Circulating Vaccine-Derived Poliovirus Type 2 Outbreak in Indonesia

Situation Report No 10 – 4 May 2023

Outbreak response:
- Coordination and planning
- Surveillance
- Immunization response
- Advocacy, social behaviour change, and risk communication

Summary
Outbreak confirmation:
- Total number of AFP cases with cVDPV2: 4
- Total number of healthy children with cVDPV2: 11 (4 in Aceh and 7 in West Java)
- Outbreak grade: 2

Infected Provinces and Districts:
- Aceh Province: 1 case with paralysis each in Pidie, North Aceh and Bireun districts
- West Java province: 1 case with paralysis in Purwakarta district

Index case:
- Source: AFP case
- Location: Mane sub-district, Pidie district
- Onset of paralysis: 9 October 2022
- Sex: Male
- Age: 7 years old
- Vaccination status: 0 dose

Most recent case (by date of onset):
- Source: AFP case
- Location: Maniis Subdistrict, Purwakarta District, West Java Province
- Onset of paralysis: 16 February 2023
- Sex: Female
- Age: 4 years old
- Vaccination status: 0 dose

Outbreak Response:
- Aceh Province: All children 0 to below 13 years
- North Sumatra and West Java Province: All children below 5 years
- Target: 6.5 million children
- Vaccine type: nOPV2

Crash Programme
- West Sumatra and Riau: All children below 5 years (0-59 months: bOPV and 4-59 months: IPV)

Key highlights
- The first round of supplementary immunization activity (SIA) for the type 2 novel oral polio vaccine (nOPV2) in North Sumatra was completed on 14 April 2023 and the second round is planned to start on 15 May 2023. The first round of nOPV2 SIA in West Java province is still ongoing, with the second round planned for implementation on 22 May 2023.
- A crash programme for polio immunization in both Riau and West Sumatra was completed on 14 April 2023.
- A rapid convenience assessment (RCA) was conducted in three districts, West Java province and the results showed that 88.9% of the population had been vaccinated. The most common reason for not being vaccinated was illness.
- On 14 April, the provincial health office (PHO) in North Sumatra, in collaboration with UNICEF, WHO, and UNDP, organized a monitoring and evaluation meeting on the second round of polio SIA. The meeting included coordination for preparations for the second round and PHO North Sumatra invited subnational stakeholders from multiple sectors, district health offices (DHOs), and primary health centers (Puskesmas). The PHO prepared vaccine logistics analysis, and the DHOs and Puskesmas will re-organize microplans. Vaccines for the second round will be distributed by Biofarma on 11 May.
- From 13 to 15 April, WHO, DHO Purwakarta and DHO Cimahi, West Java province held a coordination meeting with hospitals and Puskesmas to strengthen acute flaccid paralysis (AFP) surveillance by encouraging each hospital to have a designated surveillance officer, implement active hospital-based surveillance and increase efforts related to socialization and reporting.
- From 2 to 5 May, the Ministry of Health (MoH) conducted refresher training on AFP surveillance in Aceh, North Sumatra, West Sumatra and Riau. The training aimed to sensitize surveillance officers in hospitals and districts that are considered silent districts.
Situation Update

- A seven-year-old male child from Mane village, Mane sub-district, Pidie district, Aceh Province developed AFP with the onset of paralysis on 9 October 2022. The child did not have any travel history and had never received a polio vaccine (IPV or OPV). Laboratory confirmation of VDPV2 was received on 12 November 2022. Genetic sequencing results showed VDPV2 with 25 nucleotide changes. Whole genome sequencing is pending. Quantitative immunoglobulin test shows that the child is immunocompetent. In Mane, Pidie District, Aceh, 32 stool samples from healthy children in the surrounding area who are not contacts of the case were collected and tested for poliovirus. 4 stool specimens tested positive for VDPV2 with 25-26 nucleotide changes in the viral protein 1 (VP1) region.

- The second case was reported in North Aceh district. A three-year-old male child from Teupin Gadjah village, Tanah Jambo Aye Sub-district, Aceh province developed AFP with the onset of paralysis on 3 January 2023. The child did not have any travel history and had never received a polio vaccine (IPV or OPV) through the routine immunization programme but received the nOPV2 vaccine on 13 December 2022. Laboratory confirmation was received on 26 January 2023. Genetic sequencing results showed VDPV2 with 27 nucleotide changes. Whole genome sequencing is pending. A quantitative immunoglobulin test is also pending.

- The third case was reported in Bireuen district. A four-year-old boy from Meunasah Keutapang village, Jeunieb sub-district, Aceh province developed AFP with the onset of paralysis on 13 January 2023. The child did not have any travel history and had never received any polio vaccine (IPV or OPV) from the routine immunization programme. The child received the nOPV2 vaccine on 6 December 2022 during the first campaign round. Laboratory confirmation was received on 7 February 2023. Genetic sequencing results showed cVDPV2 with 34 nucleotide changes. Whole genome sequencing is pending. A quantitative immunoglobulin test is also pending.

- The fourth case was reported in Purwakarta district. A four-year-old girl from Tegal datar village, Manis Subdistrict, West Java province developed AFP with the onset of paralysis on 16 February 2023. The child did not have any travel history and had never received any polio vaccine (IPV or OPV) from the routine immunization programme. Genetic sequencing results showed cVDPV2 with 30 and 31 nucleotide changes. Following the identification of the latest case in West Java, a field investigation was carried out. The investigation involved collecting and analysing 30 stool samples from healthy children in the surrounding area who were not contacts of the case, seven children are polio positive.

- Based on the examination conducted by the United States Centres for Disease Control (CDC) headquarters, MoH reported that the VDPV2 identified from Pidie district is not genetically linked to any previously sequenced VDPV2 and will be identified as INO-ACE-1. The positive results from the healthy children were examined as well and genetically linked with INO-ACE-1. Therefore, the PV2 virus was classified as cVDPV2.

![Figure 2](image-url)
Outbreak response
 Coordination and planning

- On 18 April, WHO held a meeting with polio partners UNICEF, the United States Agency for International Development (USAID), US Centers for Disease Control and Prevention (CDC), and Rotary International to discuss the current situation, challenges, and support for the outbreak response in Aceh, North Sumatera, and West Java. The second round of polio SIA in North Sumatera will start on 15 May 2023, while the first round in West Java is still ongoing. As a follow-up to the meeting, partners agreed to help improve the recording of nOPV2 on the electronic immunization registry using the Sehat IndonesiaKu (ASI) application, while monitoring vaccine supply and logistics as well as waste management.

Aceh

- On April 14, PHO Aceh held a coordination meeting with WHO, UNICEF, and Save the Children to prepare the agenda for the months of May and June. The meeting focused on several key issues, including strengthening AFP surveillance in silent districts and conducting routine immunization microplanning training in Sabang, Aceh Besar, and Pidie districts. PHO Aceh will also conduct training on how to utilize the electronic immunization registry using the ASIK application for all 23 DHOs in Aceh.

North Sumatra

- On 14 April, PHO North Sumatra in collaboration with WHO, UNICEF and UNDP held a monitoring and evaluation meeting on the first round of polio SIA. More than 400 participants joined virtually from DHOs, Puskesmas, district governments and stakeholders, the Family Welfare Movement (TP-PKK), the Indonesian Association of Early Child Educators (HIMPAUDI), Community and Village Empowerment Office, army, police and cadres. The spouse of the North Sumatra Governor as the head of TP-PKK led the meeting and encouraged all stakeholders to continue support for the implementation of the second round of polio SIA which is planned on 15 May. Meanwhile, the head of PHO shared best practices and lessons learnt from the first round of polio SIA implementation.
On 26 April, PHO North Sumatera and WHO conducted a coordination meeting to plan for the second round of polio SIA. The participants included the head of the surveillance and immunization unit, immunization officers, and WHO representatives. As follow-up, PHO and partners agreed to conduct the following activities: finalize the need and stock balance of nOPV2 vaccine and logistics; refreshers on microplanning and technical implementation of polio SIA; and create a schedule of field visits to assist districts and Puskesmas in monitoring the preparation.

West Java

On April 14, PHO West Java held a coordination meeting with DHO Cianjur, WHO, and Puskesmas Kademangan which had the lowest coverage of nOPV2 in Cianjur district (74.6%). The team conducted data validation and discussed the challenges in conducting nOPV2 immunization. Inconsistencies in the target number remained a major issue, as Puskesmas preferred to use target numbers from Posyandu (N=2,223) rather than from MoH estimates (N=3,867). The WHO team recommended that the DHO conduct weekly data validation with all Puskesmas and adjust the nOPV2 coverage and assist the Puskesmas in providing data analysis.

On April 17, 2023, DHO Cimahi city held a coordination meeting with WHO to discuss the challenges and opportunities related to the nOPV2 campaign. The nOPV2 campaign had only achieved a coverage of 71.3%, indicating a significant in the target population – MoH estimated the target population to be N=46,377, while the microplanning data indicated a target population of N=32,399 Data validation of population size at the district level only conducted twice a year the data validation is implemented while they give Vitamin A. The Vitamin A schedule is twice a year (February and August).

West Sumatra

Agam district, West Sumatera province, has a large population of children under the age of five and is ranked third in terms of target population. However, as of 11 April 2023, coverage rates for the bivalent oral poliovirus vaccine (bOPV) and inactivated polio vaccine (IPV) have not reached their targets in the district, with rates of 69.8% and 51.5%, respectively. On 12-13 April 2023, WHO held a coordination meeting with DHO Agam district which was attended by the head of DHO, CDC manager, head of the surveillance and immunization department, immunization and surveillance officers and head of Puskesmas, to discuss the challenges and develop possible solutions/strategies to improve coverage rates. Three main challenges were identified, including community rejection of IPV, data gaps between national and local targeted population data, and a campaign schedule coinciding with the month of Ramadhan. The activity continued with a visit to Puskesmas Manggopoh and Sungai Pua to monitor implementation of the crash programme.
Riau

- On 12 April, WHO conducted a coordination and refresher meeting with DHO Pekanbaru related to data analysis and a feedback tool for cross-sectoral stakeholders. As a result, DHO Pekanbaru was able to conduct data analysis of the crash programme to cross-sectoral stakeholders at Kelurahan/Village level. This tool can also be utilized for routine immunization, and it is highly expected that the DHO will maintain strong networks with cross sectoral partners for routine immunization activities.

Surveillance

WHO assisted MoH to conduct data analysis on house-to-house visits as part of the polio outbreak response which is available here: [http://link.kemkes.go.id/LaporanHTHSurvey](http://link.kemkes.go.id/LaporanHTHSurvey).

Aceh

- To strengthen AFP surveillance, DHO Banda Aceh conducted a Hospital Record Review (HRR) in several clinics in Banda Aceh: on 24 April, DHO Banda Aceh and WHO conducted an HRR in Harapan Bunda Sentra Medica and Kimia Farma clinics. No AFP suspect cases were found. However, the team met with the medical doctors and the clinic management team to improve collaboration and raise awareness of the significance of AFP surveillance.

North Sumatra

- On 13 April, WHO assisted PHO North Sumatra to conduct a coordination meeting with the head of DHO Padang Sidempuan to increase the commitment of DHO, hospitals, and Puskesmas in achieving targets for AFP surveillance and other vaccine-preventable disease (VPD) surveillance indicators. On the same day, the team held a coordination and socialization meeting on AFP surveillance in Metta Medika hospital, Padang Sidempuan district. The meeting was attended by the director of the hospital, paediatricians, other hospital officers, DHO and the PHO surveillance officer. The hospital management committed to creating a surveillance team and implementing active surveillance in the hospital. The activity continued with an HRR where the team reviewed the register of inpatient units with different diagnoses of AFP. DHO encouraged them to follow up on AFP cases that were still available for specimen collection.
  To strengthen AFP surveillance in Puskesmas, PHO, DHOs and WHO provide technical assistance to the surveillance officer in Puskesmas Pijar Kolding, Padang Sidempuan to review the register of visited patients and identify differential diagnoses that could be followed up as AFP cases coordination with the respective doctors. The Puskesmas will follow up on potential AFP cases that are less than 60 days old for specimen collection.
West Java

- On 13 April, WHO assisted DHO Purwakarta in improving active surveillance at Bayu Asih Hospital, Purwakarta. The meeting was attended by the hospital manager, the head of the installation unit, and the coordinator of paediatric patient rooms, paediatric polyclinic, neurology patient room, and neurology polyclinic. The main challenges discussed were the relatively new surveillance focal point and the need to build coordination and communication between each unit to prevent delayed reporting of VPD surveillance cases. To that end, the hospital will establish a new management system for organizing VPD surveillance reporting and provide a designated person in charge for each of unit. The team also investigated an AFP case in the paediatric room. WHO requested the hospital to report the case and take two stool samples to be sent to the laboratory. However, the hospital faced the challenge of not having a refrigerator available to store the specimen. Therefore, Bayu Asih Hospital will coordinate with the Health Center Training (Bapelkes) laboratory for temporary storage before it will be sent to the national laboratory.

- On 14 April, WHO assisted DHO Purwakarta in implementing on-the-job training in Bayu Asih Hospital as a follow up from the previous coordination meeting. This training was attended by hospital manager, head of installation unit, coordinator of paediatric patient rooms, paediatric polyclinic, neurology patient room, neurology polyclinic, and laboratory Unit. The aim of the training is to improve active AFP case screening, reporting to the surveillance officer and coordination with DHO for investigation, sample collection, and reporting. The surveillance officer would also be active in monitoring AFP and other VPD cases. The training included a practical session on active AFP case finding and reporting from the polyclinic unit to the surveillance officer and how to collect sample and reporting. During the practical session, the head of the paediatric polyclinic and a nurse realised that they did not know how to systematically report case findings. After the session, they were stimulated to socialize the reporting process to other health workers and review the diagnoses on medical records on a daily basis.

- On 14 April, WHO assisted DHO Purwakarta in conducting a coordination meeting on active surveillance at Radjak private hospital. The meeting was attended by the hospital management and the head of each unit such as
paediatric clinic, paediatric patient room, emergency room, etc. The challenge identified was the lack of a surveillance officer. By the end of the meeting, the hospital manager committed to designating a new surveillance officer who will conduct active surveillance and report cases with specific diagnoses such as diarrhoea with severe dehydration.

- On 15 April, DHO Cianjur and WHO conducted an HRR at Cianjur hospital to evaluate AFP surveillance performance and to increase the sensitivity by detecting AFP cases in less than two months. The HRR was conducted in two units including the pediatric ward and physiotherapy unit. In the pediatric ward, five children with malnutrition were identified, and in the physiotherapy unit, 17 patients under 15 years of age with cerebral palsy and three patients under 15 years of age with hemiparesis were identified. Further investigation will be conducted in coordination with the Puskesmas to follow up on whether there is any residual paralysis. During the HRR, barriers related to AFP surveillance performance in the hospital were identified, including a lack of AFP case reporting since last year. The team also conducted on-the-job training for the officer on how to correctly fill out the FP01 form and shared the list of AFP differential diagnoses with the hospital unit.

- In 2022, the non–polio AFP (NP-AFP) in Aceh was 5.7 per 100,000 population under 15 years of age with a specimen adequacy 55%. Now, Aceh reported 49 AFP cases from 18 districts with NPAFP rate of 4.6 per 100,000 population and a specimen adequacy of 74%, even though there are 4 silent districts in Aceh namely Kota Lhoksumawe, Gayo Lues, Aceh Tenggara, and Kota Subulussalam. In West Java, the NPAFP was 2.3 per 100,000 population under 15 years of age. The specimen adequacy was 78.2% in 2022. There is one silent district namely Kota Cimahi. In 2023, West Java reported 143 AFP cases in 24 districts, with an annualized NPAFP rate of 1.67 per 100,000 population under 15 years and a specimen adequacy of 83.7%.
Immunization response

- Two rounds of nOPV2 SIA have been conducted in Aceh province. Based on the MOH official letter dated 17 March 2023, the activity has been completed and PHO, DHOs, and Puskesmas need to validate and finalize the coverage, nOPV2 vaccines and logistics used, and remaining stocks while also strengthening routine immunization and conducting catch-up for children below five years.
- The 1st round of polio (nOPV2) SIA in North Sumatra has been completed by 14 April 2023, and the 2nd round is planned on 15 May 2023.
- The 1st round of polio (nOPV2) SIA in West Java province is still ongoing until further instruction from MOH.
- Crash programme in both Riau and West Sumatra has been completed by 14 April 2023.
- WHO assisted MOH to provide data analysis on the RCA result of the polio outbreak response which is available at https://link.kemkes.go.id/RCAPolioSIA
- WHO field team is assisting PHO and DHO in 20 respective provinces to analyse OPV and IPV coverage as well as strengthening routine immunization by developing an annual plan. Catch-up immunization and strategies for improving performance in priority districts and puskesmas is a focus of implementation.
- Daily coverage monitoring and feedback is provided to local government, PHO, DHO, stakeholders, and implementers.
- As of 2 May, 7,296,988 doses of nOPV2 have been administered during the polio SIA in Aceh, North Sumatra and West Java. In Aceh, 1,169,023 out of 1,217,939 (96.0%) children received the nOPV2 vaccine in the first round and 1,160,505 (95.3%) in the second round, respectively. In North Sumatra, 1,277,046 (94.8%) children out of 1,346,655 received nOPV2 in the first round. In West Java, 3,690,414 (92.6%) out of 3,984,797 children received nOPV2 in the first round.
As of 15 April, 751,957 (65.3%) out of 1,152,310 children aged 0-59 months received bOPV and 629,083 (57.7%) out of 1,090,128 children aged 4-59 months received IPV in both provinces namely West Sumatra and Riau. In West Sumatra, 376,236 (73.4%) out of 512,309 children aged 0-59 months received bOPV and 296,420 (61.1%) out of 484,793 children aged 4-59 months received IPV. Meanwhile, in Riau, 375,721 (58.7%) out of 640,002 children aged 0-59 months received bOPV and 332,663 (55.0%) out of 605,335 children aged 4-59 months received IPV.

North Sumatra

On 28 April, UNICEF and WHO supported PHO North Sumatera to conduct a virtual meeting on the preparation for the second round of polio SIA. The meeting focused on three main topics: updating the micro plan and recording
and reporting form, the desk review and validation of nOPV2 vaccine data from the first round. A total of 68 participants from 33 districts attended the meeting.

- On 17 April, UNICEF supported PHO North Sumatra in conducting data validation of vaccines and logistics of polio SIA. UNICEF emphasized the importance of vaccine and cold chain management, as well as reverse logistics for the upcoming second round of polio SIA.

**West Java**

- On 13 and 14 April, DHO Kota Bekasi and WHO conducted mop-up activities in the Puskesmas Mustika Jaya area. Among the 300 targeted children, 150 (50%) received nOPV2 on those two days. The primary reasons for unvaccinated children are due to sickness (mild fever and diarrhea) and children traveling during vaccination.
- On 13 April, PHO West Java, DHO Cianjur, and WHO conducted a rapid convenience assessment (RCA) in two villages: Ciramagirang and Cinangsi with 20 houses randomly selected in each village. A total of 45 children were assessed, of which 43 were vaccinated, and the remaining two were unvaccinated due to sickness and their fathers’ refusal to vaccinate.
- On 13 April, PHO West Java, DHO Cianjur, and WHO conducted a rapid convenience assessment (RCA) in two villages: Ciramagirang and Cinangsi with 20 houses randomly selected in each village. A total of 45 children were assessed, of which 43 were vaccinated, and the remaining two were unvaccinated due to sickness and their fathers’ refusal to vaccinate.
- On 14 April, DHO Cianjur and WHO conducted an RCA in Bojong and Sindanglaka village, Puskesmas Karangtengah. The RCA’s results showed that out of the 51 children assessed, 45 (88%) were vaccinated, and six were unvaccinated due to sickness.
- On 14 April, WHO assisted DHO Depok City to conduct a sweeping activity in high-risk areas such as slums and places where people have high mobility. The sweeping activities were conducted with the CDC manager of DHO, the head of Puskesmas and the head of the subdistrict leader. The team discovered new children who were not on the target list in the microplans due to newcomers.
- On 17 April, DHO Cimahi city and WHO conducted RCA in Puskesmas Cimahi Utara and Puskesmas Citeureup, where 42 (87%) out of 48 children assessed were vaccinated, and the remaining two were unvaccinated due to sickness and their fathers’ refusal to vaccinate. DHO has encouraged Puskesmas to conduct sweeping activities in several villages.
- On 17 April, WHO and DHO Bekasi City conducted an RCA in Puskesmas Harapan Baru, where 20 (90%) out of 22 children below 5 years were found to be vaccinated with nOPV2. One of the previously unvaccinated children received nOPV2 during the RCA, while the other was unvaccinated due to travel.
- On 18 April, WHO and DHO Bekasi City conducted RCA in Puskesmas Teluk Pucuk, from 24 children below 5 years found 19 (79%) vaccinated nOPV2. All (5) unvaccinated children received nOPV2 during RCA.
Riau
On 12 April, WHO conducted a monitoring visit to Posyandu Bunga Matahari, located in Puskesmas Payung Sekaki, Pekanbaru city to observe the crash programme implementation. Despite being the highest population target in Pekanbaru city, the coverage rate was less than 20% based on national targeted population data. Unfortunately, the decision to only open post-immunization in Posyandu instead of conducting a mop-up activity to reach unvaccinated children led to many parents rejecting immunization due to fear of adverse events following immunization (AEFI). The serious AEFI case in Pekanbaru city had already lowered the demand for immunization and had affected the confidence of health workers to provide immunization, especially multiple injections. However, WHO provided direct feedback and suggestions to improve the practice of multiple injections and recording and reporting during the immunization session, which could potentially improve the situation.

Advocacy, social behaviour changes, and risk communication

Advocacy

North Sumatra
- From 10-12 April, WHO collaborated with PHO North Sumatera to conduct advocacy activities with the district governments of Simalungun and Labuhan Batu Selatan. The aim of the advocacy was to strengthen the role of the district governments in supporting and committing to the target of achieving 95% coverage for polio SIA. As a result of the advocacy, the district governments established a WhatsApp group to coordinate and monitor the daily progress of polio SIA in the districts. Additionally, the heads of puskesmas were tasked with leading sweeping activities to ensure the 95% coverage target was met.

West Java
- On 28 April, an advocacy and socialization session on AFP surveillance was conducted for surveillance officers in hospitals in Purwakarta district. The meeting was attended by representatives from the MoH, PHO, the National Paediatric Committee, WHO, DHO Purwakarta, Puskesmas, and hospitals. Following the meeting, DHO Purwakarta will advocate for the appointment of a person in charge of VPD surveillance and provide a letter to the hospitals. The hospitals and health centers in the district were encouraged to report AFP cases actively. The local laboratory will keep the sample from the hospital before sending it to the Biofarma laboratory, and the DHO will conduct investigations and collect samples as necessary.
Risk Communication

- Stories of the outbreak response, and how to raise awareness of the community and strengthen the performance of the immunization programme in Aceh and West Java were developed by WHO’s communication team.
- UNICEF, in collaboration with MOH and WHO developed information, education, and communication (IEC) materials for the Polio SIA in West Java, intended for parents/caregivers and health workers. The IEC materials contained information on the first round of the polio SIA and the importance of parents bringing their children to get nOPV2 vaccine. The IEC materials aimed to educate health workers on multiple aspects related to polio vaccination, including the management of nOPV2 vaccine at province, district, and Puskesmas levels, as well as guidelines for vaccinating immunodeficient children.
• For the polio SIA in West Java, UNICEF supported the provision of a knowledge management portal which contained all information about the polio outbreak and the response in West Java. The link to the portal was integrated into the government of Bandung’s official website (jabarpov.go.id) so that it could be accessed by the public. The link for the polio knowledge management portal is s.id/poliojabar.

Logistics

• On 14 April, PHO North Sumatera in collaboration with UNICEF, WHO and UNDP, organized a virtual refreshment meeting on vaccine management to DHOs and Puskesmas. UNICEF presented best practices for vaccine management in North Sumatera and updated participants on nOPV2 and routine immunization vaccine handling and cold chain management. Following the meeting, PHO North Sumatera committed to finalizing the number of vials used and remaining stock vaccine that can be used for the second round.

• On 17 April, UNICEF supported PHO North Sumatera in conducting a virtual meeting on nOPV2 vaccine management and reverse logistics. The objective of the meeting was to provide orientation on cold chain management, to validate data on vaccines and logistics, and to confirm the remaining balance from the first round of the polio response. The meeting was attended by immunization officers and pharmacy staff from all districts in North Sumatera. The follow-up action from this meeting was to complete and compile the final data on nOPV2 vaccine stocks in each district, including data on missing vials. Special emphasis was made on tracking and retrieving every single remaining vial in the field with full accountability.

• UNICEF provided technical assistance in updating the vaccine and cold chain logistics plan. UNICEF also followed up on the nOPV2 allocation of 6.4 million doses for the first round of the cVDPV2 case response in West Java and the second round of the case response in North Sumatra provinces in coordination with MoH and WHO.

• On 28 April, PHO West Java conducted an evaluation meeting for the first round of polio SIA where participants discussed and validated the data on nOPV2 vaccines used during the first round, the remaining vials, and the missing vials.
Surge Support

MoH
- MoH continues to monitor and evaluate the implementation of the polio outbreak response in Aceh and West Java. The expansion of the response is implemented to close-by provinces of North Sumatra, Riau, and West Sumatra.
- MoH is regularly providing feedback on polio vaccination and surveillance updates.

WHO
- WHO deployed national staff in Aceh, North Sumatra, West Java, West Sumatra, and Riau provinces and international staff in Aceh and West Java to intensify support for the polio outbreak response. Their support focuses on technical assistance related to vaccine mobilization, assessment, advocacy, surveillance, data quality monitoring, laboratory testing and specimen shipment, and capacity building of health workers.

UNICEF
- UNICEF established to support technical assistance with primary focus immunization, advocacy, communication for development, and vaccine management in Aceh, West Java and North Sumatera. This supports comes from National staff and field staff.

ROTARY
- Support with social mobilization (banner, balloon, T-shirt) on during Polio SIA launching in Pidie district and Banda Aceh city, Aceh province as well as in Purwakarta district, West Java province.
- Join health workers and communities to “Posyandu” and door-to-door to children’s houses for several days. Also, support them with T shirts
- Give the children some gifts such as balloons, small plastic balls
- Support the first and the four children with cVDPV2 for transportation from their house to the hospital for further examination and hospitality.
- Give the first child with cVDPV2, in Pidie district, Aceh province a bicycle for his exercise.

Key Issues
- Depok, Bandung, Cimahi, and Bekasi in West Java Province and sweeping activities as they have a larger population target and are adjacent to Jakarta. MoH has scheduled an RCA and evaluation meeting in Kota Depok and in Kota Bandung for next week.
- A private clinic has declined the administration of children with nOPV2, stating that they have already received IPV and OPV vaccination and do not require nOPV2
- The Hospital in Purwakarta has designated a surveillance officer to report VPD cases
- MOH officials monitored AFP surveillance activities in silent districts across 5 Provinces including Aceh, North Sumatera, West Sumatera, Riau, and West Java.
- The government of Aceh government to enhance routine immunization in the Province, and has prepared a new regulation which has been forwarded to the Ministry of Home Affairs for approval.
- UNICEF is conducting a two-week training on EVM management in Yogyakarta.

Next Steps
- Weekly tracking of preparedness for the next mass vaccination response campaign at national, provincial, and district levels is to be conducted with special attention on the low-performing districts. Information is to be shared regularly with Global Polio Eradication Initiative (GPEI) partners.
- Follow up on vaccine distribution for the second round of polio SIA in North Sumatra and the request needed for nOPV2 for the second round in West Java.
Relevant Links

- [http://polioeradication.org/](http://polioeradication.org/)
- [https://www.who.int/indonesia/emergencies/polio-outbreak](https://www.who.int/indonesia/emergencies/polio-outbreak)

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