Regional Vaccine Action Plan goals/targets

Impact of COVID-19 pandemic

South-East Asia Region Immunization Technical Advisory Group Meeting
9 August 2021
Global infant immunization coverage (DTP3) dropped to 83% in 2020. 22.7 million un-and under vaccinated infants in 2020.
Immunization coverage (DTP3) in SEA Region dropped from 91% (2019) to 85% (2020). Number of un-or under vaccinated children increased from 3mn to 4.9 mn.

Several countries have maintained immunization coverage (DTP3) above 90% in 2020.


Data source: Monthly routine immunization data from Member States
Backsliding of immunization coverage (DTP3) in other countries due to temporary disruptions in immunization services


Data source: Monthly routine immunization data from Member States
Subnational variability in immunization coverage (DTP3)

<table>
<thead>
<tr>
<th>Category</th>
<th>2019</th>
<th>2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;70%</td>
<td>3%</td>
<td>4%</td>
</tr>
<tr>
<td>70-79%</td>
<td>7%</td>
<td>12%</td>
</tr>
<tr>
<td>80-89%</td>
<td>17%</td>
<td>24%</td>
</tr>
<tr>
<td>≥90%</td>
<td>73%</td>
<td>60%</td>
</tr>
</tbody>
</table>

Note: subnational units of Bhutan, Maldives, Sri Lanka and Timor-Leste representing district while others are representing provinces

Data source: SEAR Annual EPI reporting form 2019-2020
**Immunization gaps for various antigens - 2020**

<table>
<thead>
<tr>
<th>Country</th>
<th>DTP1</th>
<th>DTP3</th>
<th>IPV*</th>
<th>MCV1</th>
<th>MCV2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bangladesh</td>
<td>28 206</td>
<td>56 412</td>
<td>112 825</td>
<td>84 619</td>
<td>197 444</td>
</tr>
<tr>
<td>Bhutan</td>
<td>504</td>
<td>630</td>
<td>883</td>
<td>883</td>
<td>1 009</td>
</tr>
<tr>
<td>DPR Korea</td>
<td>7 016</td>
<td>10 524</td>
<td>7 016</td>
<td>3 508</td>
<td>3 508</td>
</tr>
<tr>
<td>India</td>
<td>3 037 954</td>
<td>3 505 332</td>
<td>4 440 087</td>
<td>2 570 577</td>
<td>4 440 087</td>
</tr>
<tr>
<td>Indonesia</td>
<td>797 234</td>
<td>1 078 610</td>
<td>2 954 454</td>
<td>1 125 506</td>
<td>2 391 701</td>
</tr>
<tr>
<td>Maldives</td>
<td>68</td>
<td>68</td>
<td>68</td>
<td>68</td>
<td>272</td>
</tr>
<tr>
<td>Myanmar</td>
<td>117 735</td>
<td>144 905</td>
<td>36 226</td>
<td>81 509</td>
<td>90 566</td>
</tr>
<tr>
<td>Nepal</td>
<td>60 264</td>
<td>87 657</td>
<td>147 922</td>
<td>71 222</td>
<td>142 443</td>
</tr>
<tr>
<td>Sri Lanka</td>
<td>12 966</td>
<td>12 966</td>
<td>12 966</td>
<td>12 966</td>
<td>12 966</td>
</tr>
<tr>
<td>Thailand</td>
<td>6 916</td>
<td>20 748</td>
<td>20 748</td>
<td>89 908</td>
<td>89 908</td>
</tr>
<tr>
<td>Timor-Leste</td>
<td>4 804</td>
<td>5 173</td>
<td>5 912</td>
<td>7 760</td>
<td>8 129</td>
</tr>
<tr>
<td><strong>SEA Region</strong></td>
<td><strong>4 073 668</strong></td>
<td><strong>4 923 026</strong></td>
<td><strong>7 739 107</strong></td>
<td><strong>4 048 524</strong></td>
<td><strong>7 378 032</strong></td>
</tr>
</tbody>
</table>


*IPV dose refers to IPV1 or fIPV2*
Surveillance for vaccine-preventable diseases has also declined in several countries in 2020 & 2021.

**Non-measles and non-rubella discarded case rates by country**

<table>
<thead>
<tr>
<th>Country</th>
<th>2019</th>
<th>2020</th>
<th>2021</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bangladesh</td>
<td>3.50</td>
<td>1.93</td>
<td>1.34</td>
</tr>
<tr>
<td>Bhutan</td>
<td>38.97</td>
<td>15.98</td>
<td>15.61</td>
</tr>
<tr>
<td>DPR Korea</td>
<td>2.06</td>
<td>2.03</td>
<td>1.67</td>
</tr>
<tr>
<td>India</td>
<td>1.03</td>
<td>0.77</td>
<td>0.79</td>
</tr>
<tr>
<td>Indonesia</td>
<td>1.89</td>
<td>0.95</td>
<td>0.37</td>
</tr>
<tr>
<td>Maldives</td>
<td>18.05</td>
<td>41.54</td>
<td>3.29</td>
</tr>
<tr>
<td>Myanmar</td>
<td>2.39</td>
<td>0.42</td>
<td>0.06</td>
</tr>
<tr>
<td>Nepal</td>
<td>5.42</td>
<td>3.15</td>
<td>3.70</td>
</tr>
<tr>
<td>Sri Lanka</td>
<td>1.52</td>
<td>0.33</td>
<td>0.21</td>
</tr>
<tr>
<td>Thailand</td>
<td>5.87</td>
<td>1.61</td>
<td>0.47</td>
</tr>
<tr>
<td>Timor-Leste</td>
<td>31.03</td>
<td>7.08</td>
<td>2.73</td>
</tr>
<tr>
<td>SEA Region</td>
<td>1.66</td>
<td>0.98</td>
<td>0.81</td>
</tr>
</tbody>
</table>
Notable achievements of the Region that are at risk

• Polio-free status of the South-East Asia Region (achieved in 2014)
• Maternal and neonatal tetanus elimination status of the Region (achieved in 2016)
• Progress towards flagship programme of the Region – “measles and rubella elimination by 2023”
  • Elimination of measles in 5 countries of the Region (achieved between 2017 and 2019)
  • Elimination of rubella in 2 countries of the Region (achieved in 2020)
• Hepatitis-B control through immunization in 4 countries of the Region (achieved in 2019)
Key elements:

- **Alternative strategies/innovations** for conducting fixed and outreach sessions during high transmission of COVID-19
- **Catch-up vaccination** for missed children (infants, school going), adolescents and pregnant women
- **Infection prevention and control** during EPI sessions
- **Communication strategies** and tools
- **Guidance on conducting VPD surveillance** during COVID-19 transmission
India: Tailored approach for immunization strengthening in districts

**Districts prioritized** based on:
- Decline in immunization coverage during COVID-19 pandemic
- Districts with traditionally inadequate immunization coverage
- High incidence of VPDs (diphtheria, measles, pertussis and rubella)
- Other criteria: surveillance quality and demographic factors

**LOW RISK**
(313 DISTRICTS)
- Identify and enlist missed children and pregnant women
- Resume sessions at migrant sites
- Arrange catchup activities for missed areas/children

**MEDIUM RISK**
(192 DISTRICTS)
- Assess impact of COVID-19 restrictions on immunization
- Plan one additional session for two missed sessions
- Address gaps of human resources, social mobilization, and other reasons

**HIGH RISK**
(250 DISTRICTS)
- Head count survey to identify missed children
- Two rounds of Intensified Mission Indradhanush (PIRI) to reach missed children
- Continue follow up through routine immunization sessions

Mission Indradhanush 3.0 (PIRI) conducted:
- More than 542,000 children and 124,000 pregnant women vaccinated
Strengthening routine immunization & VPD surveillance in Cox’s Bazar

- Cox’s Bazar host to ~900,000 Rohingya refugees

- Routine EPI plans strengthened
  - Additional teams
  - Increased # days of fixed sessions
  - Mobilization efforts enhanced
  - App-based monitoring of immunization
    - > 15,000 children monitored; data used for action

- VPD surveillance strengthened using EWARS and WHO SIMO network
  - Environmental surveillance for polio established

Source: DHIS2 and E-SIMO report, December 2000
Independent monitoring of RI sessions in priority countries
Polio/immunization networks extensively involved – example: Bangladesh

Monitoring:
• COVID-appropriate behaviour at vaccination session sites
• availability of vaccines/ logistics
• processes at vaccination sites
• house to house community monitoring to identify reasons for missing due RI doses
• accountability frameworks
• performance feedback
Monitoring COVID-appropriate behaviors at RI sessions - example: India

- Staggered approach to avoid overcrowding
  - Yes: 87%
  - No: 13%

- Physical distancing followed at session
  - Yes: 74%
  - No: 26%

- Caregivers wearing face mask
  - Yes: 90%
  - No: 10%

- Vaccinators wearing face mask
  - Yes: 36%
  - Some: 40%
  - None: 24%
  - All: 24%

N=216,500
Polio and MR SIAs conducted in the Region – April 2020 onwards

**Polio SIAs:**

- **India**: 2020: bOPV campaigns: 2 sub-national rounds; > 65 million children vaccinated (age 0 to 5 yrs); coverage: 97% (as assessed through independent monitoring)

- **India**: 2021: bOPV campaigns: 1 nationwide and 1 sub-national; > 191 million children vaccinated (0 to 5 yrs); coverage: 97% (as assessed through independent monitoring)

- **Indonesia** – preventive IPV campaign: 130,000 children vaccinated (age 4 months to 15 yrs) in high-risk districts

- **Timor-Leste**: Sub-national campaign in high-risk areas of 13 municipalities: 46,000 children vaccinated (age 0 to 5 years)

**MR SIAs:**

- **Bangladesh** postponed MR SIA by 9 months but completed in 2021: 36.5 million children (age: 9 months to 9 years) vaccinated: >100% admin coverage; CES awaited

- **Nepal** halted MR SIA in 2020; reinstated after 2 months and completed; 2.56 million children (age: 9-59 months) vaccinated, > 100% admin coverage; CES awaited
Nepal: MR campaign during COVID-19 pandemic - linkages to RI

- **Linking MR SIA to RI**
  - MR SIA used as an opportunity to identify zero/partial dose children
  - List of missed children shared with concerned health institutions
  - Ensuring missed children are vaccinated in the next RI session
  - Evaluation planned

- **Strong political commitment and prioritization of immunization at all levels was key to success of MR SIA**
  - Local level governance helped mobilize PPE quickly

- **Exemplary community demand** even during COVID-19 pandemic
  - Adherence to infection prevention measures practiced; not always perfect
Polio transition – progressing but some risks

- Transition Independent Monitoring Board recognized SEA Region most advanced in polio transition
  - strong commitment from highest levels of WHO and Ministries of Health
  - polio fully integrated with immunization; support during emergencies
  - major concern: financial sustainability; plans don’t have long-term horizon

- National transition plans available for polio priority countries
  - Pace of implementation hindered due to COVID-19 and in-country factors

- Network personnel deployed for COVID-19 response

- Significant decline in GPEI funding from January 2022
  - WHO corporate funding assured to cover gaps until June 2022
  - Longer-term financial sustainability essential
New vaccines introduced - increasing range of protection

Rotavirus vaccine in Myanmar, Nepal and Thailand
HPV in Myanmar
PCV expansion in India 6 to 25 states
Rubella containing vaccine in DPR Korea
Summary

• Backsliding of immunization coverage in several countries of SEA Region in 2020

• Vulnerability to outbreaks of VPDs increased – several achievements at risk

• Surveillance for polio, measles & rubella (and other VPDs) impacted negatively

• Efforts to revive immunization coverage and VPD surveillance performance ongoing in all countries of the Region; will require strong actions to plug gaps created and make further progress
Way forward

• Focus on high-risk population groups/areas at sub-national level with tailored strategies to reach and vaccinate through SIAs, PIRI, catch-up or sweeping activities – increasing access and utilization

• Policies to relax age barriers for catch-up vaccination with EPI antigens

• Periodic in-depth sub-national reviews of measles/rubella/ AFP and other priority VPD surveillance indicators and identify and implement evidence-based actions

• Continued enhanced coordination between NITAGs and national immunization programmes for oversight and guidance