Vaccines & Biologicals, World Health Organization
- WHO New Vaccines
- Immunization Financing
- Immunization Monitoring
- Agence de Médecine Préventive
- EPIVAC
- GAVI Alliance Website
- IMMUNIZATION basics (JSI)
- International Vaccine Institute
- PATH Vaccine Resource Library
- Pediatric Dengue Vaccine Initiative
- SABIN Sustainable Immunization Financing
- SIVAC Program Website
- UNICEF Supply Division Website
- Hib Initiative Website
- Japanese Encephalitis Resources
- Malaria Vaccine Initiative
- Measles Initiative
- Meningitis Vaccine Project
- Multinational Influenza Seasonal Mortality Study (MISMS)
- RotaADIP
- RHO Cervical Cancer (HPV Vaccine)
- WHO/ICO Information Center on HPV and Cervical Cancer
- SIGN Updates
- Technet
- Vaccine Information Management System
- PneumoAction

## Regional Websites

- New Vaccines in AFRO
- PAHO's website for Immunization
- Vaccine Preventable Diseases in EURO
- New Vaccines in SEARO
- Immunization in WPRO

## Newsletters

- PAHO/Comprehensive Family Immunization Program-FCH: Immunization Newsletter

Produced by WHO, in collaboration with UNICEF and the GAVI Alliance: