



GLOBAL IMMUNIZATION NEWS

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28 September 2005

TECHNICAL INFORMATION

CAPACITY BUILDING & TRAINING

28/09/05 from Jhilmil Bahl, WHO/HQ: The Training Partnership meeting is scheduled for 10-11 October 2005 in Geneva, Switzerland. The main objectives of the meeting are to:

- Identify partners' involvement in capacity building activities needed to implement GIVS.
- Update on partner training activities in 2004-2005 and lessons learnt on conducting training needs assessment, evaluation and distance learning.
- Gain partner feedback on draft MLM modules.
- Develop a plan for finalizing and testing MLM modules and discuss partner support.
- Identify areas of collaboration on training activities.

Partners who have been coming to the past meetings will receive invitations shortly. Others who wish to participate, please contact Jhilmil Bahl (bahlj@who.int).

28/09/05 from Evariste Mutabaruka, WHO/AFRO: The following activities are planned for capacity building and training in AFRO for the second semester of 2005:

- Finalization of the 2000-2004 MLM Training Evaluation.
- Preparation of EPI curriculum prototypes for medical and nursing schools.
- Preparation of AFRO Capacity Building strategy and Plan of Action for 2006-2009.
- Preparation/Participation in 2005 Task Force on Immunization in Africa.

28/09/05 from Diana Chang Blanc, WHO/HQ: As part of the WHO Global Training Network (GTN), the 3rd course on Vaccine Procurement is scheduled to be held in Riga, Latvia from 24-28 October 2005. Participants are expected from Belarus, Ukraine, Armenia, Uzbekistan, Georgia, Kazakhstan, Moldova and Turkmenistan. The course will also include representatives from the departments of EPI

management, National Regulation and Vaccine Procurement. The fifteen-module course which covers the principles and methods of effective public procurement and underscores best practices in a bid and tender process, will be facilitated by local, WHO/HQ and EURO staff, as well as a representative from UNICEF Supply Division. The course will be conducted in English with simultaneous translation into Russian.

28/09/05 from Anais Colombini, AMP: The third EPIVAC session will finish in end November 2005.

The last (fourth) supervision of the trainees has begun in the countries and will end by mid-October. It focuses on equipment management and EPI financing.

Each trainee has followed the distance learning courses (3 CD-ROM on vaccinology and management) and submitted their four tests on vaccinology/management topics to the university.

All trainees will write their thesis on Operational Research between 21 November and 9 December 2005. The international board of examiners will be composed of universities' teachers from the beneficiary countries from Paris IX Dauphine, as well as international experts. Trainees from Burkina Faso, Cote d'Ivoire and Mali will do their thesis in their national universities, while trainees from Benin, Mauritania, Niger, Senegal & Togo will do so at the WHO's Regional Institute for Public Health at Ouidah (Benin).

The fourth EPIVAC session will take place at WHO's Regional Institute of Public Health at Ouidah (Benin) from 31 October to 25 November 2005. The selection of the trainees by Paris Dauphine University (France) and Cocody Abidjan University (Cote d'Ivoire) is ongoing in different countries involved in the program for 2005-2006 (Benin, Burkina Faso, Cote d'Ivoire, Mali, Mauritania, Niger, Senegal and Togo).

GLOBAL IMMUNIZATION VISION AND STRATEGY (GIVS)

28/09/05 from Julian Bilous (WHO/HQ) and Jos Vandelaer (UNICEF):

A **SEARO/WPRO bi-regional workshop on planning for financially sustainable immunization systems and multi-year planning** was held in Bangkok, Thailand from 12-14 September 2005. The meeting was jointly organized by SEARO and WPRO and included participants from 16 countries (GAVI and non-GAVI countries), WHO, UNICEF, CVP(PATH), the World Bank, USAID, the London School of Hygiene and Tropical Medicine, Chulalongkorn University and the India Institute of Economic Growth.

The objectives of the workshop were to discuss lessons learned from Financial Sustainability Planning (FSP) and integration into more comprehensive and costed multi-year plans (cMYP). Whereas the Global Vision and Strategy (GIVS) outlines a framework for immunization in the next ten years, comprehensive multi-year planning would be a first step towards the implementation of selected GIVS strategies at country level. The experiences of FSPs provide a solid basis to fully cost such as multi-year plans and thereby improve country prospects for financial sustainability of their immunization programmes. Participants were committed to collaborate at country level to develop or update their cMYPs in line with further strengthening existing program planning processes and in planning for the future in line with GIVS. Regional Offices and partners are committed to supporting countries in the process. Bangladesh, Lao PDR, Papua New Guinea and Sri Lanka plan to develop cMYPs before the end of 2005.

To strengthen the WHO/UNICEF partnership, it was agreed that at country level, both organizations should aim to support the country's national immunization plan, in which they would indicate their contribution according to the country situation.

The first step for countries to adopt GIVS, is to build ideas from GIVS in the multi-year planning (MYP). To facilitate this process, WHO and UNICEF, in close collaboration with GAVI partners, are jointly drafting guidelines for countries on improved comprehensive multi-year planning (cMYP). The guidelines build on previous country planning experiences, while using GIVS as a checklist. In addition, a tool is being developed to compute the costing of the cMYP, based on the methods used by FSP. As such, the country cMYP will in future combine elements from FSP into one process and document. It is anticipated that the development of a cMYP will not only serve a country's own needs, but will also serve as a basis for future applications to donors, including GAVI. Some countries have started using early drafts of the guidelines to develop their new cMYP, and feedback from these

experiences is being used for the latest draft. It is anticipated that a field-test version of the guidelines will be available this month. In any case, countries can decide whether or not to use (parts of) the guidelines when developing cMYPs.

INTERNATIONAL FINANCE FACILITY FOR IMMUNIZATION (IFFIm)

28/09/05 from Tracey Goodman, WHO/HQ:

The International Finance Facility for Immunization (IFFIm) was launched on 9 September 2005. GAVI, the Vaccine Fund, United Kingdom and France launched an innovative financing mechanism to raise an estimated US\$ 4 billion to scale up the efforts of GAVI. Italy, Spain (new donors to GAVI) and Sweden also announced long-term financial commitments to IFFIm. This new funding will enable GAVI and its partners to save the lives of millions of the world's poorest children. The pledge will be paid out over the next 10 years. IFFIm will issue bonds against these donor pledges in order to make funds available for immunization programs more quickly. This "frontloading" approach will enable GAVI to invest in strengthening immunization systems and introducing urgently-needed new vaccines.

With the funds committed, GAVI estimates that it will be able to prevent deaths of more than five million children from vaccine-preventable diseases over the next ten years. Millions more deaths will be prevented beyond the 10 year timeframe of the initiative through the lasting benefits that childhood immunization confers.

The recently announced Bill & Melinda Gates Foundation contribution of US\$ 750 million over 10 years to the Vaccine Fund - the financial arm of GAVI - will be provided alongside the resources from Government donors to the IFFIm. These contributions are joined together in a global campaign to deliver immunization, and these funds will be jointly managed to maximize financial efficiency and ease of access for recipient countries.

The US\$4 billion available for disbursement by GAVI through the funds committed will help GAVI's unique public private partnership save the lives of millions of the world's poorest children. Both the Gates Foundation and government donors look forward to continuing working together with GAVI to achieve this goal.

Individual pledges from donor countries include:

- The United Kingdom - 35% of total resources required for US\$ 4 billion IFFIm (\$130 million a year);
- France - 25% (\$100 million a year);
- Italy - 10% (\$30 million a year);
- Spain - 3% (\$12 million a year);
- Sweden made a total pledge of US\$ 27 million.

MATERNAL & NEONATAL TETANUS

28/09/05 from Philippe Cavaller (WHO Consultant), Placide Gbedonou (WHO/Togo) and Jos Vandelaer, (WHO/HQ): A survey was conducted in early September 2005 in Togo to assess the elimination of neonatal tetanus in the country. A Lot Quality Assessment - Cluster Survey methodology (LQA-LS) was used to assess mortality due to neonatal tetanus. Of the 1001 live births that were surveyed in 5 high risk districts in the Plateaux and Savannes Provinces, none could be confirmed as having died from neonatal tetanus. Tetanus immunization coverage among pregnant women in the same area was found to be 64% (TT2+). These findings demonstrate that even in the highest risk districts, neonatal tetanus incidence in Togo has decreased to levels below the elimination threshold of 1 neonatal tetanus case per 1000 live births. More details on the survey will be published shortly in the WHO's Weekly Epidemiological Record.

MEASLES

28/09/05 from Peter Strebel, WHO/HQ: As reported in the Lancet (3 September 2005) article, by June 2003, 19 African countries had completed measles supplemental immunization activities in children aged 9 months to 14 years as part of a comprehensive measles-control strategy.

An analysis of available surveillance information looking at reported cases, laboratory results (measles IgM) among suspected cases and outbreaks was conducted. Findings from this analysis indicated that between 2000 and June 2003, 82.1 million children were targeted for vaccination during initial SIA in 12 countries and follow-up SIA in seven countries. The average decline in the number of reported measles cases was 91%. In 17 of 19 countries, measles case-based surveillance confirmed that transmission of measles virus and measles deaths had been reduced to low or very low rates. The total estimated number of deaths averted in the year 2003 was 90,043. Between 2000 and 2003 in the African Region as a whole, the estimated percentage decline in annual measles deaths was around 20%.

Full implementation of WHO/UNICEF recommended strategies for measles control results in a substantial reduction in childhood deaths from measles and expanded use of these strategies will directly contribute to achieving the 2015 Millennium Development Goals. In addition, routinely available surveillance data is a valuable tool to monitor progress towards the measles mortality reduction goal.

GAVI-RELATED INFORMATION

REVIEW PROCESS

The next **Proposals Review** will be held from **31 October to 8 November 2005**. The deadline for receiving applications is **7 October 2005**.

The **Monitoring Review** was held from **19-23 September 2005**. Reports were due on **15 August 2005**.

GAVI BOARD MEETING

28/09/05 from GAVI Secretariat: The 16th GAVI Board Meeting was held in Paris, France from 19-20 July 2005. Following is a summary of outcomes from the meeting:

Bridge Financing Investment Case: The Board endorsed the three main principles of the bridge financing:

- Flatline support (extending 100% support through 2007 - affects 11 countries)
- The concept of a "working" price given the need for a figure for planning and budgeting, with a request to come up with a new name that better reflects its imprecision
- Co-financing, so that countries make commitments to gradually increase non-GAVI contributions to the vaccine's costs over the years through 2015.

New Vaccines in Phase 2: The Board affirmed its current policy regarding supporting countries to introduce HepB, Hib and Yellow Fever vaccines as appropriate and in consideration of disease burden. Policies for the provision of this support must be aligned with those applicable to bridge financing and the recommendations of the country consultations process.

IFFIm-Dependent Investment Cases: The Board:

- Approved investing in the polio investment case, at an indicative of 60% of the proposed amount.
- Requested that the MNT investment case address the issues identified by the IRC.
- Agreed that depending on the size of the IFFIm, a cap should be placed on the size of the measles investment.
- Agreed on the need to strike an appropriate balance between campaigns and broader system support with regard to the measles and MNT investments.

Long-term supply and procurement strategy:

The Board endorsed the proposal to create a small task team of GAVI partners that would begin work immediately to lead the next steps on the supply strategy for Hib and HepB combination vaccines.

IFFIm: The Board requested a timeline of decision and milestones for the IFFIm, with the understanding that it would need to be flexible

given all the variables. They endorsed the concept of an MOU between the GAVI Board and the Vaccine Fund, however requested that it be developed in the context of the ongoing discussions concerning the complementary roles of the GAVI and Vaccine Fund boards.

The Board reiterated that the process of disbursing IFFIm resources should be as simple as possible for the recipient countries, build upon the experiences gained in phase 1, and use existing mechanisms to the greatest degree possible.

Immunization Services Support and Health Systems Strengthening: The Board endorsed the principles for health systems support in phase 2, with the provision that support should be time-limited. They approved the continuation of ISS, including the extension of support to all GAVI-eligible countries, and the opening of a new funding stream for Health Systems Support (HSS), which would focus on themed areas such as district-level support and human resources.

The Board requested a detailed proposal for ISS and HSS support, including guidelines for countries and resource implications by December 2005, in order for the Board to implement it in 2006.

Technical Support in Phase 2: It was agreed that the ultimate aim would be a completely country-driven approach. This will take time to develop, and in the interim, WHO, UNICEF and other technical partners could provide support while phasing in a country-led approach.

GAVI/VF 2006-2007 Workplan Framework: The Board requested that the workplan framework and budget be more closely examined by the Executive Committees of GAVI and the Vaccine Fund, for discussion at its joint meeting in September 2005. Recommendations from these discussions will be presented back to the Board for ultimate decision on the workplan and budget in December.

The Board also endorsed the proposal of the Vaccine Fund as the single funding source for the entire GAVI/VF workplan budget.

Yellow Fever Stockpile Evaluation: The Board approved a one-year extension of the six million dose yellow fever stockpile considering the urgent need to issue a tender to ensure no interruption in vaccine supply. They also requested a comprehensive investment case be prepared and submitted to the Board before it could consider a longer-term investment in the stockpile.

PUBLICATIONS

NEWLY PUBLISHED WHO DOCUMENTS

28/09/05 from Mario Conde, WHO/HQ:

The following is a list of new publications from WHO:

- WHO-UNICEF Effective Vaccine Store Management Initiative (WHO/IVB/04.16-20)
- Immunization Coverage Survey - Reference Manual (WHO/IVB/04.23)
- Adverse Events Following Immunization (AEFI): Causality assessment (Aide Memoire)
- Report of the global meeting for sustainable measles mortality reduction and immunization system strengthening (WHO/IVB/04.25)

These are available on the WHO website:

www.who.int/vaccines-documents/

Or can be ordered by sending an email to vaccines@who.int

COUNTRY INFORMATION¹ BY REGION

EAST & SOUTH AFRICA

ANGOLA

28/09/05 from AFRO E&S:

The **DQA** is planned for November 2005.

The **FSP** is scheduled to take place from December 2005 - February 2006, and it will be incorporated into the **cMYP**.

BURUNDI

28/09/05 from AFRO E&S:

The **DQA** and **DQS** are planned to be conducted before the end of the year.

The **pentavalent vaccine** has been launched in April 2005, and implementation is well on track.

COMOROS

28/09/05 from AFRO E&S:

- A **measles outbreak** has been confirmed on Moheli Island in July 2005. An investigation conducted by Dr. A. Fall from ICP West found most of the cases on the Island of Anjouan and a few on Grande Comore Island. **SIAs** are planned for children from nine months to 15 years on Grande Comore Island. UNICEF and WHO are providing support for this activity.
- The ICC was informed about the end of **injection safety** support. The Government has included injection safety financing in the FSP.

¹ ICP = Inter Country Programme
ISS = Immunization Services Support
INS = Injection Safety Support
NVS = New Vaccine Support
DQA = Data Quality Audit
DQS = Data Quality Self Assessment
FSP = Financial Sustainability Plan
RED = Reach Every District
cMYP = Fully costed multi-year plan

ERITREA

28/09/05 from AFRO E&S: A **cMYP** is planned for the last quarter of 2005.

28/09/05 from Steve Wiersma, WHO/HQ: A mission was conducted to support WHO/AFRO, ICP and WR Eritrea to develop a GAVI application for the introduction of **new vaccines**. The Government of Eritrea requested support to prepare an application to add the pentavalent vaccine into its routine childhood immunization schedule. The country is currently ending the 4th year of GAVI support for DTP-HepB.

KENYA

28/09/05 from AFRO E&S:

- The **injection safety** support provided by GAVI is ending in 2005, and the Government of Kenya has allocated funds for 2006.
- The support from GAVI for **pentavalent vaccine** ends in 2006. There is no decision yet regarding the continuation of the vaccine after GAVI funding.
- The **MYP** will be reviewed during the last quarter of 2005.

MADAGASCAR

28/09/05 from AFRO E&S:

- The **DQS** was conducted with the support of WHO/AFRO from 25 July to 5 August 2005. The **DQA** has been postponed, and dates will be decided later.
- Two circulating vaccine derived polio virus have been detected in the Toliara Province and the country has embarked in **SIAs** targeting 500,000 children under five-years in 33 districts in Toliara, Fianarantsoa and Mahajanga provinces. The first round was conducted at the end of August and the second at the end of September 2005.

MALAWI

28/09/05 from AFRO E&S:

- The **measles campaign** was planned for 21-23 September 2005.
- The **MLM** and **RED trainings** will be conducted after the measles campaign.
- The development of the **MYP** is scheduled for 12-16 December 2005, and the country is requesting technical support for this activity.

MOZAMBIQUE

28/09/05 from AFRO E&S:

- The country plans to conduct a **DQS** in October 2005. A second **DQA** is tentatively set for the last quarter of 2006.
- The country has planned to conduct an **EPI review** in November-December 2005.
- The last phase of the **measles campaign** was planned to be implemented in September 2005.

RWANDA

28/09/05 from AFRO E&S:

- There has been a great improvement in **routine immunization coverage**. There is a coverage of greater than 80% in many districts. The districts with less than 8% coverage are being supported with microplanning.
- GAVI support for **injection safety** is ending in 2005, the country had been receiving cash in lieu of supply. Still awaiting information regarding its continuation.

UGANDA

28/09/05 from AFRO E&S:

- The **EPI review** has been completed, and draft results were presented to the ICC in early September 2005.
- The revision of the **MYP** was planned for the last two weeks of September.
- The Ministry of Health has allocated funding for **injection safety** for 2006.

ZAMBIA

28/09/05 from AFRO E&S:

- The country is finalizing its **MYP** based on the GIVS.
- The country has received the **second reward** for increasing DTP3 coverage among children under one in 2004.
- The training of all sentinel sites on **vaccine wastage** has been completed.
- The country is planning to scale up **RED** from initial 10 districts using the ISS funds.
- The launch for **pentavalent vaccine** is set for 11 October 2005. Nation-wide training was completed on 29 June 2005.

WEST & CENTRAL AFRICA

BENIN

28/09/05 from AFRO W&C:

- The **pentavalent vaccine** has been introduced in June-July 2005.
- A **coverage survey** is planned and tools have been finalized for this activity. Technical support is needed to complete this activity.
- The country has planned an **FSP** review for December 2005, and this will take into account the introduction of pentavalent vaccine.
- The country is busy during the last quarter of 2005 with **polio NIDs, measles** and **MNT follow-up campaigns**.

BURKINA FASO

28/09/05 from AFRO W&C:

- The country received US\$100,000 to prepare the **new vaccines** implementation in early

2006. A series of trainings for the introduction have been planned. UNICEF Supply division has confirmed two shipments of vaccines schedule for September and December 2005.

- The **DQS training** has been done, and the **DQA** is planned.

COTE D'IVOIRE

28/09/05 from AFRO W&C:

- The country has requested to postpone the **DQA** to 2006, however will undergo a **DQS** later this year.
- The country is organizing a nation-wide **measles campaign**.

GAMBIA

28/09/05 from AFRO W&C: The GAVI support for **injection safety** ended in 2004, and the government budgeted for injection safety in 2005. There is no information on this for 2006.

GHANA

28/09/05 from AFRO W&C: The country has started to phase out GAVI support for **pentavalent vaccines**. The government is purchasing 45% of the total pentavalent need for 2006 through UNICEF Supply Division.

GUINEA BISSAU

28/09/05 from AFRO W&C: The country has expressed interest for **new vaccines (HepB and yellow fever)**, and they may apply in the next round.

LIBERIA

28/09/05 from AFRO W&C:

- The **DQA** was conducted in July 2005, and feedback is awaited from the team.
- Following the **EPI review** and **coverage survey** conducted earlier this year, the country has opted to prepare a **cMYP** (2006-2010). The plan will include the **FSP**. Technical assistance is requested for this activity.

MALI

28/09/05 from AFRO W&C:

- The phased introduction of **pentavalent vaccine** started in Bamako in June 2005.
- The support for **injection safety** is ending in 2005, and there is no information yet on its replacement.
- The **EPI review** is now postponed to October 2005 due to the mop-up vaccination in the three regions following the detection of **3 wild poliovirus**.

MAURITANIA

28/09/05 from AFRO W&C: The **HepB vaccine** was introduced in the country in April

2005. The country is reporting 70% of **DTP3 coverage**, which needs to be validated by the recent coverage survey.

NIGER

28/09/05 from AFRO W&C:

- The country is planning to resubmit the application for **yellow fever** and **HepB** in the next round. Yellow fever is a priority and it is already in the EPI schedule.
- The **EPI review** and **MYP** are postponed due to the heavy agenda of activities for the rest of the year (2 rounds of NIDs and sub-national measles campaigns planned for December 2005).

SENEGAL

28/09/05 from AFRO W&C: The **coverage survey** has been postponed to October 2005, and technical assistance will be provided for this and to elaborate the **MYP** (2006-2010).

SIERRA LEONE

28/09/05 from AFRO W&C: The country is planning to submit an application for **pentavalent vaccine** in the next round.

TOGO

28/09/05 from AFRO W&C: The country is planning to resubmit the application for **new vaccines** (either pentavalent or quadrivalent).

EASTERN MEDITERRANEAN

REGIONAL INFORMATION

28/09/05 from EMRO:

- The **Measles-Rubella** inter-country meeting will be held in Cairo, Egypt from 11-13 December 2005. This will be followed by a **RWG meeting** from 14-15 December 2005. The RWG meeting will include training on cMYPs.
- There will be visits to consult on the **Hib Initiative** from 10-11 October 2005.
- EMRO, in collaboration with WHO/HQ, CDC Atlanta and pneumo-ADIP, is preparing an application to Pneumo-ADIP to support the regional network for pneumo invasive diseases surveillance.
- **FSP process** - Dr. Sahar Mourad (WHO/EMRO) is assisting with the development of a plan to assist countries build capacity for the financial sustainability process. The first steps are to assess the capacity of countries and assist with financial management, budgeting and planning. The regional office will provide a training programme to countries so that they will be

able to develop and update their own plans. This is expected to be done by mid-2006.

AFGHANISTAN

28/09/05 from EMRO:

The **fully costed multi-year plan** is postponed to 2006 due to the heavy schedule of the regional VPI unit during the last part of 2005.

DJIBOUTI

28/09/05 from EMRO:

A short term consultant has been identified and is being recruited by EMRO to finalize the country **FSP** from 27 September to 7 October 2005.

*IRAQ

28/09/05 from EMRO:

- A training workshop on the **RED approach, bacterial meningitis surveillance, injection safety and AEFI surveillance** is scheduled for early November 2005 for colleagues working in Iraq. There will be around 45 participants and the workshop will be held in Jordan.
- The country has decided to introduce **Hib vaccine** in 2006, and has requested EMRO assistance with addressing some related issues such as revising the routine immunization schedule, updating EPI reporting forms and sheets, documents, cold chain, etc.

*LEBANON

28/09/05 from EMRO: As much as 60% of the **immunization services** are provided by the private sector and NGOs, and there is the need to assess this situation. The country has drafted a methodology to address this issue and a new EPI manager has been recruited.

*MOROCCO

28/09/05 from EMRO:

- Dr Ezzeddine Mohsni (WHO/EMRO) visited recently to discuss the **2006-2007 plan**.
- The country plans to introduce **Hib vaccine** in 2006.

PAKISTAN

28/09/05 from EMRO:

- The government has budgeted USD 3.25 million for **injection safety supplies** to take over after GAVI funding ends.
- The **coverage survey** is scheduled to start in the last week of September 2005.
- The country has already informed GAVI of its intent to switch to **tetravalent vaccine** for one-third of the country beginning in 2006.
- The **MYP** was recently developed and will be discussed with partners at the next ICC meeting.

- The country is currently preparing for the **measles catch-up campaign** scheduled for December 2005 for six districts.

SOMALIA

28/09/05 from EMRO:

- The use of GAVI **ISS** and **INS** funds has been extremely slow.
- The **DQA** has been postponed to 2006.
- The country is currently preparing for the **measles catch-up campaign**, which is scheduled for end-November 2005.
- The **EPI Review** and **MYP** are planned for early 2006.
- An international **routine EPI and measles focal point** is currently being recruited for the country.

SUDAN

28/09/05 from EMRO:

- The **FSP** has been submitted, and currently awaiting the review.
- GAVI support for **injection safety** ended in 2004, and the Ministry of Health secured support from UNICEF for 2005.
- The introduction of **HepB vaccine** began in 2005.
- There is a joint UNICEF-WHO plan for a **measles campaign** in **South Sudan**, and eight sub-country focal points (operational officers) are being recruited (4 by UNICEF and 4 by WHO/EMRO) to assist with this process.

YEMEN

28/09/05 from EMRO:

- The **FSP** was submitted and accepted by the review committee.
- The MoH is currently conducting **routine acceleration immunization campaigns** in several areas in the country.
- The country is planning a **measles catch-up campaign**, starting in December 2005 in four governorates (including one-third of the country total population) with CDC Atlanta financial support.
- The **pentavalent vaccine introduction evaluation** mission that was planned for this year is postponed to early 2006 due to the heavy schedule of the country EPI programme.

EUROPEAN REGION

REGIONAL INFORMATION

22/09/2005 from EURO:

WHO Regional Committee for Europe

The 55th session of the WHO Regional Committee for Europe has convened in Bucharest, Romania

from 12-15 September 2005. Strengthening national immunization systems through measles and rubella elimination and prevention of congenital rubella infection in the Region was one of the topics of the Committee agenda. A draft resolution was prepared, requesting the Regional Committee to agree with and commit itself to the targets of measles and rubella elimination and congenital rubella infection prevention by 2010, acting on previous international commitments to protect children and adolescents from vaccine-preventable diseases through strong, routine, sustainable immunization services. The Regional Committee endorsed the resolution with the support of 52 Member States, indicating strong commitment of the Member States in achieving objectives by 2010.

European Immunization Week Initiative

The European Immunization Week Initiative will be launched during the week 17-23 October 2005. Given the Member States' interest and willingness to participate expressed during the Regional Committee Meeting, it is likely that the region-wide Initiative will become an annual event earlier than expected. It will provide countries an opportunity to raise awareness, improve communication and advocate immunization across the Region. A web page providing detailed information is available on the following site:

<http://www.euro.who.int/vaccine>

Immunization in Practice Training Course

WHO Regional Office for Europe conducted a workshop for facilitators of Immunization in Practice training courses. The workshop was held in Kiev, Ukraine, from 29 August - 3 September 2005 with 20 participants and facilitators. Training modules in Russian developed by WHO/EURO were used. The objectives of the workshop were to:

- Update participants on the objectives and areas of work related to immunization and vaccine preventable diseases in the WHO European Region;
- Introduce Immunization In Practice training modules;
- To facilitate the work with training modules and doing exercises and clarify questions and comments raised during the work with the training material;
- Familiarize participants with "Reaching every district" strategy and guide;
- Present the training methodology and discuss the organization and implementation of training in the countries;
- Familiarize participants with the role and tasks of facilitators in the preparation and conduct of IIP courses.

The workshop also provided an additional opportunity to receive a feedback on newly developed training modules.

Multi-Year Plan Process in the Region

EURO has planned to implement MYP process in 15 countries (11 GAVI/VF and 4 non-GAVI/VF) by the end of 2007. After Kyrgyzstan, the planning process will be initiated in Armenia and Ukraine in 2005, Azerbaijan, Belarus, Georgia, Kazakhstan, Moldova and Tajikistan in 2006 and Albania, Bosnia & Herzegovina, Russian Federation, Turkmenistan and Uzbekistan in 2007.

Consultants Briefing on Multi-Year Planning

Briefing for consultants for Multi-Year Planning (MYP) in the WHO European Region will be conducted in Copenhagen, Denmark, from 2-4 November 2005. The purpose of the briefing is to:

- Update participants on the current status of the WHO immunization programme in the WHO European Region (with special emphasis on regional goals, objectives, strategies and performance indicators for each area of work);
- Provide an overview on the Global Immunization Vision and Strategies 2006 – 2015 (GIVS);
- Introduce Comprehensive Multi-Year Immunization Plan (MYP) and the planning process, using the Global Immunization Vision and Strategies 2006 – 2015 (GIVS) as a guiding framework;
- Familiarize the participants with steps of the planning process described in MYP guide and application of the developed costing and financing Excel tool;
- Share the experience of Kyrgyzstan in MYP development with the participants;
- Provide other specific information for working in a country as a WHO consultant.

The briefing will be attended by selected programme managers/staff from national level and WHO/EURO Vaccine and Preventable Diseases and Immunization Unit field officers and national programme officers, who have experience in the field of programme planning and management. Briefed consultants will be involved in planning and follow-up process of MYP in respective countries of the Region.

CCEE, NIS and Turkey Sub-Regional Immunization Programme Managers Meeting

Subregional (CCEE, NIS and Turkey) Immunization Programme Managers Meeting will be held in Antalya, Turkey from 15 to 17 November. The objectives of the meeting are to:

- Brief participants on the current status of global and regional immunization programmes, including progress achieved and future priorities in countries of the WHO European Region;
- Present and discuss programmatic areas of work and future priority areas towards strengthening national immunization systems within the concept of child and

adolescent health with special focus on vulnerable groups.

The expected results of the meeting are:

- Increased knowledge and understanding of programme priorities, strategies and objectives for effective decision making, planning and implementation of activities in the country;
- Commitment for the implementation of programme priority activities;
- Exchange of information and experience to improve coordination and partnership.

Hib Action Team

The Hib Action Team visited EURO on 8-9 September 2005, consisting of Dr Rana Haijeh, Hib Action Project Director; Dr Patrick Zuber, WHO HQ/FCH/IVB/EPI and Professor Kim Mulholland, member of the Executive Committee of Hib Initiative. The objectives of the visit was to;

- Introduce the GAVI Hib Initiative to relevant EURO staff,
- Discuss areas of common interest and the process of collaboration between EURO and Hib Initiative,
- Initiate the development of the 2006-2009 action plan for Hib Initiative.

Vaccine Store Management Training

Training of facilitators on Vaccine Store Management will be conducted in Bulgaria from 26-30 September 2005.

ALBANIA

29/08/05 from EURO: The country has prepared an application for **new vaccines (Hib)** for the October 2005 review.

ARMENIA

29/08/05 from EURO: The **Effective Vaccine Store Management Assessment** is being conducted in the country from 19-24 September, with technical support provided by a EURO consultant.

AZERBAIJAN

29/08/05 from EURO: The country has initiated the preparation for the **measles-rubella campaign** with the technical support of EURO. The campaign is scheduled for March 2006. Vishnevskaya-Rostropovich Foundation is one of the major partners of the campaign besides WHO, UNICEF and CDC. The **Adverse Events Following Immunization (AEFI)** assessment will be conducted in the country from 3-7 October 2005, with technical support provided by a EURO consultant.

BOSNIA & HERZEGOVINA

29/08/05 from EURO: The ICC will convene on 27 September 2005 to discuss the prepared

application for **new vaccines (Hib)** to be submitted in the next round.

***BULGARIA**

29/08/05 from EURO: The **Effective Vaccine Store Management assessment** has been conducted in the country from 22-26 August 2005, with the technical support provided by a EURO consultant.

GEORGIA

29/08/05 from EURO: The **Effective Vaccine Store Management assessment** has been conducted in the country from 12-21 September 2005, with the technical support provided by a EURO consultant.

***SLOVAKIA**

29/08/05 from EURO: The **Polio Regional Laboratory Network mission** visited Skalica and Bratislava from 6-7 July 2005, to assess progress in the environmental surveillance and develop future strategy of vaccine-derived polioviruses (VDPVs).

KYRGYZSTAN

29/08/05 from EURO: The country is expected to finalize the **MYP** and the draft was discussed with the sub-national immunization managers. The planning experience of the country will be shared with other countries of the Region during the Programme Managers meeting which will be held in Antalya, Turkey from 15-17 November 2005.

TAJIKISTAN

29/08/05 from EURO:

- A **Training of Trainers** has been conducted in **Immunization In Practice (IIP)** using revised training modules, with the facilitation of a WHO consultant.
- The working group developed a national strategy on **social mobilization** and initiated a KAP survey to form the basis for the production of social mobilization materials.
- A joint mission will be conducted for a **measles post campaign impact assessment** from 24 October to 2 November 2005.

***TURKEY**

29/08/05 from EURO: The country has developed training materials on immunization quality and safety covering cold chain & logistics, injection safety and AEFI with the technical support of EURO. The material targets provincial and health facility levels. Training of facilitators will be conducted from 10-14 October 2005 in Ankara. Provincial level seminars are scheduled

for November 2005, will be attended by 2-3 immunization staff from each province. A combination of teaching methods will be used during the seminar including presentation, group session, demonstration, simulation, role play. For more information, please contact Mr. Eric Laurent (erl@euro.who.int).

The country has finalized **measles campaigns** targeting children under 14-years of age and now conducting a post campaign survey using LOT Quality Technique covering nearly half of the country.

The country has decided to introduce **MMR** and **Hib** vaccines to the national immunization programme in 2006. They are working on strategies to protect susceptible population against rubella infection, including women at child bearing age.

A joint WHO-UNICEF mission will be visiting the country to assess the **MNT** activities.

UKRAINE

29/08/05 from EURO: The Ministry of Health held the first of three joint **measles-polio surveillance workshops** from 16-17 August 2005. Twenty-eight persons attended the workshop, which was held in Lviv. The workshop was organized and financed by the MoH with support from EURO. Two more workshops will be held on 29-30 September and 11-12 October in Dnepropetrovsk and Vinnitsya respectively.

UZBEKISTAN

29/08/05 from EURO: A study on **temperature monitoring** will be conducted from 9-18 October, with technical assistance from EURO.

SOUTH EAST ASIA REGION

REGIONAL INFORMATION

28/09/05 from SEARO:

- A **regional training meeting** was held from 22-23 August 2005 for Bangladesh, India, Indonesia and Nepal to review ways of strengthening basic health care worker training in immunization. This explored institutional strengthening and use of standard materials.
- A South East Asia and Western Pacific **regional workshop on country multi-year planning and financing** was held in Bangkok from 12-14 September 2005.
- The **South East Asian Regional Working Group meeting** was held in Bangkok, Thailand on 14 September 2005. A summary of recommendations from this meeting will be available shortly.

- Further **FSP visits** have helped Bhutan, DPR Korea, Myanmar and Nepal adjust their predicted financial needs.

BANGLADESH

28/09/05 from SEARO:

A **data quality self assessment** is planned for October 2005.

In 2003, Bangladesh expanded the WHO supported AFP surveillance network for **measles** and **neonatal tetanus surveillance**. Since then, many measles outbreaks have been detected and investigated. Based on the data produced by the network, children aged 9 months to 10 years were identified as the most susceptible age group for measles infection. Accordingly, the government decided to conduct a **two-phased measles catch-up campaigns** for this target population. This two-phased campaign will be the largest public health undertaking in the history of Bangladesh; 35 million children will be immunized by 40,000 skilled vaccinators and 150,000 mobilized volunteers, through more than 100,000 schools and 200,000 EPI centers. Phase I, targeting 1.5 million children was carried out between 3-22 September 2005. Phase II, aiming to reach 33.5 million children, will be conducted in February 2006.

During the preparation stage of the campaign, the logistic needs for immunization in the districts were reviewed and essential equipment was provided with support from UNICEF and GAVI. This also provided a good opportunity to train curative care workers on AEFI management, and vaccinators (who are multipurpose community health workers) on detection, referral and reporting of AEFI. During training courses for the vaccinators, techniques for using AD syringes, use and disposal of safety boxes, and injection techniques were emphasized.

During the first phase of the campaign, all children attending school (both formal and non-formal) were vaccinated in their respective educational institutes during the first week of the campaign. Children outside of the schooling system were vaccinated at the regular EPI sites in the subsequent two weeks. Additionally, there was one session for the measles campaign in each routine EPI site during the campaigns three week period. Routine EPI was not interrupted and ran throughout the campaign, as per the annual plan. The campaign was monitored by external observers from WHO, CDC/Atlanta, the Government of India and the Government of Maldives. For officials from India and Maldives, monitoring proved a useful opportunity to learn about the preparation and implementation of an effective SIA. Monitoring of the campaign during the first two weeks (through structured monitoring check lists and rapid convenience

surveys) reveals that more than 90% coverage could be expected.

BHUTAN

28/09/05 from SEARO: A **data quality self assessment** is planned for the end of September 2005.

INDIA

28/09/05 from SEARO:

- A **data quality self assessment** was performed in Tamil Nadu and Uttar Pradesh.
- A **performance needs assessment** is planned to be conducted later this year.
- A **Routine Immunization Monitoring System** has been developed and is now being implemented.
- The country launched its **2005-2010 immunization multi-year plan** at the July State EPI managers' meeting. They also launched the results of its **2004 Immunization Review** at this meeting.

INDONESIA

28/09/05 from SEARO:

- A **performance needs assessment** is planned to be conducted later this year.
- A **data quality self assessment** is planned in a further five provinces in October 2005.

MYANMAR

28/09/05 from SEARO: A **Hib RAT** is planned for November 2005.

NEPAL

28/09/05 from SEARO: A training **performance needs assessment** was completed in the country. Results will be useful for future plans on training.

WESTERN PACIFIC REGION

CAMBODIA

28/09/05 from WPRO: The country wide implementation of **HepB vaccine** is scheduled for the end of 2005.

CHINA

28/09/05 from WPRO:

- China is not eligible for **GAVI phase 2**, and therefore will not be eligible for vaccine procurement or system strengthening. However, China can participate in the Hib Initiative or ADIP activities.
- The **FSP** has been sent to the GAVI Secretariat for the review.

LAO PDR

28/09/05 from WPRO:

- The Ministry of Health has settled a task force to revise the **reporting system**, and the WHO is participating. The final testing is currently going on.
- UNICEF has funded **injection safety** in 2005.

MONGOLIA

28/09/05 from WPRO:

- The **HepB impact study** is currently ongoing.
- The implementation of **pentavalent vaccine** is going well.

PAPUA NEW GUINEA

28/09/05 from WPRO:

- The country has a relatively high disease burden of **Hib**, and a high burden of antibiotic resistance. Therefore, the country is interested in applying for GAVI support and is expected to apply in the next round.
- The country is developing a **cMYP** prior to the application and technical assistance was provided by WHO/WPRO.

END

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



LIST OF MEETINGS RELATED TO IMMUNIZATION

Regional Meetings Related to Immunization: October 2005 - 2006					
Title of Meeting	Start	Finish	Location	Responsible Partner	Region
Oct-05					
Updating Logistics for National Logisticians	03-Oct	07-Oct	Maputo	AFRO	AFR
ARCC Annual General Meeting	04-Oct	06-Oct	Lusaka, Zambia	AFRO	AFR
GAVI Global Working Group Meeting	05-Oct	06-Oct	Amsterdam	GAVI Secretariat	Global
Global Immunization Training Partnership	10-Oct	11-Oct	Geneva	WHO	Global
GAVI East & South African Regional Working Group and Monitoring Meetings	17-Oct	21-Oct	Harare, Zimbabwe	AFRO E&S	AFR
GAVI West & Central African Regional Working Group and Monitoring Meetings	24-Oct	28-Oct	Ouagadougou	AFRO W&C	AFR
South America EPI Managers Meeting	24-Oct	28-Oct	Asuncion, Paraguay	PAHO	Americas
Measles/Rubella Laboratory Net Sub-Regional Meeting	25-Oct	27-Oct	tbd	EURO	EUR
Nov-05					
GAVI Working Group Meeting	02-Nov	03-Nov	Geneva	GAVI Secretariat	Global
57th Regional Directors' Meeting with WHO Representatives	14-Nov	18-Nov	New Delhi, India	SEARO	SEAR
European Sub-Regional Meeting of National Immunization Programme Managers	15-Nov	17-Nov	Antalya, Turkey	EURO	EUR
Viral Hepatitis Prevention Board (VHPB) Meeting	17-Nov	18-Nov	United Kingdom	EURO	EUR
15th Meeting of the European Interagency Immunization Coordinating Committee	18-Nov	19-Nov	Antalya, Turkey	EURO	EUR
Caribbean EPI Managers Meeting	28-Nov	02-Dec	Bermuda	PAHO	Americas
AFRO Task Force on Immunization	28-Nov	01-Dec	Brazzaville	AFRO	AFR
Dec-05					
11th Meeting of the Regional Commission for the Certification (RCC) of Polio Eradication in WPRO	03-Dec	07-Dec	Manila, Philippines	WPRO	WPR
GAVI Board Meeting	06-Dec	06-Dec	New Delhi, India	GAVI Secretariat	Global
Joint GAVI/Vaccine Fund Board Meeting (a.m.)	07-Dec	07-Dec	New Delhi, India	GAVI Secretariat	Global
Vaccine Fund Board Meeting (p.m.)	07-Dec	07-Dec	New Delhi, India	GAVI Secretariat	Global
GAVI/VF Partners' Meeting: Opening Event	07-Dec	07-Dec	New Delhi, India	GAVI Secretariat	Global

GAVI/VF Partners' Meeting	08-Dec	09-Dec	New Delhi, India	GAVI Secretariat	Global
GAVI European Regional Working Group Meeting	08-Dec	08-Dec	Copenhagen	EURO	EUR
EMRO Measles-Rubella Inter-Country Meeting	11-Dec	13-Dec	Cairo, Egypt	EMRO	EMR
Intl. Workshop on Rotavirus Epidemiological Surveillance	12-Dec	16-Dec	Rio de Janeiro, Brazil	PAHO	Americas
GAVI Eastern Mediterranean Regional Working Group Meeting	14-Dec	15-Dec	Cairo, Egypt	EMRO	EMR
2006					
PAHO EPI TAG and ICC/RWG Meeting	08-May	12-May	tbd	PAHO	Americas