

Vaccination²⁰¹³ Week in the Americas

VACCINATION: A SHARED RESPONSIBILITY



20-27 APRIL 2013

FINAL REPORT

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Vaccination Week in the Americas 2013

20-27 APRIL 2013

BACKGROUND | VACCINATION WEEK IN THE AMERICAS

In 2002, prompted by a measles outbreak in Venezuela and Colombia, the health ministers of countries in the Andean region proposed a coordinated international vaccination effort to help prevent future outbreaks. This proposal led to the creation of Vaccination Week in the Americas (VWA), which was held for the first time in April 2003; later that same year VWA was endorsed by a resolution during the Directing Council of the Pan American Health Organization (PAHO).

Led by the countries and territories of the Region, VWA is an effort to advance equity and access to vaccination. Through reaching out to populations with little access to regular health services, such as those populations living in urban fringes, rural and border areas and in indigenous communities, VWA activities strengthen the national immunization programs in the Americas.

The initiative also provides a platform to raise public awareness regarding the importance of immunization and to keep the topic on the forefront of political agendas and in the media spotlight.

April 2013 marked the 11th year that the countries and territories of the Americas and the Pan American Health Organization have celebrated VWA. Over the last decade, more than 465 million people have been vaccinated under the umbrella of the initiative and during this time VWA has become a bright example of what can happen when countries work together, across borders and in different languages, to improve their populations' health.

MORE THAN
465 MILLION
INDIVIDUALS
OF ALL AGES
HAVE BEEN
VACCINATED
DURING
CAMPAIGNS
CONDUCTED
UNDER THE
FRAMEWORK
OF VWA.

VWA OBJECTIVES

- To promote equity and access to immunization
- To promote the transition from child to family immunization
- To maintain immunization on the political agenda
- To promote communication and cooperation between countries
- To serve as a platform for integrated activities



Pictured Above: PAHO Director, Carissa F. Etienne with Ministers of Health from Guatemala and Belize at a joint launching event in April 2013.



BACKGROUND | WORLD IMMUNIZATION WEEK

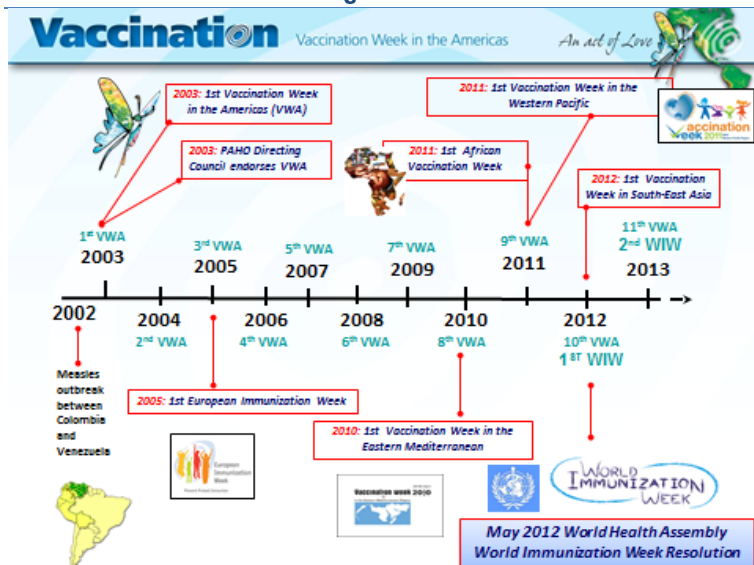
Following the initial success of VWA, in 2005, the Regional Office for Europe of the World Health Organization (WHO) came on board with their own similar sister initiative, European Immunization Week. Europe was followed in 2010 by the Regional Office for the Eastern Mediterranean, in 2011 by the Regional Offices for Africa and Western Pacific, and in 2012 by the Regional Office for South-East Asia. Each regional vaccination week effort has been specifically adapted to meet the diverse needs of Member States in that Region.

The above global movement of regional vaccination week initiatives culminated in the creation of [*World Immunization Week \(WIW\)](#) in 2012. WIW was endorsed at the 65th World Health Assembly (WHA) in May 2012 through Resolution 65.18 (Annex 1), and is officially held during the last week of April each year under the slogan "Protect your world – get vaccinated." WIW is coordinated by WHO and serves as an overarching framework for each Region's vaccination week activities. It also provides the opportunity for every Region to collaboratively work towards achieving common global public health goals, such as the elimination of polio and other goals outlined in the [*Global Vaccine Action Plan \(GVAP\)](#).



This year marked the second anniversary of World Immunization Week, which was celebrated at the global level by more than 180 countries. Among a multitude of efforts to celebrate this achievement, WHO authored a collection of feature stories from each WHO Region, highlighting the work being done in fighting vaccine-preventable diseases across the globe. The stories were made available on the WHO website and can be found through the following link: [*stories from countries](#).

Timeline for introduction of Regional Vaccination Weeks



[African Vaccination Week](#)

Save lives. Prevent disabilities. Vaccinate

[Vaccination Week in the Eastern Mediterranean](#)

Stop measles now!

[European Immunization Week](#)

Protect. Prevent. Immunize

[Immunization Week in South-East Asia](#)

Intensification of routine immunization

[Immunization Week in the Western Pacific](#)

Finish the job – no more measles for anyone

[Vaccination Week in the Americas](#)

Vaccination: A Shared Responsibility

REGIONAL VWA COMMUNICATION CAMPAIGN

The regional VWA slogan in 2013 was: “Vaccination: A Shared Responsibility.” This slogan was chosen to highlight the fact that each and every person has a role to play in fighting vaccine-preventable diseases. Governments fund programs; national immunization programs organize activities; healthcare workers spread out to the farthest corners of the hemisphere to vaccinate not only in cities but also in rural and border areas and other hard-to-reach areas; and communities and families ensure that their children are present to receive this life-saving intervention.

PRINT MATERIALS

In 2013, 25,000 posters were printed and shipped by PAHO to Member States in Creole, English, and Spanish. Digital versions were made available on the VWA website, in addition to versions in French, and Portuguese. (www.paho.org/vwa). Additionally 91,800 stickers were produced and distributed to Member States for promotional use.

There were two themes to this year’s posters. The first design represented vaccination as a shared responsibility through the visual of different hands reaching out across the globe. The second design was a group of children’s Sesame Street characters thanks to PAHO’s ongoing partnership with the Sesame Workshop.

SOCIAL MEDIA

Social Media was a strong facet of the communication strategy in 2013. Facebook, Twitter, and YouTube were utilized to send messages to partner organizations, Ministries of Health, and the general public. Updates, news stories, and photos were shared in real time for VWA activities that were held across the Region.

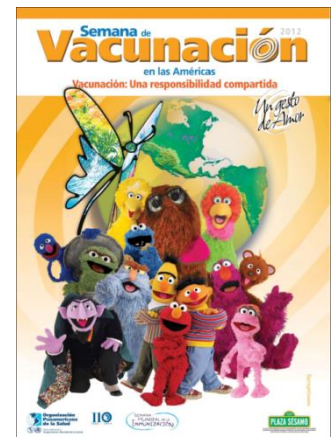
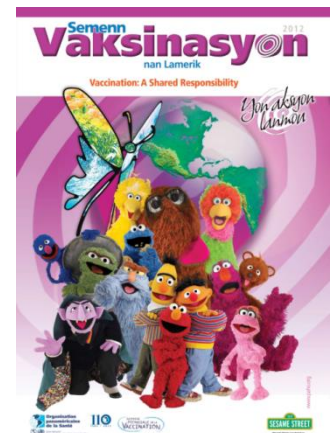
VWA was promoted both through the official PAHO/WHO Facebook and Twitter accounts and through the PAHO/WHO Vaccination Facebook and Twitter accounts. PAHO’s regional Facebook page featured 30 posts with photos and content highlighting the launch events, “myths and facts” about vaccines, and regional achievements, among other topics, which were viewed over 85,000 times. On Twitter, PAHO sent 34 tweets to 226,906 followers in English and 38 tweets to 290,943 followers in Spanish (including retweets).

PAHO/WHO Vaccination Facebook: www.facebook.com/PAHO.IM

PAHO/WHO Facebook: <https://www.facebook.com/PAHOWHO>

PAHO/WHO Vaccination Twitter: https://twitter.com/PAHOWHO_VAX

PAHO/WHO Twitter: <https://twitter.com/pahowho>



PAHO Director, Carissa F. Etienne released a Public Service Announcement (PSA). Video is linked to the VWA homepage and can also be found here: <http://www.youtube.com/watch?v=EYIpigzi0vY>

REGIONAL MEDIA COVERAGE

VWA presents an opportunity for countries to highlight immunization issues through print media, radio, television, websites and social media across the Americas. This year, VWA was covered by the news media in more than 29 countries across the region.

Media advisories and press releases produced and disseminated by the KMC Team at PAHO headquarters and by communicators in the country offices were picked up by the print media, radio, television, websites and social media throughout the Americas.

The two regional VWA launches, held in the Adjacency Zone between Belize and Guatemala and in Haiti and described in greater detail below, generated coverage within those countries and internationally. PAHO's Knowledge Management and Communication team (KMC) coordinated a series of telephone and in-person interviews of the Director and technical staff with U.N. Radio, Radio Francia Internacional, and CNN en Español.

In addition, the team coordinated press contacts and press conferences with PAHO country office staff and, in some cases, with health authorities.

In Belize, Channel 5, Channel 7, KREM Radio, Love FM attended the launch event and interviewed the Minister of Health and Dr. Etienne, PAHO Director. In Guatemala, media including Prensa Libre, Siglo 21, El Periódico and TelesurTV were among the news outlets that covered Vaccination Week.

In Haiti, PAHO's Director completed interviews with the Miami Herald and EFE focused on both Vaccination Week and cholera. EFE's wire story, headlined "La OPS trabajará para erradica el cólera en Haití," was published widely.

In addition to information about the launches and country campaigns, the KMC Team also disseminated a press release on the PAHO Revolving Fund and its role in helping countries procure high quality, low cost vaccines, which was picked up by a number of news outlets.

SELECTED VWA MEDIA LINKS

INTERVIEWS WITH THE DIRECTOR

MIAMI HERALD

Haiti launches vaccination campaign against fatal childhood disease:

<http://www.miamiherald.com/2013/04/27/3366885/haiti-launches-vaccination-campaign.html>

EFE

La OPS afirma que trabajará en erradicar el cólera en Haití

<http://ar.noticias.yahoo.com/ops-afirma-trabajar%C3%A1-erradicar-c%C3%B3lera-hait%C3%AD-004800897.html>

INTERVIEWS WITH TECHNICAL EXPERTS

RADIO FRANCIA INTERNACIONAL

<http://www.espanol.rfi.fr/ciencia/20130425-america-latina-cebra-su-semana-de-la-vacunacion>

RADIO ONU

<http://www.unmultimedia.org/radi/spanish/2013/04/instan-a-mantener-esfuerzos-de-vacunacion/>

NATIONAL COMMUNICATION CAMPAIGNS

As part of the celebration of VWA, many national immunization programs implemented specialized communications campaigns and targeted messages to improve public awareness regarding the importance of immunization for good health. Countries also developed unique communication materials to align more closely with their national activities, in addition to utilizing those materials shipped from the regional office.

Among many examples, Panama adapted the regional slogan, "Vaccination: A Shared Responsibility," and created their own slogan "The Health Sector Sharing Responsibility with the Community and Private Enterprise." Panama also held a variety of communication activities including a boat cruise for diabetics and the elderly. During the cruise, vaccinations were administered and promotional material was given to those in attendance.

Anguilla held a jingle competition with six participating preschools and Grenada held an immunization quiz competition among 5 primary schools. Jamaica held educational sessions at parenting and early childhood resources centers. Montserrat organized a symposium with various departments in the Ministry of Health and Education on immunization issues.



Peru held a training for communicators and journalists about the importance of reporting on vaccines and the protection that they offer for children, families, and communities.

Uruguay held an activity at the medical clinic "Nueva Esperanza" to raise awareness about the importance of immunizations. The activity attracted people in the neighborhood with music, games, balloons, candy, costumes, and other activities for children.



WINNING JINGLE-Anguilla competition

Vaccination is for you, me and everybody too.
From the time you are a baby,
Vaccinate, it's not too early.
It helps prevent diseases too,
Like Mumps, Rubella, and the Flu.

Some people say it's no good,
To get immunized you're a fool,
Do not worry with what they say,
Get your shots anyway.
It is better to survive,
So get immunized and stay alive.

If you do not vaccinate
Then when you are sick it will be too late.
Tell your friends, be neighborly,
VACCINATION: A SHARED RESPONSIBILITY.
Vaccination is for you, me, and everybody too.

VWA LAUNCHING EVENTS

Events were held in the majority of countries throughout the Region to launch the 11th anniversary of VWA. Many of these celebrations included the participation of both high level authorities and local leaders. These events were held in a variety of locations, from bi-national and tri-national borders, to large metropolitan areas and small towns, in countries such as Argentina, Brazil, Ecuador, El Salvador, Honduras, Nicaragua, Panama, Peru and Uruguay, among many others. In some countries and territories of the English-speaking Caribbean, such as Anguilla, Barbados, Montserrat and St. Vincent and the Grenadines, health authorities participated in community church services to launch the week.

Two celebrations served as the official regional VWA 2013 launches, one at the Adjacency Zone between Belize and Guatemala on April 24th and the second in Port-au-Prince, Haiti on April 27th.

Among those in attendance at the regional launch in the Adjacency Zone between Belize and Guatemala were Dr. Carissa F. Etienne, Director of PAHO, Hon. Pablo Marin, Minister of Health of Belize, Dr. Jorge Villavicencio, Minister of Health of Guatemala, and Mr. Roberto Valent, UN Coordinator on behalf of the Mr. Ban Ki-moon UN Secretary General.

The regional launching event in Haiti counted with the presence of Dr. Florence Duperval Guillaume, Minister of Public Health and Population of Haiti, Dr. Etienne, and high level representatives from key partners such as the GAVI Alliance, the United Nations Children's Fund (UNICEF), the United States' Centers for Disease Control and Prevention (CDC), the Canadian International Development Agency (CIDA), the tripartite cooperation Brazil-Cuba-Haiti, and the Haitian Red Cross, among others.

Of additional note, on April 22nd, the first joint launching between Guyana and Suriname in the history of VWA was held. Around 400 people attended this event. Key participants included Ministry of Health officials from both countries, as well as PAHO and UNICEF Representatives. Dances and poems by children of the community accompanied the ceremony followed by children of all ages being vaccinated.

Other bi-national celebrations in 2013 included simultaneous launches on April 19th, one at the border between Panama and Costa Rica and the other at the Panama - Colombia border. Honduras and Guatemala held a bi-national launching ceremony in Río Coto, Omoa on April 25th. Brazil, Peru, and Colombia also held a tri-national launching event in Leticia, Amazonas (Colombia).

For additional photographs of VWA 2013 events around the Region, please see Annex 2.



Symbolic Polio Vaccination to Children after the Opening Ceremony at the Regional Launch at the Adjacency Zone between Belize and Guatemala



Speakers at the Regional launching event in Haiti on April 27th



Leticia – Amazonas. Lanzamiento Tripartita Brasil – Perú – Colombia.

COUNTRY VACCINATION CAMPAIGNS

Country participation in VWA is flexible to allow countries to undertake vaccination-related activities or campaigns which will be the most beneficial in strengthening their national immunization program, leading in turn to a reinforced regional immunization program. Despite the diverse array of activities which take place under the umbrella of VWA each year- ranging from mass vaccination campaigns, to outreach activities in remote areas, to the protection of occupational risk groups, among many others, generally country efforts can be categorized according to the three strategic areas of PAHO's Regional Immunization Vision and Strategy (RIVS): namely efforts to either (1) protect the achievements, (2) complete the unfinished agenda, and (3) confront new challenges.

Protecting the Achievements

Elimination of Measles, Rubella and Congenital Rubella Syndrome (CRS)

Polio Eradication

Completing childhood schedules

Maintain achievements of hepatitis B and pertussis control

Completing the Unfinished Agenda

Protection of occupational risk groups

Risk reduction for seasonal influenza and yellow Fever

Eliminate maternal and neonatal tetanus

Confronting New Challenges

Introduction of new vaccines such as rotavirus (RV), pneumococcal (pnuemo), and human papilloma virus (HPV)

Strengthening of occupational capacity and infrastructure of national immunization programs

Increased use of VWA as a platform for integrated activities



Minister of Health of El Salvador administering the a vaccine to a young child at the VWA launching event in 2013



PAHO Director, Carissa F. Etienne, giving a vaccine at the Belize-Guatemala launching event in 2013.

Due to the depth, breadth and overlapping nature of many country efforts, the following section is not meant to be a comprehensive summary of VWA results, but instead to provide a sampling of countries' achievements

under the framework of the initiative in 2013. Specific quantitative results reported to PAHO/WHO in 2013 can be found in Tables 1 and 2.

1. Protecting the achievements: *polio eradication, measles, rubella and CRS elimination, completion of vaccination schedules, and hepatitis B and pertussis control*

- Cuba, Mexico and Nicaragua took advantage of VWA 2013 to implement campaigns to indiscriminately vaccinate children against **polio**; in the later two countries, polio vaccination was part of larger national campaigns to complete vaccination schedules with all antigens. While it has been 19 years since polio was eliminated from the Americas, countries must continue to be vigilant, due to the ever-present risk of disease importation from regions where poliovirus continues to circulate. Selected country results include:
 - In Nicaragua, an additional dose of polio vaccine was administered to all children less than 5 years of age. The country applied a total of 702,111 doses, achieving 105% of their pre-established goal.
 - In Mexico, 9,397,776 doses of polio were administered at the national level
- Uruguay implemented a measles campaign as part of their VWA celebrations in order to protect and sustain the **elimination of measles, rubella and CRS** in the Americas and in anticipation of the risk of measles case importations in the context of the 2014 World Cup to be held in Brazil. Priority groups for vaccination included individuals born between 1965 and 1987 who were unable to prove they had received two doses of MMR vaccine.
- Thirteen Latin-American countries (Bolivia, Brazil, Colombia, Dominican Republic, Ecuador, El Salvador, Honduras, Mexico, Nicaragua, Panama, Paraguay, Peru and Venezuela) took advantage of VWA 2013 to intensify activities of the routine national immunization programs and systematically administer multiple antigens **to update and/or complete the vaccination schedules of children less than five years of age**. Countries frequently prioritized children living in hard-to-reach areas, including rural and border zones, and in indigenous communities. Strategies utilized included institutionalized vaccination with extended hours of operation of health centers and intensified social mobilization, fixed and mobile vaccination posts, and vaccination brigades traveling house-to-house. Specific country results include:
 - In Brazil VWA occurs in conjunction with the country's Vaccination Month for Indigenous Communities; a highly logistically intensive effort to reach indigenous communities in geographically remote locales across the nation by air, land or river, and start, update and/or complete vaccination schedules. In 2013, more than 100,000 doses of vaccine were administered to individuals across the age spectrum as part of this effort. Among children, approximately 32% of individuals between the ages of 1-4 years were reported as vaccinated for the first time with pentavalent vaccine as part of these efforts. Repeat visits to the villages reached during VWA will be conducted throughout the rest of the year to complete the childhood schedules started in April.



Location of Special Indigenous Sanitary Districts. Courtesy of the Ministry of Health of Brazil, 2013



Photographs courtesy of the Ministry of Health of Brazil, 2013

- El Salvador’s campaign was carried out over a month long period and aimed to strengthen the routine program by targeting children less than 5 years of age with the vaccines of the primary schedule (BCG, OPV, rotavirus, pentavalent, pneumococcal SPR y DPT). Both intramural and extramural strategies were employed. Of the 112,825 doses of pentavalent vaccine administered as part of VWA, 1,096 represented the first, second or third doses administered late to children aged 1-<5 years. Similarly, out of 69,403 polio doses administered, 551 represented late primary doses administered to older children, who were captured as part of the initiative.
- In Honduras, VWA was celebrated as part of their National Immunization Campaign, which utilized the slogan “Por Nuestras Familias Vacunemos Hoy” (“For our Families We Get Vaccinated Today”). One aspect of the campaign included targeting children less than 2 years, to start or complete vaccination schedules with emphasis in municipalities with reported coverage of less than 95%. Comparing the coverage obtained during the campaign with that of prior periods, the country reported additional increases in coverage during VWA, especially for booster doses of vaccine.

Vaccine	Increase in coverage of routine program due to VWA (National Vaccination Campaign) in Honduras
Polio	2.32%
Pentavalent	2.33%
Pneumococcal	2.33%
Rotavirus	2.01%
MMR	3.40%
Polio booster	6.87%
1st booster DPT	7.11%
2nd booster DPT	7.62%
Td booster @11 years	23.72%

- Mexico's comprehensive Second National Health Week coincides with VWA each year and is celebrated under its framework. In 2013, the country administered more than 13.5 million doses of vaccine at the national level (including almost 9.4 million doses of polio as described in a prior section) through 560,705,055 vaccination posts (fixed posts in health units, posts in population clusters and mobile vaccination brigades). Target groups included individuals across the age spectrum from newborns (BCG and hepatitis B) to school-aged children (Td, MMR, and MR), adolescents both in and out of school (HPV), pregnant women and other women of childbearing age (Td), and men (Td). Vaccines administered included BCG, polio, hepatitis B, MMR, MR, TD, DpaT+VIP+Hib, DPT, rotavirus, pneumococcal, and HPV.
- Under the umbrella of VWA 2013, Peru implemented a multifaceted national campaign which included prioritizing children less than 1 year and at 1 year of age (with an emphasis on indigenous populations) in order to start and complete vaccination schedules, reduce vaccine defaulters and educate caregivers about the importance of timely vaccination. Held under the national slogan, "Vacunas son mi mejor escudo" ("Vaccines are my best shield."), Peru employed strategies including vaccination posts both within health centers and in the community, vaccination brigades, and home visits. Due to the large area to be covered and limited human resources, efforts were extended into May. Peru achieved coverage ranging from 84% (OPV in children <1 years) to 102% (4 year old MMR booster dose).
- Throughout 12 countries and territories of the English and Dutch-speaking Caribbean (Anguilla, Bahamas, Barbados, Belize, British Virgin Islands, Dominica, Grenada, Guyana, Jamaica, Montserrat, St. Vincent and the Grenadines and Trinidad and Tobago) a variety of outreach vaccination activities were also carried out **to complete childhood schedules**, track down defaulters via phone calls and home visits and offer booster doses to adolescents and adult populations during VWA. Special efforts were made to reach out via specialized social communication messaging to at-risk population pockets, including the Haitian community in Dominica and Rastafarian groups in Montserrat. On several islands, occupational risk groups were also a major focus of vaccination and/or training efforts. Selected results include:
 - In Belize, VWA results showed that attendance to the child health clinics throughout the country increased by 37%; registration of new infants <1 year increased by 25%, and follow up visits also increased by 12% for the month of April in comparison to March. The quantity of vaccines applied in the month of April also went up when compared to the month prior (booster doses of DPT and Polio provided to children 4 years of age increased by >100%; BCG provided to infants <1 year old increased by 16.5% while other vaccines (Polio 3, MMR1 & 2, Pentavalent 3 increased by 14.5%)
 - In Suriname, vaccination catch-up and outreach activities were conducted during VWA in the coastal area, targeting children older than 1 year of age and school children for vaccination with yellow fever (1,158 doses) and the second dose of MMR (1,378 doses). While yellow fever vaccine has long been administered in the interior jungle areas of Suriname, both of these vaccines were introduced the year prior along the coast.

- As part of VWA on April 1st, Peru began a nationwide campaign against hepatitis B, vaccinating individuals from 1-59 years, health care workers and other at risk groups in health establishments across the country. 252,706 doses of hepatitis B vaccine were applied as part of VWA, corresponding to the 1st (73.9%), 2nd (13.6%) and 3rd (12.5%) doses. Peru plans to extend this campaign through December of 2013.
- The Dominican Republic used VWA as an opportunity to vaccinate school children younger than 7 years of age against **pertussis**, due to the rising number of cases being reported around the Region. The country administered 82,705 doses of whole cell pertussis vaccine (DwPT) to the targeted group.

2. Completing the unfinished agenda: *improving vaccination coverage against seasonal influenza, yellow fever, and maternal and neonatal tetanus in high-risk, isolated, border, and indigenous populations, and protection of occupational risk groups*

- Barbados, Belize, Brazil, British Virgin Islands, Colombia, El Salvador, Grenada, Jamaica, Nicaragua, Panama, Paraguay, Peru, Trinidad and Tobago, Uruguay and Venezuela all vaccinated against **seasonal influenza** as part of VWA 2013, administering a combined total of approximately 29.9 million doses of vaccine.
 - This year marked Brazil's 14th annual influenza vaccination campaign. The country reported the vaccination of more than 28.5 million individuals, including approximately 18.4 million elderly adults (87.8%), 510,414 indigenous individuals (84.7%), 1.8 million pregnant women (81.2%), 3.6 million health care workers (106.2%) and 4.1 million children (91.4%).
- **Prevention of maternal and neonatal tetanus** through the vaccination of women of childbearing age (WCBA) against tetanus/diphtheria (Td) was the focus of several countries' efforts including: Bolivia, Colombia, El Salvador, Haiti, Panama, Paraguay, Peru and Venezuela.
 - In the first round of their national campaign targeting from women aged 15-49 years, Haiti administered more than 1.2 million doses of Td vaccine helping advance efforts to eliminate maternal and neonatal tetanus from the Americas.
 - El Salvador administered Td vaccine to more than 75,000 women aged 10-60 years during VWA (in addition to vaccination efforts in men). As part of this national effort, 34,757 pregnant women aged 10-54 years were vaccinated for the first time.
- Outreach vaccination targeting population groups at risk of preventable disease due to their occupation was a common strategy employed during VWA 2013, especially in the English speaking Caribbean (Bahamas, Barbados, Belize, Grenada, Guyana, Jamaica and St. Lucia). Vaccines applied included Influenza, Hepatitis B, Tetanus and Varicella. Risk groups included food vendors, police and firemen, corrections officers, sanitation workers, lifeguards, rangers,

mechanics, artisans, general workers, welders, and government and clerical staff, among others.

3. Confronting new challenges: *introducing new vaccines, strengthening of occupational capacity and infrastructure and the use of VWA as a platform for integrated interventions*

- Many countries incorporated the recent or upcoming introduction of **HPV vaccine** as part of their VWA efforts, either administering the vaccine to increase coverage, or carrying out sensitization sessions with community members to raise awareness prior to an upcoming planned introduction. Countries that incorporated HPV as part of their VWA activities in 2013 included:
 - Bahamas (topic of training workshop for health care workers)
 - Barbados (topic of training workshop for health care workers)
 - British Virgin Islands (sensitization program)
 - Guyana (sensitization program and vaccination)
 - Panama (vaccination of girls and Pap test for mothers)
 - Paraguay (campaign to administer 2nd doses (89,525) following HPV introduction in March)
 - Suriname (informational sessions in interior Hinterland area)
 - Trinidad and Tobago (public education sessions and sensitization sessions in schools for staff, parents and students)
 - Uruguay (vaccine introduction)

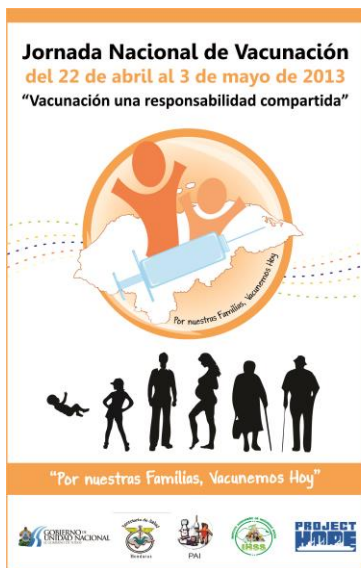
- Strengthening of occupational capacity and infrastructure
 - Several countries held training workshops for health care workers in order to **increase the knowledge and occupational capacity of their immunization program workforce**. Training activities took place in countries including Barbados, Belize, Dominica, Grenada, St. Lucia, Suriname and Uruguay. Common topics included ESAVI training, the surveillance of vaccine-preventable diseases and cold chain issues.

- During VWA 2013, countries and territories continued to expand upon the use of VWA as a platform **to integrate other preventative interventions with vaccination**, often at the local or subnational level.

St. Kitts and Nevis	Sensitization program for Early Childhood Development Workers including the topics of vaccine-preventable diseases, children’s oral health care, the national Early Childhood Development Program, and proper hand washing.
Bahamas	Integrated EPI workshop with chronic non-communicable diseases topics (including foot-care training and the national register for chronic non-communicable diseases)

Adjacency zone, Belize and Guatemala	A health fair which included the prevention of vector borne diseases, blood sugar and blood pressure screening and the promotion of a healthy lifestyle
Belize	Deworming and micro nutrient supplementation to children 5 – 15 years of age (1417 doses each); health education on nutrition, including breastfeeding, and demonstration on food preparation.
Dominican Republic	Deworming of schoolchildren from 6-14 years of age and teachers (1,521,900 doses of Aldendazol).
Ecuador	As part of a VWA launching event between Peru and Ecuador, a health fair was conducted with information on nutrition and intercultural health.
Grenada	Collaboration with the vector control division to give presentation on leptospirosis to employees of the customs division, farmers' organizations, the solid waste division and the Caribbean agro industries.
Guyana	Talks on sexual and reproductive health, nutrition and personal hygiene care, attitudinal and behavioral health, self-empowerment and motivation, oral health, nutrition, breastfeeding, healthy snacks for lunch kits, and blood pressure screening.
Honduras	Vitamin A supplementation (children aged 6 months to 4 years and postpartum women), deworming (children aged 2-4 years in 7 prioritized municipalities in 4 regions), hygiene education and information to caregivers of children < 5 years on the early detection of eye cancer (retinoblastoma).
Mexico	Oral rehydration therapy (8,474,342 packets); Vitamin A (7,454,758 doses to children from 6 months to 4 years); deworming (Albendazol) (16,976,430 doses to children from 2-14 years); folic acid to women of childbearing ages (1,017,614 doses including 137,654 pregnant women); vitamins and minerals (271,256 doses) and iron (46,276 doses) to children aged 6 months-9 years, adolescent men, and women aged 10-44 years. The country also reported more than 15 million messages delivered from health care personnel on acute diarrheal diseases, acute respiratory infections and neonatal tetanus.

<p>Nicaragua</p>	<p>Vitamin A (735,301 doses to children from 6 months to 4 years), deworming (1,554,801 doses to school-aged children) and educational talks in health units on the prevention of intestinal parasites. Additionally, visits to schools for educational activities regarding prevention of parasites. During VWA, 6,847 primary school teachers, 7,076 local health workers and 270,152 students in 2,492 schools in 164 municipalities were trained on hygiene practices and the prevention of parasites.</p>
<p>Panama</p>	<p>Vitamin A for postpartum women and children aged less than 4 years, blood sugar screening when vaccinating diabetic patients, distribution of hygiene products to diabetics and the elderly.</p>
<p>Trinidad and Tobago</p>	<p>Education on cervical, breast and prostate cancer, pap smear testing, HIV testing, BMI and body fat assessment, nutritional counseling.</p>



Promotional flyer produced in Honduras to advertise VWA (Jornada Nacional de Vacunación) which mentions inclusion of vitamin A supplementation and early detection of eye cancer

Table 1. People Vaccinated, by Target Population and Country or Territory, VWA 2013*

Country	0-12 months	1-4 years	<5 years	> 5 to 18 years	WCBAs Td	>60 years influenza	Adult MR/MMR	High risk occupations	Others	TOTAL
Anguilla			123	198						321
Antigua & Barbuda										
Argentina										
Aruba										
Bahamas								38		38
Barbados ¹								549	435	984
Belize	250	284	731					1,318		2,583
Bermuda	Communication and social mobilization									
BES Islands (Bonaire, St. Eustatius and Saba)										
Bolivia	174,767		171,165		129,494					475,426
Brazil ²	4,134	15,539	4,128,708	31,418		18,355,587		3,620,961	9,179,808	35,336,155
British Virgin Islands ³			55	248		18			38	359
Canada	National Immunization Awareness Week									
Cayman Islands	Communication and social mobilization									
Chile										
Colombia	251,532	129,815	61,744		190,898	156,819				790,808
Costa Rica										
Cuba										
Curaçao										
Dominica ⁴			621						103	724
Dominican Rep.										
Ecuador										
El Salvador ⁵	108,897		51,367		71,749	33,964		10,925	42,721	319,623
Grenada	Varied vaccination activities in schools and in the community									
Guatemala										
Guyana			494	4,838					913	6,245
Haiti					1,241,726					1,241,726
Honduras										
Jamaica ⁶								181		181
Mexico ⁷			9,397,776	299,561	537,245		127,404		355,411	
Montserrat				134						134

Vaccination Week in the Americas 2013

Country	0-12 months	1-4 years	<5 years	> 5 to 18 years	WCBA's Td	>60 years influenza	Adult MR/MMR	High risk occupations	Others	TOTAL
Nicaragua										
Panama			17,963	7,222	11,984	6,903			37,828	81,900
Paraguay ⁸	28,270	21,212	78,790	126,918	42,389	115,834			158,071	571,484
Peru ⁹	142,225	66,968		129,154	244,204	115,523		16,332	208,380	922,786
St. Kitts and Nevis ¹⁰									15	15
St. Lucia										
St. Maarten										
St Vincent and the Grenadines								537	1,006	1,543
Suriname			1,293	1,243						
Turks and Caicos										
Trinidad & Tobago									7,399	
United States	National Infant Immunization Week									
Uruguay			5,605			14,706		716	446	
Venezuela ¹¹	162,935	73,257	160,155	465,055	70,295	25,994		8,439	114,843	1,080,973
TOTAL	873,010	307,075	4,678,814	766,428	2,002,739	18,825,348		3,659,996	9,752,006	40,865,416

*Information updated as of 12 September 2013.

1. In Barbados, "Others" represent the general public vaccinated during open house.
2. "Others" are adults from 15-59 years vaccinated in Brazil as part of the Month of Vaccination of Indigenous Communities, as well as pregnant and postpartum women vaccinated against influenza.
3. "Others" are elderly citizen, teachers, and prison inmates vaccinated against Hepatitis B, Td and varicella.
4. "Others" are Haitian nationals vaccinated against MMR, Hepatitis B and Td.
5. "Others" are men vaccinated with Td.
6. Jamaica also updated childhood schedules, but the doses administered were not reported.
7. Others in Mexico are men 12-45+ years vaccinated with Td
8. "Others" represent the population aged 15-59 years vaccinated with influenza.
9. "Others" are populations with chronic disease and miscellaneous groups vaccinated with influenza, adults (18-59 years) vaccinated for yellow fever in endemic areas and adults (18-59) years vaccinated against Hepatitis B.
10. In St. Kitts, "Others" included postpartum women vaccinated against Hepatitis B.
11. In Venezuela data in the category of <5 years represents children aged <6 years and the category >5 years represents children >6 years. "Others" represents Td vaccination for men aged 11-49 and vaccination against Hepatitis B for those aged 10-49 years.

Table 2. Number of Doses Administered by Antigen and Country or Territory, VWA 2013*

Country	MMR	MR	DTP	DT	Td	TT	Hib	Hep B	Penta-valent	Polio	BCG	YF	Influenza	RV	Pneumo	HPV	Other
Anguilla	29		52	198				9		292							
Antigua & Barbuda																	
Argentina																	
Aruba																	
Bahamas ¹					17			38									
Barbados ²					671			9					23				606
Belize	597		748		1,349			535	339	1,250	53		768				
Bermuda	Communication and social mobilization																
BES Islands (Bonaire, St. Eustatius and Saba)																	
Bolivia																	
Brazil													28,500,000				
British Virgin Islands ²	28			33	21			13	5	46			18				217
Canada	National Immunization Awareness Week																
Cayman Islands	Communication and social mobilization																
Chile																	
Colombia	118,662		127,570		187,898			51,889	199,602	322,205	51,930	63,989	349,329		60,068		
Costa Rica																	
Cuba																	
Curaçao																	
Dominica	76		41		230			162	89	23							
Dominican Rep.																	
Ecuador																	
El Salvador	51,367		24,311	1,408	253,710			3,799	112,825	69,403	25,461	2,469	168,479	53,321	76,731		
Grenada	72		31	34	1,536			282	22	224			356				
Guatemala																	
Guyana	3,834		269	4,463				781		292		4,619			15		2,229
Haiti					1,241,726												
Honduras																	
Jamaica ³								39					181				
Mexico ⁴	475,416	140,424	190,783		916,369			403,868		9,397,776	102,884			325,891	144,676	951,628	496,995
Montserrat		69		134						134							

Country	MMR	MR	DTP	DT	Td	TT	Hib	Hep B	Penta-valent	Polio	BCG	YF	Influenza	RV	Pneumo	HPV	Other
Nicaragua																	
Panama																	
Paraguay ⁵	19,291	275	16,883	1,604	54,000				29,600	45,742	10,441	9,549	386,536	18,944	35,516	89,525	24,941
Peru	54,481				244,204			252,706	142,225	139,010		83,365	212,944	91,940	163,791		
St. Kitts and Nevis								15									
St. Lucia																	
St. Maarten																	
St Vincent and the Grenadines					849			620				119					
Suriname	1,378											1,158					
Turks and Caicos																	
Trinidad & Tobago ²	916				2,458			1,992				728	921			191	193
United States	National Infant Immunization Week																
Uruguay													52,032		867		
Venezuela ⁶	66,375		13,082		148,502			94,231	96,362	112,642	7,762	43,891	225,869	29,746	23,480		3,518
TOTAL	317,106	344	182,987	7,874	2,137,171	0	0	407,120	581,069	691,263	95,647	209,887	29,897,456	193,951	360,468	89,716	31,704

*Information updated as of 12 September 2013.

1. Tdap, not Td.
2. "Other" refers to varicella vaccine.
3. Jamaica also updated childhood schedules, but doses administered were not reported.
- 4 "Other" refers to DpaT+VIP+Hib.
5. "Other" refers to varicella and hepatitis A vaccines.
6. Pneumococcal refers to Pneumococcal 23-valent vaccine for those >60yrs. "Other" is meningococcal b-c vaccine.

LOOKING TOWARDS THE FUTURE

The future of VWA holds much promise. As countries, the WHO and the global community plot the course for future celebrations of WIW and each of the unique regional initiatives, it will be essential to maintain the momentum of this global movement and use WIW as a key annual opportunity to advance global health diplomacy and cooperation between countries in order to tackle pressing global immunization priorities, including the polio endgame, the elimination of measles and rubella, and the sustainable introduction of new vaccines and technologies into national immunization programs.

The upcoming celebrations of global sporting events, including the 2014 World Cup and the Olympic Games can also be utilized in the framework of VWA to promote the importance of being fully vaccinated, both to ensure individual health and to protect regional immunizations achievements through preventing the importation of vaccine-preventable diseases during periods of heightened population movement.

The future success of VWA will also depend on the ability of the international community and the health sector to maintain and/or augment the political support given to national immunization programs, which in turn helps to ensure both their financial and technical sustainability. The trend of countries utilizing VWA as an opportunity to integrate immunization with other preventative interventions also holds much promise, as a means of strengthening primary health services.

Finally, it will be critical to continue to increase international collaborative efforts across bi-national and tri-national borders in the Americas under the framework of VWA and WIW, in order to continue to address the health inequalities found in these often hard-to-reach communities.

SIXTY-FIFTH WORLD HEALTH ASSEMBLY

WHA65.18

Agenda item 13.12

26 May 2012

World Immunization Week

The Sixty-fifth World Health Assembly,

Having considered the report on the draft global vaccine action plan;¹

Recalling resolutions WHA58.15 and WHA61.15 on the global immunization strategy, and the commitment to use the decade 2011–2020 to achieve immunization goals and milestones in vaccine research and development;

Recognizing the importance of immunization as one of the most cost-effective interventions in public health;

Acknowledging the significant achievements of the Expanded Programme on Immunization at the global level, including the eradication of smallpox, major advances towards eradicating poliomyelitis, eliminating measles and rubella, and the control of other vaccine-preventable diseases, such as diphtheria and tetanus;

Noting the contribution of successful immunization programmes towards significant reductions in childhood mortality and improvements in maternal health, and thereby towards the attainment of Millennium Development Goals 4 (Reduce child mortality) and 5 (Improve maternal health), and towards cancer prevention;

Recognizing that initiatives such as regional vaccination weeks have contributed towards promoting immunization, advancing equity in the use of vaccines and universal access to vaccination services, and enabling cooperation on cross-border immunization activities;

Recognizing also that the initiative of vaccination weeks, a growing global movement that was first introduced in the Region of the Americas in 2003, was observed simultaneously in WHO's six regions in April 2012, with the participation of more than 180 Member States, territories and areas;

Acknowledging also the high level of political support and international visibility given so far to regional vaccination week initiatives, and noting that the flexibility of the vaccination week framework allows individual Member States and regions to tailor their participation in accordance with national and regional public health priorities;

Concerned that, despite all the achievements of immunization initiatives, many challenges remain, including maintaining immunization as a fundamental element of primary health care, administering vaccines to all vulnerable populations regardless of their location, protecting national immunization

¹ Document A65/22.

WHA65.18

programmes against the growing threat of misinformation on vaccines and immunization, and ensuring that national programmes are considered a financial priority for Member States,

1. REQUESTS Member States to designate the last week of April, when appropriate, as World Immunization Week;

2. REQUESTS the Director-General:

(1) to support the annual implementation of World Immunization Week as the overarching framework for all regional initiatives that are dedicated to promoting the importance of vaccination across the life-course and working to ensure the universal access of individuals of all ages and in all countries to this essential preventive health service;

(2) to provide support to Member States in mobilizing the resources necessary to sustain World Immunization Week, and to encourage civil society organizations and other stakeholders to support the initiative.

Tenth plenary meeting, 26 May 2012
A65/VR/10

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Annex 2.

PHOTOS

VACCINATION WEEK ACTIVITIES



Regional launch at Adjacency Zone between Belize and Guatemala



Dr. Carissa F. Etienne, Director PAHO with Hon. Pablo Marin, Minister of Health of Belize (L), and Dr. Jorge Villavicencio, Minister of Health of Guatemala (R)



Health Clinic in Haiti during VWA 2013



Health Clinic in Haiti during VWA 2013



Parade at regional launch at Adjacency Zone between Belize and Guatemala



Group photo of PAHO staff and authorities at the regional VWA launch at Adjacency Zone between Belize and Guatemala

PHOTOS

VACCINATION WEEK ACTIVITIES



Dancers at Regional launch in Haiti



Keynote speakers at Regional launch in Haiti



Peru, VWA 2013



Peru, VWA 2013



Bahamas, VWA 2013



Guyana and Suriname bi-national Launch, VWA 2013

PHOTOS

VACCINATION WEEK ACTIVITIES



El Salvador, VWA 2013



El Salvador, VWA 2013



El Salvador, VWA 2013



El Salvador, VWA 2013



Panama, VWA 2013



Trinational launch Brazil- Peru - Colombia

Annex 3.

LINKS OF INTEREST

*World Immunization Week (WIW): <http://www.who.int/campaigns/immunization-week/2013/en/index.html>

*Global Vaccine Action Plan (GVAP): http://www.who.int/immunization/global_vaccine_action_plan/en/

*Feature stories from countries during WIW: <http://www.who.int/entity/campaigns/immunization-week/2013/features/en/index.html>

*African Vaccination Week - <http://www.afro.who.int/en/clusters-a-programmes/ard/immunization-and-vaccines-development/events/african-vaccination-week/african-vaccination-week/african-vaccination-week-2013.html>

*Vaccination Week in the Eastern Mediterranean - <http://www.emro.who.int/vpi/vpi-news/2013-vaccination-week.html>

*European Immunization Week, - <http://www.euro.who.int/en/what-we-do/health-topics/disease-prevention/vaccines-and-immunization/european-immunization-week/european-immunization-week-2013>

*Immunization Week in South-East Asia, - http://www.searo.who.int/entity/immunization/immunization_week_searo/en/index.html

*Immunization Week in the Western Pacific, - http://www.wpro.who.int/world_immunization_week/wpr_celeb_wiw2013/en/index.html

*Vaccination Week in the Americas - <http://www.paho.org/vwa>