News

Malaria vaccine pilot milestones – 1 million doses administered and 1st anniversary of launch in Kenya

Kristen Kelleher, WHO Headquarters

More than one year on, across the malaria vaccine pilot countries of Ghana, Kenya and Malawi, over 1 million doses of the RTS,S/AS01 malaria vaccine have been administered, and 400,000 children have received their first dose of vaccine in childhood vaccination thus benefiting from this additional malaria prevention.

Despite the challenges posed by the COVID-19 pandemic there is good uptake of the vaccine across the countries. Malaria vaccination is continuing in all participating countries without major disruptions, and the evaluation of the pilot introduction is also continuing. If introduced widely, the malaria vaccine has the potential to save tens of thousands of lives.

On 13 September 2020, Kenya marked its 1st anniversary of the launch of the pilot, with more than 128,000 children vaccinated in selected areas of high malaria burden to date. Kenya’s anniversary follows the one-year milestones in Ghana and Malawi in April 2020.

A year ago, the Kenya Ministry of Health launched the malaria vaccine in Homabay County, a high-burden area. Officials welcomed the new tool, noting that the 40% additional reduction in malaria cases achieved through vaccination, on top of protection provided by other proven disease-cutting measures, would be a welcome contribution to improving people’s health and reducing the burden on health facilities.

In a Kenya malaria vaccine pilot anniversary commentary, Siaya County Health Director Dr Ken Oruenjo said: “We see real potential to significantly reduce malaria infections and deaths with the addition of the malaria vaccine to the toolkit of proven malaria control measures.”

He added: “We also believe in our track record with childhood immunization, and the malaria vaccine, RTS,S, offers hope. It is the first and only vaccine to significantly reduce malaria in African children. The vaccine also reduces cases of severe malaria and related hospital admissions.”
Enhanced Outreach Activities (EOA): An effective immunization strategy in COVID-19 context of Pakistan
Mohammed Osama Mere and Shah Nawaz Jiskani, WHO Country Office, Islamabad, Pakistan

To strengthen routine immunization in Pakistan, especially in the context of the COVID-19 pandemic, EPI Pakistan and WHO conducted outreach activities, remodeled as “Enhanced Outreach Activities (EOA)” by mobility support and capacity building of vaccination staff, quality microplans and intensified monitoring.

Since the end of March 2020, like other health services, vaccination was also interrupted in Pakistan due to COVID-19 and vaccination coverages dropped drastically. Penta 3 coverage dropped from 82% in February 2020 to 25% in April 2020.

Based on successful experiences with EOA in 2019, essential immunization activities in Pakistan were resumed from June 2020 in around 119 out of 154 districts using this effective model. Approximately 8,150 vaccination teams have been deployed in the field, establishing outreach sites in the community. Following all safety precautions recommended by WHO, the vaccination teams are given training on Infection Prevention and Control (IPC), are provided with Personal Protective Equipment (medical face masks and hand sanitizer) and are being closely monitored. Vaccination sites are monitored by supervisors using a standard observer checklist developed and deployed on KOBOCollect, a mobile app, and data is analyzed for feedback on the same day. Similarly, monitors are conducting Rapid Convenience Assessments (RCAs) in the community to verify coverages using the KOBO mobile app.

During the first eight months of 2020, when the country was struggling with the COVID-19 pandemic, EOA produced outstanding results: From January-August 2020, about 13.6 million vaccine doses of all antigens were administered and about 800,000 children were vaccinated with Pentavalent OPV3/PCV10-3 and IPV through EOA. Coverages of all antigens improved significantly as a result of EOA with approximately 699,762 Zero Dose children being accessed and vaccinated.

It is expected that EOA will result in vaccination of missed children due to the COVID-19 pandemic and improve vaccination coverages up to their usual levels. Government ownership of EOA is a good indicator for the sustainability of this important immunization strategy which has been welcomed and supported by the Pakistan Pediatric Association.
Immunization professionals share practices and plans for maintaining routine immunization between countries as part of the Scholar COVID-19 Peer Hub

Ian Steed, The Geneva Learning Foundation

Approximately 3,900 immunization professionals from over 90 countries signed up for the Scholar COVID 19 Peer Hub. They committed to working with one another and with partners through a series of optional activities to maintain and, where necessary, restore, routine immunization services in the context of COVID-19.

During August and September 2020, a subset of Peer Hub participants:

- Documented and shared more than 1,200 practices and ideas on seven key themes relating to maintenance of routine immunization during the pandemic through the “Ideas Engine”, an online repository.
- Drew on ideas and practices shared through the Ideas Engine to produce 700 situation analyses and projects, each reviewed and further strengthened by three other participants.

Figures below demonstrate how ideas and practices shared in the Ideas Engine have been incorporated into action plans of participants working at different organizational levels, and in different countries. (Note that not all action plans cite the Ideas Engine).

Over 300 Peer Hub participants are now commencing a four-week “Launchpad” designed to support early stage project implementation through peer encouragement and experience sharing. A majority of these projects focus on re-establishing demand for routine immunization, health worker safety and catch-up.

The Geneva Learning Foundation is in the process of exploring with partners how this unique knowledge-and-action network can feed into efforts by national and international health partners to strengthen skills and motivation to implement country COVID-19 continuity plans. To find out more, contact this email address.

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TechNet Conference returns on October 20-21: REGISTER NOW!

Dan Brigden, WHO Headquarters

It’s been three years since the TechNet community assembled in Cascais, Portugal for the 15th TechNet Conference to “build the next generation of immunization supply chains”. After a little hiatus we are delighted to announce that the conference is returning!

The 16th TechNet Conference will take place online over two days: 20-21 October. The theme will be “Shaping a resilient and adaptive immunization program”. In an era of mounting pressure on immunization supply chains, intensified by the ongoing Covid-19 pandemic, the TechNet Conference will:

- Investigate the challenges faced by national immunization programs;
- Explore the ways in which these challenges are being met;
- Present essential strategies and tools for shaping resilient and adaptive immunization supply chains.

Sessions will be organised into four key topics, identified by TechNet members as critically important:

1. Supply chain strategies
2. Effective vaccine management
3. Responding to Covid-19
4. Cold chain equipment

Registration for the conference is now OPEN.

The conference will be delivered using Zoom and live-streamed on the TechNet-21 YouTube channel. In partnership with the Gavi Alliance’s immunization Supply Chain Steering Committee (iSC2), we are putting the finishing touches to the agenda and are looking forward to sharing more details of the packed programme very shortly. For more information, please visit our conference page, which we will keep updated on a rolling basis:

www.technet-21.org/conference/2020

You can also follow us on Twitter or Facebook.

Second call for Bright Spots

Samia Kemal, Sabin Vaccine Institute

The Sabin Vaccine Institute’s Boost Community is excited to announce its second call for Bright Spots - stories of grassroots-driven process improvement in routine immunization service delivery at the sub-national level. Following last year’s inaugural call for stories focused on Partnerships for Impact, this forthcoming call seeks stories of operational change that illustrate resourcefulness, adaptability and resilience. In conjunction with this call is the launch of Boost’s *new* Bright Spots microsite. Please note: The deadline to apply is 15 October 2020.

We ask you to help with promoting the call for Bright Spots stories using this social media toolkit (scroll further to see prepared messages and images). Please send any questions or comments to this email address.
Past Meetings/Workshops

The 13th meeting of the Regional Certification Commission for Polio Eradication (RCCPE) in the WHO South-East Asia Region (SEAR)

Sigrun Roesel, Sudhir Joshi, Md Sharifuzzaman, WHO SEARO

Location: Virtual Zoom meeting
Date: 22-24 September 2020
Participants: RCCPE members
Chairpersons/representatives, National Certification Committees for Polio Eradication (NCCPEs)
Chairperson, Global Certification Commission
Chairperson, Regional Immunization Technical Advisory Group
Representatives of Ministries of Health and partner agencies
WHO HQ, EMRO, WPRO and Country Offices in SEAR

Purpose:
• To review country performances on maintaining polio-free status, based on abridged NCCPE reports as well as data submitted by countries to WHO SEARO, and provide recommendations on:
  ◦ immunization coverage and supplementary immunization activities;
  ◦ quality of polio surveillance;
  ◦ national risk assessments; and
  ◦ performance of catch-up activities, especially in the COVID-19 context;
• To review implementation status of the recommendations made at the 12th meeting of the SEA-RCCPE;
and
• To prepare an update to the Global Certification Commission on the regional polio-free certification status.

Details:
• Based on abridged reports received from all NCCPEs, the RCCPE concluded that the WHO SEAR has remained polio-free during the period of review. The Commission commended all NCCPEs for timely submission of their reports, and expressed their appreciation of the new prepopulated report templates and new format checklists facilitating the review process. It also commended the countries in the SEAR for the efforts undertaken to maintain the polio-free status.
• The RCCPE acknowledged progress in global polio eradication over the past years and congratulated the WHO African Region on being certified free of all wild polioviruses. It remained concerned about continued WPV1 transmission and cVDPV outbreaks, especially type 2, and in Malaysia and the Philippines.
• The RCCPE expressed deep concerns about the effects of the COVID-19 pandemic on various critical polio activities globally as well as in the SEAR resulting in an increasing number of children with missed polio and other routine vaccine immunizations in some countries.
• At the same time the Commission commended countries for resuming critical activities affected by COVID-19 but highlighted that variable and slow pace of resumption, increases the risk of poliovirus emergence and aggravates chronic subnational coverage and surveillance gaps.
Resources

NEW! WHO resources on Catch-up Vaccination – Now available in French
Stephanie Shendale, WHO Headquarters

Following publication of the English version of new WHO resources on Catch-up Vaccination, the French version is now available.

L’OMS a élaboré des directives pour aider les responsables des programmes nationaux de vaccination à établir ou à perfectionner une politique de vaccination de rattrapage et un calendrier de rattrapage, en tant qu’éléments essentiels d’un programme de vaccination efficace. Maintenant disponible en français.

1. Ne laisser personne de côté : Directives pour la planification et la mise en œuvre de la vaccination de rattrapage.
2. Comblé les disparités en matière de vaccination causées par la COVID-19 (PPT).

Innovations for immunization in the context of COVID-19
Albane de Gabrielli, Gavi, the Vaccine Alliance

The COVID-19 pandemic has caused widespread disruption in immunization programmes in many countries. As countries put in place interventions to maintain, restore and strengthen their immunization services and provide catch-up vaccination for missed children, scaling-up innovations can accelerate these efforts, and help to put in place the foundation for better immunization services.

To support countries in this effort, the Alliance has put together an initial, non-exhaustive, tool and list of 21 innovations that countries could consider depending on their specific needs and context. The list includes innovations that have been tested before in developing country settings, have reached a certain level of maturity and have a reasonable timeline to be implemented in the light of the pandemic. The catalogue is iterative and will be updated regularly, and suggestions for inclusion of other innovations is welcomed.

The catalogue will serve as a discussion starter for EPI teams with the Alliance to reflect on the possibility of addressing COVID-19 related needs through innovation, and to discuss the feasibility and impact of such innovations. View and download the report in English or in French from the
Links

Organizations and Initiatives
American Red Cross
Child Survival
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
IMMUNIZATION basics
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
Boost – A Global Community of Immunization Professionals
UNICEF
Immunization Supplies and Logistics
USAID
USAID Immunization
USAID Maternal and Child Survival 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
Global Polio Eradication Initiative
Immunization Academy
International Association of Public Health Logisticians
Immunization Economics resource
International Vaccine Institute
Measles & Rubella Initiative
Multinational Influenza Seasonal Mortality Study
Network for Education and Support in Immunisation (NESI)
Stop Pneumonia
TechNet (PATH)
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)
WHO/Europe Vaccine-preventable diseases and immunization (VPI) news (EURO)
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)
Immunization Economics Community of Practice