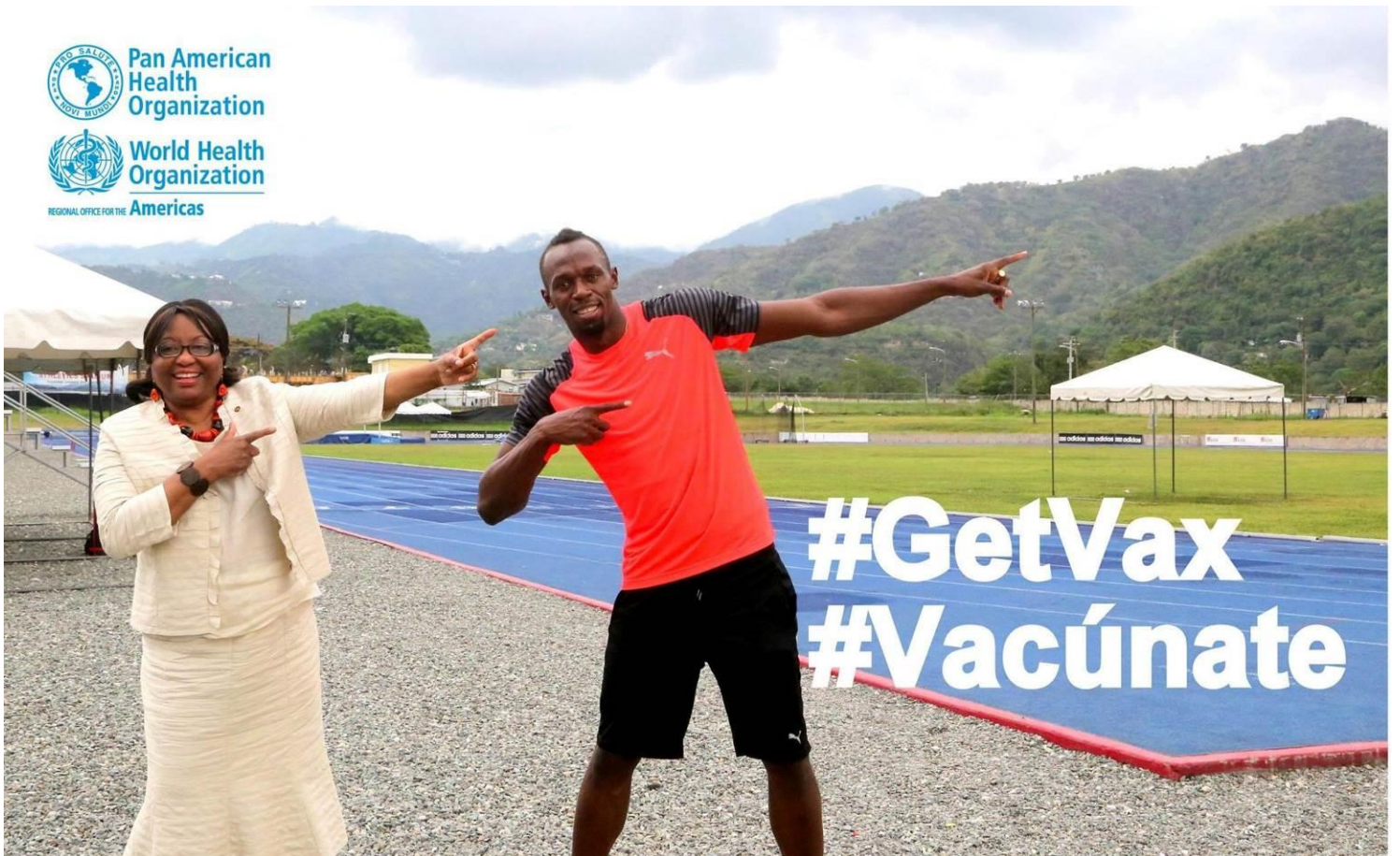




# Vaccination Week in the Americas 2016

Final Report



PAHO Director Carissa Etienne poses with Jamaican Olympian Usain Bolt, the “Fastest Man in the World” to promote this year’s Vaccination Week.



## VWA 2016 Executive Summary

Another successful year of Vaccination Week in the Americas (VWA) has been completed. This year, under an Olympic theme and the slogan of “*Go for the Gold! Get Vaccinated!*”, countries and territories across the Region of the Americas came together to raise awareness on the importance of immunization and implement a diverse array of vaccination efforts. More than 55 million individuals were vaccinated under the umbrella of VWA this year, with countries making a particular effort to vaccinate specific population groups living in areas that are difficult to access or otherwise underserved.

### Selected highlights:

- 2016 marked the 14th annual Vaccination Week in the Americas (VWA)
- Since 2003, more than 640 million people have been vaccinated under VWA framework
- Starting in 2012, the Americas joined with all other regions of the World Health Organization to celebrate World Immunization Week (WIW)
- WIW was endorsed during a World Health Assembly resolution and unites more than 180 countries and territories worldwide each year
- VWA and WIW 2016 coincided with the dates for the global “switch” from trivalent oral polio vaccine (tOPV) to bivalent oral polio vaccine (bOPV), a key step towards the global eradication of poliovirus and part of *The Polio Eradication and Endgame Strategic Plan 2013-2018*.
- Olympic champion, Jamaican sprinter Usain Bolt, the “fastest man in the world” collaborated with PAHO/WHO to promote vaccination as part of the VWA 2016 communication and social media campaign.

### History of VWA

In 2002, prompted by a measles outbreak in Venezuela and Colombia, the health ministers of the Andean countries proposed the idea of a coordinated international vaccination effort. With the support of the Pan American Health Organization (PAHO), this proposal evolved over the succeeding months into a new initiative, Vaccination Week in the Americas (VWA). VWA was celebrated for the first time in April 2003 by 19 countries and territories; later that same year the initiative was endorsed through a resolution during the 44<sup>th</sup> Directing Council of the Pan American Health Organization (PAHO). Today, the initiative has matured into a hemisphere-wise celebration of the power of vaccination and a key annual opportunity for all countries of the Americas to highlight the essential work of national immunization programs.

### Objectives

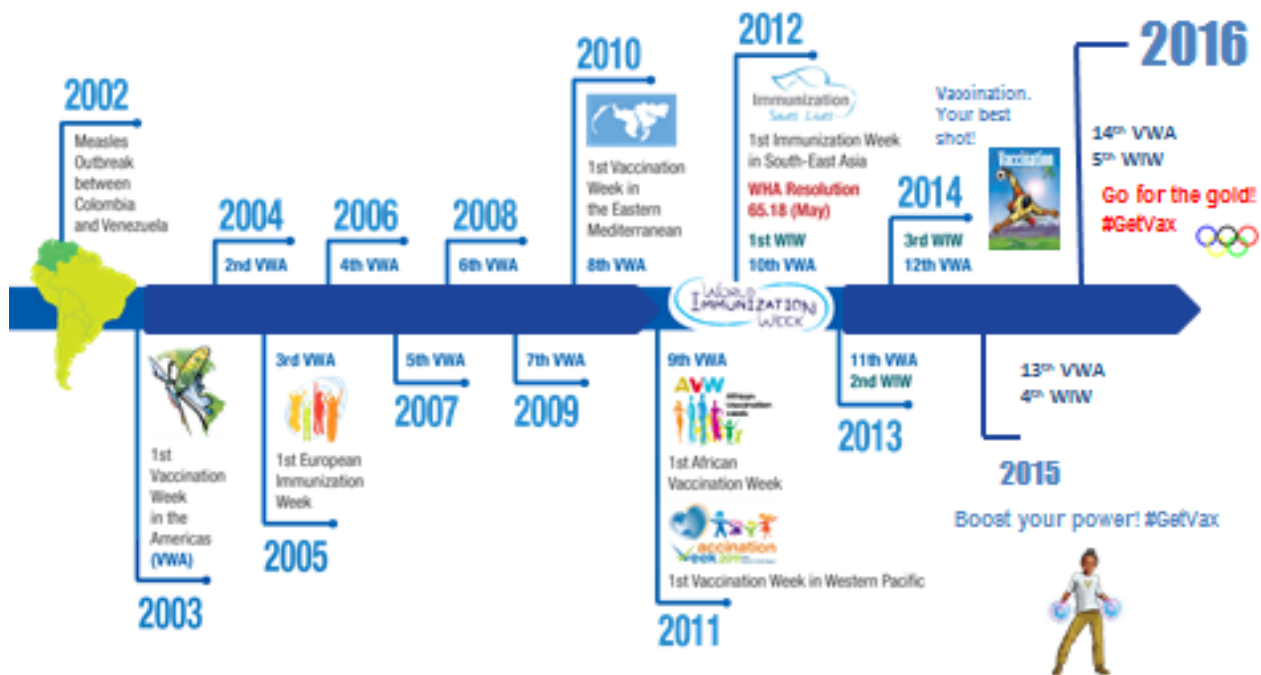
VWA is an annual opportunity for the countries and territories of the Americas to advance equity and access to vaccination. Countries select their activities for VWA based on national health priorities each year; however, at the core of the initiative are efforts to reach out and vaccinate populations with little or no access to regular health services, such as those populations living in urban fringes, rural and border areas and in indigenous communities. By “**reaching the unreached**,” each year, VWA contributes to strengthening national immunization programs across the Americas. The initiative also provides an important platform for raising public awareness regarding the importance of immunization and for keeping the topic on the forefront of high level political agendas and in the media. In recent years, countries have also increasingly used VWA as a platform [to integrate other preventative interventions with vaccination](#), such as deworming, vitamin A

supplementation, blood pressure, blood sugar, BMI and vision screening, vector borne disease control and prevention, and dental care, among other efforts.

## The Path to World Immunization Week

Following the early successes of the Americas in implementing VWA, other regions of the World Health Organization (WHO) have subsequently come on board with similar sister initiatives (see timeline below), each adapted to the realities of Member States. This global movement culminated in the establishment of World Immunization Week (WIW) in 2012. WIW was endorsed by the World Health Assembly that year and currently represents the overarching umbrella for all unique regional endeavors.

More than 640 million individuals vaccinated within the framework of VWA in 14 years



## The Celebration of VWA 2016

### Regional communication campaign:

The 14th VWA's regional slogan was *"Go for the gold! Get vaccinated!"* The main messages around the slogan reinforced the idea that everyday people can "go for the gold" like Olympic athletes by being team players and getting vaccinated. Printed campaign materials were distributed across the Region including posters, stickers and t-shirts in English, Spanish and Creole. Electronic versions of all distributed materials, as well as additional designs, audiovisual materials (including public service announcements or PSAs), links to VWA social media outlines and resources in Portuguese and French can be accessed online at [www.paho.org/vwa](http://www.paho.org/vwa) (English) and [www.paho.org/sva](http://www.paho.org/sva) (Spanish).



PSA from Dr. Carissa F. Etienne, PAHO Director Available at <http://bit.ly/1MYZyNT>



Promotional posters for VWA 2016

### Social media efforts

A widespread social media campaign using the #GetVax and #GoForTheGold hashtags encouraged people to take photos holding #GetVax signs and post them to social media or submit them to PAHO's website. Submitted photos can be viewed at: <http://bit.ly/1RXGILU>.

PAHO hosted tweet chats using the hashtags #GetVax and #Vacúnate to engage with partners and the general public on the importance of vaccination. Centering on the messages that vaccines are safe, effective, necessary and cost-effective, the PAHO team took to Twitter to answer questions from the public and dialogue with partners such as the U.S. Centers for Disease Control and Prevention (CDC), the Public Health Agency of Canada, Immunize Canada, the American Academy of Pediatrics, the UN Foundation's Shot@Life, the Sabin Vaccine Institute, and Vaccine Ambassadors. Ministries of health and clinics throughout the Region also participated. Separate tweet chats were held in English and Spanish.



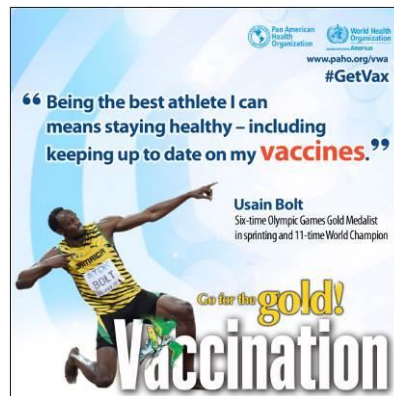
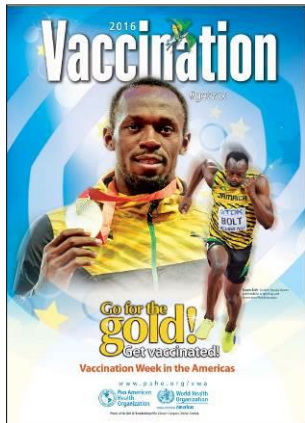
PAHO staff members during a tweet chat for VWA 2016

During VWA, PAHO country offices in Argentina, Honduras and Peru also hosted national tweet chats with the hashtag #Vacúnate.

## New partnership with Olympian Usain Bolt

Jamaican sprinter Usain Bolt, who holds nine Olympic gold medals and 11 world championships, supported VWA 2016, appearing in PAHO-produced promotional materials, including posters, social media messages, and a PSA, in which he told viewers, “I’m up to date on my vaccines. Are you?”. Bolt also promoted the initiative from his own Facebook and Twitter accounts, reaching more than 19 million and 4 million followers, respectively.

### Bolt PSA:



Usain Bolt’s PSA can be viewed here: <https://www.youtube.com/watch?v=x2KYu72TIEk>

## VWA launching events:

### Regional VWA Launch in Kingston, Jamaica

The regional launch was celebrated this year on 23 April in Kingston, Jamaica at the Emancipation Park, with participation of national health authorities, partner agencies and regional PAHO staff, including the PAHO Director. One of the highlights of the ceremony was the Rousseau Primary School 14 performing a very creative and original song and dance about vaccination using the “Go for the Gold!” theme. The video can be viewed [here](#).



The launch event had some 300-400 participants, including representatives from other UN agencies and members of the Diplomatic Corps. Following the formal opening ceremony, there was the passing of the “vaccination baton” from a parent to a child then to athletes who performed a symbolic run around the track at the park and then handed the baton to the Minister of Health, Dr. Christopher Tufton. He then passed the baton to Dr. Etienne, Director of PAHO.



From L-R: Minister of Health, Jamaica, Dr. Christopher Tufton, PWR Jamaica Dr. Noreen Jack, PAHO Director, Dr. Carissa Etienne and Permanent Secretary, Ministry of Health, Jamaica Dr. Kevin Harvey speaking before the start of the official launch



The Ministry of Health, Jamaica held a poster competition for elementary school children and the winners were announced and presented with their prizes which included computer tablets at the launch.



Children celebrate the launch of VWA on April 23<sup>rd</sup>, 2016 in Kingston, Jamaica. Photo credit: PAHO/WHO.



Jamaica's Chief Medical Officer, Dr. Winston De La Haye delivered a booster dose of polio drops to a child



Go for the Gold, Get Vaccinated! 14th Vaccination Week in the Americas, Kingston, Jamaica  
<https://www.youtube.com/watch?v=LqiMSJCluhc>

### Tri-National VWA Launch between Colombia, Brazil and Peru

On May 1st in the Amazon Region, the PAHO Director, together with national and local health authorities from Colombia, Brazil and Peru celebrated vaccination week in Leticia, Colombia, which borders Tabatinga, Brazil and Santa Rosa de Yavari, Peru. At the event, Dr. Etienne highlighted the importance of cross border collaboration and partnership, stating, “Diseases do not respect borders, so partnerships like this are critical to eliminate disease and maintain those that have already been eliminated, but continue to circulate in other parts of the world.”

The celebration featured music, traditional dance, and food tastings from the three countries, speeches from each of the representatives, and symbolic vaccination with the influenza vaccine.



Photographs from the tri-national launch for VWA between Colombia, Brazil and Peru. Photo credits: Sebastian Oliel, PAHO-Washington, DC.

## Other national celebrations

Multiple countries and territories across the Region also launched their VWA campaigns through public ceremonies and celebrations; while some events occurred at the national level with high ranking government and international authorities in attendance, many others were more simple affairs, often held at the local level with municipal authorities and health workers. In some countries, tens or even hundreds of launches were held at the local level. Throughout the English-speaking Caribbean, VWA was often launched during church services attended by chief medical officers and national health teams. VWA celebrations and events were reported in countries including Anguilla, Argentina, Barbados, Brazil, British Virgin Islands, the Dominican Republic, Guatemala, Honduras, Nicaragua, Panama, Paraguay, Peru and Uruguay, while international launches were celebrated on the borders of Honduras and Guatemala; Panama-Costa Rica and Panama-Colombia, among many other localities.

## Country vaccination activities:

In 2016, countries and territories targeted more than 60 million people across the age spectrum for vaccination against a wide range of diseases. As this year's VWA coincided with the global switch from the trivalent oral polio vaccine (tOPV) to the bivalent oral polio vaccine (bOPV), the majority of countries and territories in the Americas focused at least part of their VWA efforts on polio-related efforts. Countries also conducted a variety of other vaccination activities including vaccination campaigns to initiate, update and complete the routine childhood schedule and administer booster doses to improve overall vaccination coverage, as well as antigen-specific campaigns against diseases, such as seasonal influenza, HPV and tetanus/diphtheria. Selected country activities are highlighted in the following sections. Specific vaccination results by population group and antigen can be found in Tables 1 and 2 in Annex 1 at the end of this report.

### Polio switch activities

Thirty-six countries and territories in the Americas participated in the global switch from tOPV to bOPV: Anguilla, Antigua and Barbuda, Argentina, Bahamas, Barbados, Belize, Bolivia, Brazil, British Virgin Islands, Chile, Colombia, Cuba, Curacao, Dominica, Ecuador, El Salvador, Grenada, Guatemala, Guyana, Haiti, Honduras, Jamaica, Mexico, Montserrat, Nicaragua, Panama, Paraguay, Peru, Dominican Republic, St Kitts and Nevis, St Lucia, St Vincent and Grenadines, Suriname, Trinidad and Tobago, Turks and Caicos, and Venezuela.

The Region of the Americas, along with the rest of the world, prepared for more than a year in to make the switch a success. This included preparing national switch plans, closely monitoring levels of tOPV stock to reduce the amount of tOPV that would need to be destroyed, implementing vaccination campaigns to increase coverage before the switch, training health care workers at every level, and coordinating the delivery of bOPV and the safe withdrawal and destruction of tOPV.

The countries devoted a significant amount of time to planning and preparing for the switch. Countries first developed their switch plans in the summer of 2015. These plans were then reviewed at the Regional Polio Meeting in August 2015. Countries went on to expand their planning and



One of the first doses of bOPV applied in Ecuador.

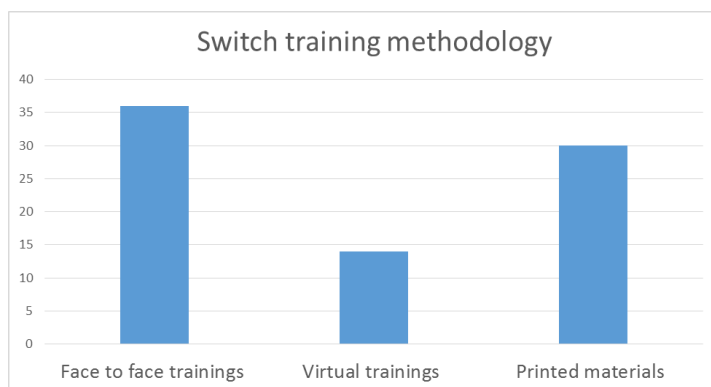
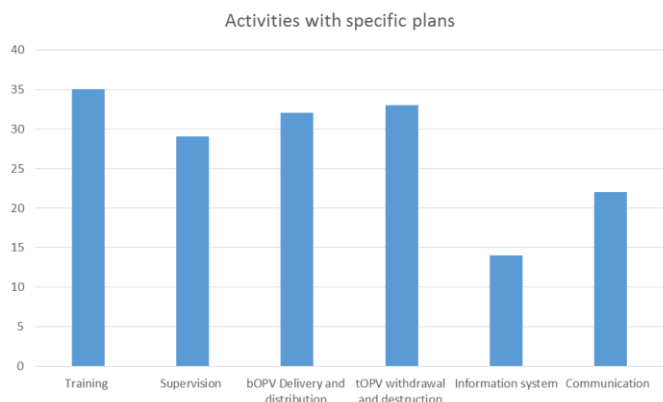


A young child is among the first to receive bOPV in Jamaica.



preparation by developing specific plans for key activities, including training (35/36), bOPV delivery and distribution and tOPV withdrawal and destruction (33/36), supervision (29/36), communication (22/36) and information systems (14/36).

Countries needed to train all health care workers at every level in preparation for the switch and started these activities in early 2016. Almost all countries used face-to-face training as their main teaching methodology (35/36) but they also frequently used a mixed methodology for training, including virtual trainings (29/36) and printed materials (27/36). Over two-thirds of the countries (27/36) used cascade training to train at the different levels. The training materials used were Power Point presentations (36/36), printed materials (31/36) and one third of the countries used videos (14/36).



Paraguay and Bolivia kicked off the switch in the Americas on 18 April. In Paraguay, at exactly 10:00 am on 18 April, to the sound of sirens, military marches and church bells, all health centers across the country withdrew tOPV and introduced bOPV into the national vaccination schedule. At the same time, at 10:00am, at the VWA launch, the Minister of Health of Paraguay, Dr. Antonio Barrios Alma Gamarra, ceremonially administered the last dose of tOPV and the first dose of bOPV to two young children.

Throughout the following 14 days, the rest of the countries in the Americas celebrated their national switch days, taking tOPV out of the cold chain, labeling it to not be used, and sending it for destruction.

Of the 36 countries that participated in the switch, 18 were from the Caribbean, and 16 of the Caribbean countries decided to join together and do a Sub-Regional Switch Day, all switching together on 26 April.

As of 1 May 2016, all 36 countries had successfully withdrawn all unused tOPV and started to use bOPV.

In the two week period post-switch, every country did independent monitoring of the switch, visiting at least 10% of all health facilities and 100% of warehouses to ensure that no tOPV vial was left in the cold chain. In the 3 months following the switch, countries went on to supervise 100% of all



Switch Team in Bogotá, Colombia ready to collect unused tOPV and deliver bOPV to health center.



Biohazard containers are bagged and labeled.

vaccination service points across the country to ensure that every last health center had correctly withdrawn tOPV and was using bOPV. The PAHO region was the only WHO region that took the initiative to do 100% monitoring of the switch in all health facilities.



A contracted company to destroy the vaccine picks up the bagged tOPV.

All 36 countries submitted final switch reports to PAHO that were reviewed both by the National Certification Committees and the Regional Certification Commission.

The final results of the switch monitoring showed that during these visits to the 6,132 warehouses, 50 warehouses, or 0.8%, were found with tOPV in the cold chain, and 11, or 0.2%, had tOPV outside the cold chain, but not properly labeled. The visits to the 98,253 vaccination services found that 220 still had tOPV in the cold chain and 31 had tOPV not properly labelled out of the cold chain.

In total, 5,995,247 doses of leftover tOPV were destroyed. The most common method of destruction was incineration. Ninety-five percent (95%) of all service points that use bOPV in the routine program had the vaccine available. This figure excludes Brazil, Cuba, and Mexico, because these countries only use bOPV in campaigns. Ninety-seven percent (97%) of all service points in the Region had IPV available. Of the 3% of service points that did not have IPV, 2.5% of this figure relates to one country that at the time of the survey had issues with IPV supply.

Final Supervision of the Switch in the Region of the Americas										
# Countries	Warehouses in Country	# Warehouses where tOPV was found		# Vaccination Services	# of Vaccination Services where tOPV was found		bOPV or IPV availability		tOPV disposed	
	Total (n)	In Cold Chain	Outside w/o label	Total (n)	In Cold Chain	Outside w/o label	bOPV	IPV	Number	Method
<b>36</b>	<b>6,132</b>	<b>50</b>	<b>11</b>	<b>98,253</b>	<b>220</b>	<b>31</b>	<b>95%</b>	<b>93%</b>	<b>5,995,247</b>	<b>*</b>

The successful completion of the switch was a great milestone for global polio eradication and an important event in global public health history. This achievement was a result of a strong commitment of public health authorities, and health workers in the Region and in the world, and partner agencies such as WHO, CDC, UNICEF, Rotary, the Task Force for Global Health, and the Bill and Melinda Gates Foundation, among others.



An external observer signs form to confirm that no tOPV has been left in the health center. Bogotá, Colombia.



Argentina chose to celebrate Vaccination Week in the Americas with the slogan, “Chau Polio.”  
**Hospital General de Niños “Ricardo Gutierrez” del Gobierno de la CABA**

### Efforts to complete basic vaccination schedules

As part of VWA 2016, Barbados, Belize, Brazil, British Virgin Islands, Colombia, El Salvador, Guatemala, Honduras, Nicaragua, Panama, Peru, St. Lucia, St. Maarten, St. Vincent and the Grenadines and Venezuela were among the countries and territories who utilized the initiative to intensify activities of the routine national immunization programs and administer multiple vaccines to improve coverage by starting, updating or completing childhood vaccination schedules. Countries and territories used different strategies to capture children, including fixed and mobile vaccination posts, vaccination brigades going house-to-house, intensified communication efforts encouraging parents to bring their children to the nearest health centers and school-based vaccination to capture older children and adolescents for booster doses. Specific examples of country efforts include:

- In **Brazil**, VWA occurs each year as part of the Month of Vaccination of Indigenous Peoples, a combined effort of the National Vaccination Program and the Department of Indigenous Health. The goal for this month is to update the vaccination schedules of approximately 600,000 individuals in 1,373 indigenous communities, in addition to administering the annual dose of the influenza vaccine. This large, logistically complex effort required the participation of around 3,500 health professionals and is linked to an increase in vaccination coverage, improved access and a reduction in health inequalities among indigenous communities in the country.



- In **Guatemala**, vaccination efforts focused on targeting children less than six years of age with all the vaccines incorporated into the national schedule. The country reported administering 27,677 vaccine doses to completed delayed schedules (IPV, pentavalent, OPV, MMR, DPT, and seasonal influenza), in addition to the application of 242,119 vaccines which were administered to children on time (BCG, Hepatitis B, IPV, pneumococcal, pentavalent, rotavirus, OPV, MMR, DPT and seasonal influenza). In total, the country reached 181% of their target population for the initiative.

- In **Peru**, part of VWA efforts focused on vaccination children less than 5 years of age to improve national coverage; special efforts were made to reach children living in areas classified as poor or extremely poor, indigenous communities and border zones. A variety of strategies were used for outreach and in some regions vaccination was offered outside of normal clinic hours (early morning, evening and weekends) in order to accommodate working families. Peru reported the administration of more than 1.7 million doses of vaccine, but also disaggregated their results to highlight the late vaccination of children at one, two and three years of age. For these individuals, work done during VWA helped to update their schedules which otherwise had been delayed.

Vaccination of children with delayed schedules in Peru, VWA 2016																	
Children aged 1 year																	
Polio			Pentavalent			Dt(p)		Hepatitis B		Hib							
IPV	OPV																
1st dose	2nd dose	3rd dose	1st dose	2nd dose	3rd dose	2nd dose	3rd dose	2nd dose	3rd dose	2nd dose	3rd dose	1st dose	2nd dose	1st dose	2nd dose	1st dose	2nd dose
1,013	2,025	3,903	867	1,547	3,225	21	9	16	2	33	2						
Children aged 2 years																	
Polio			Pentavalent			Dt(p)		Hepatitis B		Hib		MMR		Influenza	Pneumococcal	Yellow Fever (travels to endemic areas)	
IPV	OPV																
1st dose	2nd dose	3rd dose	1st dose	2nd dose	3rd dose	2nd dose	3rd dose	2nd dose	3rd dose	2nd dose	3rd dose	1st dose	2nd dose	1st dose	1st dose	1st dose	
671	1,194	1,741	514	751	1,333	40	22	27	28	23	1	3,072	3,370	11,188	1,259	5,745	
Children aged 3 years																	
Polio			Pentavalent			Dt(p)		Hepatitis B		Hib		MMR		Influenza	Pneumococcal	Yellow Fever (travels to endemic areas)	
IPV	OPV																
1st dose	2nd dose	3rd dose	1st dose	2nd dose	3rd dose	2nd dose	3rd dose	2nd dose	3rd dose	2nd dose	3rd dose	1st dose	2nd dose	1st dose	1st dose	1st dose	
581	394	926	244	377	649	34	6	18	16	5	0	1,716	6,146	4,769	843	2,819	
Children aged 4 years																	
Polio			Pentavalent			Dt(p)		Hepatitis B		Hib		MMR		Influenza	Pneumococcal	Yellow Fever (travels to endemic areas)	
IPV	OPV																
1st dose	2nd dose	3rd dose	1st dose	2nd dose	3rd dose	2nd dose	3rd dose	2nd dose	3rd dose	2nd dose	3rd dose	1st dose	2nd dose	1st dose	1st dose	1st dose	
325	175	786	123	268	383	48	7	17	26	0	1	1,297	19,076	2,920	365	2,261	

- In **Colombia**, efforts to complete childhood vaccination schedules nationwide placed particular emphasis on children aged 0-5 years living along international borders, in areas with unsatisfied basic needs, as part of displaced populations due to the armed conflict, in areas of low coverage and in indigenous and afro-colombian communities.
- In islands of the English and Dutch-speaking Caribbean, such as **Barbados, St. Lucia and St. Maarten**, strategies to increase coverage often included the use of open clinic days and outreach events in the community to target defaulters.

#### Activities to protect occupational health

- Several countries focused part of their VWA campaigns on efforts to protecting occupational health. The **British Virgin Islands** conducted outreach efforts in two health zones to vaccinate solid waste workers, industrial workers and other individuals at risk for hepatitis B, diphtheria and tetanus; **Panama** vaccinated health care workers against hepatitis A and B, measles and rubella, tetanus, diphtheria and pertussis (Tdap) and influenza and **St. Lucia** vaccinated health workers with Tdap, hepatitis B and influenza vaccines.

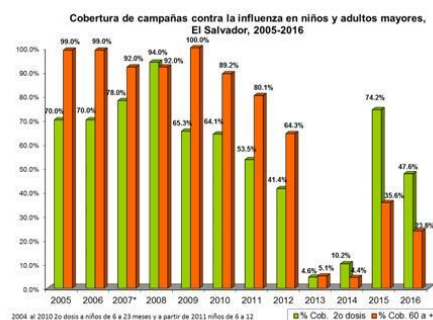
## Seasonal Influenza activities

Countries including Brazil, Colombia, El Salvador, Honduras, Panama, Peru and Uruguay utilized VWA as an opportunity to administer the Southern Hemisphere formulation of the seasonal influenza vaccine, in preparation for increased viral circulation during the following months.

- As in prior years, **Brazil** implemented a massive campaign against seasonal influenza under the framework of VWA. Targets including vaccination 80% of children aged six months to less than five years, pregnant and postpartum women, health workers, the elderly, indigenous populations, individuals with chronic disease, prisoners and prison workers. The country achieved its coverage goals across all targets, vaccinating a total of 49.9 million people.
- In **El Salvador**, vaccination efforts were carried out for one month and focused on children aged six months to less than five years, pregnant women at any gestational stage and health workers with regular patient contact.



(LEFT) Doses of influenza vaccine administered to health workers (green) and other groups (orange), El Salvador, 2011-2016. . Courtesy of Ministry of Health, El Salvador



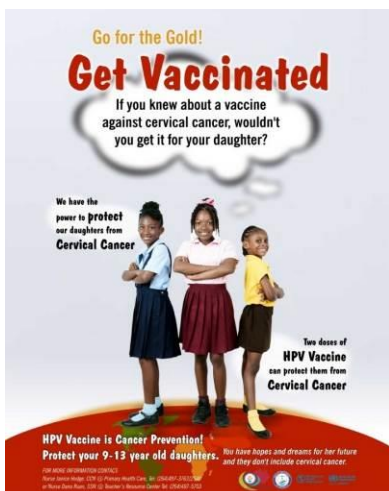
(RIGHT) Influenza vaccine campaign coverage in children and older adults, El Salvador, 2005-2016. Courtesy of Ministry of Health, El Salvador

- In **Uruguay**, influenza vaccination targeted health and essential service workers, pregnant and postpartum women, children aged six months to less than five years, individuals with chronic diseases older than five years, teachers and adults older than 65 years of age.

## Vaccination against HPV

Countries and territories including Anguilla, Belize, British Virgin Islands, Colombia, Panama and St. Maarten utilized VWA as an opportunity to vaccinate adolescents against HPV and carry out related promotional and educational activities.

- Anguilla** carried out school-based vaccination of girls aged 9-13 years. Discussions on HPV vaccine were held with the principals and teachers of various schools, as well as with parents and guardians. Printed posters and brochures on HPV were distributed to the public and health staff participated in various radio talk shows to discuss the vaccine.



Promotional material for HPV vaccination of girls aged 9-13 years

Immunization of girls aged 9-13 years with the 1st dose of HPV in Anguilla.



- As part of their VWA activities, **Belize** carried out a survey of the users of the immunization program, which included a questionnaire on acceptability of HPV. Results are still pending.
- **St. Maarten** carried out vaccination outreach through an open house event during VWA, which vaccinated children who were not up-to-date on their schedules and also provided the opportunity for the island to continue with their HPV catch-up campaign. As part of the open house, an information session on the “Prevention of cervical cancer and the HPV vaccine” was also held.

### Integrated activities

The use of VWA for the integration of other public health activities together with vaccination has become systematized throughout much of the Region. In some countries these integrated activities are implemented in the context of health fairs celebrated during VWA, while in others, activities are integrated during outreach activities in the community. In 2016, countries and territories reported on the following efforts:

Country	Integrated activities carried out during VWA 2016
<b>Barbados</b>	Diabetic foot screening; asthma counseling and demonstration of the use of the inhaler; HIV testing and counseling; condom distribution; demonstration of breast self examination; screening for non-communicable diseases; dietary counseling; advise on road safety.
<b>Belize</b>	Provision of micronutrient and deworming tablets to children less than 15 years of age in schools; distribution of iron and folic acid to females aged 10 years and older.
<b>St. Maarten</b>	Community bikeathon; information sessions on puberty and reproductive health for children aged 9-12 years and their parents and child vision screenings (46 individuals, including eight adults).
<b>St. Vincent and the Grenadines</b>	As part of the 3rd immunization health fair, interventions included basic health checks such as blood pressure and blood glucose monitoring, HIV rapid testing, condom demonstration and distribution, information on sexually transmitted infections, foot care.
<b>Colombia</b>	Referrals to education on dental care and the application of fluoride for children aged 1-17 years and their caregivers.
<b>Dominican Republic</b>	Distribution of deworming (Albendazol) to children up to 14 years of age

<b>Guatemala</b>	Administration of vitamin A (3,213 doses), deworming (3,704 doses), oral rehydration packets (2,263 packets), and nutrition supplements (6,787 portions of Chispitas and 168 portions of vitacereal, a fortified corn/soy cereal with micronutrients to children up to approximately 2.5 years (1,000 days). Weight and height checks of children aged less than five years.
<b>Honduras</b>	Administration of vitamin A to 234,483 children aged six months to four years and to 10,929 women of child-bearing ages. Deworming of 265,506 children aged two to four years and 8,067 chicken farmers. Promotion of early detection of childhood eye cancer.
<b>Panama</b>	Vaccination of 1,271 cats and dogs against rabies; integrated health fair including blood pressure and blood sugar testing; vision testing; social evaluations for adults with disabilities. 1,647 screenings for domestic violence, 7,388 dental services including proper brushing technique and fluoride application. Information on the prevention of dengue and chikungunya and work with the electoral tribunal to register previously unregistered births and provide child identification cards.
<b>Nicaragua</b>	Administration of 1,431,349 doses of vitamin A to children aged six months to less than five years and administration of 1,619,741 doses of deworming (Mebendazol) to children aged 1-12 years;



## **2016 World Immunization Week: Close the Immunization Gap**

The 5th annual World Immunization Week (WIW) was celebrated from 24-30 April 2016 with the slogan: Close the Immunization Gap – Immunization for all throughout life. As a global initiative, WIW aims to promote the use of vaccines to protect people of all ages against disease, as immunization saves millions of lives and is widely recognized as one of the world’s most successful and cost-effective health interventions.

This was the second year of the Close the Immunization Gap campaign, which celebrates the enormous successes to date in reaching children all over the world with life-saving vaccines, while also stressing the challenges that countries continue to face in reaching populations living in vulnerable conditions. The 2016 worldwide campaign also stressed the need to immunize individuals throughout their life course.



## SELECTED PHOTOS VWA 2016



One of the first doses of bOPV applied in Ecuador. Photo credit: PAHO-Ecuador.



Dr. Karen Lewis Bell, Caribbean PAHO Advisor, visits health clinics in Jamaica to validate the switch. Photo credit: PAHO/WHO.



A young child is among the first to receive bOPV in Jamaica. Photo credit: PAHO/WHO.



On April 30<sup>th</sup>, after the last day of vaccinating children with tOPV was completed, a validation team prepares to walk in to a clinic in Bogotá, Colombia to collect remaining tOPV vials, deliver bOPV, and sign forms validating that the process was successfully completed. Photo credit: PAHO/WHO.



Trinidad and Tobago destroying unused tOPV vials in incinerator. Photo credit: National Validation Report Trinidad and Tobago.



Group promoting Vaccination Week in the Americas in Peru. Photo Credit: Adolfo Abel Villaba Dias.

# Annex 1.

**Table 1.** People vaccinated, by Target Population and Country or Territory, VWA 2016\*

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/Unspecified	TOTAL
Anguilla	201		210	204						615
Antigua & Barbuda										
Argentina <sup>1</sup>									50,775	50,775
Aruba										
Bahamas										
Barbados	3	6		247						256
Belize	136	721	983	1,570						3,410
Bermuda										
BES Islands (Bonaire, St. Eustatius and Saba)										
Bolivia										
Brazil			11,294,476			20,279,998		4,679,942	13,647,690	49,902,106
British Virgin Islands			25	23				128		176
Canada										
Cayman Islands										
Chile										
Colombia	55,839	126,028			61,431				117,020	360,318
Costa Rica										
Cuba										
Curaçao										
Dominica										
Dominican Rep.			526,817							526,817
Ecuador			970,338							970,338
El Salvador	27,373	3,574	5	818	43,924	1,618		1,041	25,722	104,075
Grenada										
Guatemala	100,581		63,283		82,921					246,785
Guyana										
Haiti										
Honduras	53,973	1,211	47,438	65,806	52,491	474,436		35,637	364,165	1,095,157
Jamaica										
Mexico										
Montserrat										

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			660,453		615,173					1,275,626
Panama	6,985	17,680		9,750	24,780	16,300		15,300	28,608	119,403
Paraguay										
Peru <sup>2</sup>	58,059		98,049	39,607	135,233	35,380		8,503	163,865	538,696
St. Kitts and Nevis										
St. Lucia								81		81
St. Maarten		6		21						27
St Vincent and the Grenadines			92	127	184					403
Suriname										
Turks and Caicos										
Trinidad & Tobago										
United States										
Uruguay			820		173	3,657		826	13,466	18,942
Venezuela	101,392									101,392
<b>TOTAL</b>	<b>404,542</b>	<b>149,226</b>	<b>13,662,989</b>	<b>118,173</b>	<b>1,016,310</b>	<b>20,811,389</b>		<b>4,741,458</b>	<b>14,411,311</b>	<b>55,315,398</b>

\*Data updated as of 7 December 2016. Results from some countries are still pending.

1. "Other" in Argentina are doses of influenza vaccine; doses by population group were not specified. The country also applied all of the vaccines in their national schedule.
2. "Others" in Peru are at risk males ages 10-60+years vaccinated with Td and individuals ages 18-59 years vaccinated with Hepatitis B.

**Table 2. Number of Doses Administered by Antigen and Country or Territory, VWA 2016\***

Country	MMR	MR	DTP	DT	Td	TT	Hib	Hep B	Penta-valent	Polio (OPV & IPV)	BCG	YF	Influenza	RV	Pneumo	HPV	Varicella	Other
Anguilla																		
Antigua & Barbuda																		
Argentina								5,802	5,793	7,756	1,092	408	50,775		9,483	2,441	1,401	15,839
Aruba																		
Bahamas																		
Barbados	5		1	1	93				2	33			83		2	32	1	
Belize	315		737	10	2,561			66	136	1,788	75		593					
Bermuda																		
BES Islands (Bonaire, St. Eustatius and Saba)																		
Bolivia																		
Brazil													49,902,106					
British Virgin Islands				128				128								23		25
Canada																		
Cayman Islands																		
Chile																		
Colombia					117,020					184,293	61,431		529,278					188,160
Costa Rica																		
Cuba																		
Curaçao																		
Dominica																		
Dominican Rep.										526,817								
Ecuador										970,338								
El Salvador	16,613		8,623	199	66,871			10,180	36,287	44,721	8,075	818	2,842	16,956	25,355			2,540
Grenada																		
Guatemala	20,659		27,578		82,921			4,040	26,063	174,519	8,763		18,747	18,064	28,876			
Guyana																		
Haiti																		
Honduras	18,093		47,438		118,297				55,272	78,314	13,974		874,238	35,325	54,126			
Jamaica																		
Mexico																		
Montserrat																		

Country	MMR	MR	DTP	DT	Td/Tdap	TT	Hib	Hep B	Pentavalent	Polio (OPV & IPV)	BCG	YF	Influenza	RV	Pneumo	HPV	Varicella	Oth
Nicaragua	521,987	615,173	112,843		615,173				64,503	660,453				36,843	53,207			
Panama	5,047		2,195		42,600			497		3,808			31,307		1,479	4,069	2,195	
Paraguay																		
Peru	135,759		43,511		205,348		153	141,937	155,588	250,443	51,655	52,308	442,258	96,912	152,686			
St. Kitts and Nevis																		
St. Lucia					23			16					42					
St. Maarten	18			21						21					3	16		
St Vincent and the Grenadines	14		2	8	184			92	26	36		127						
Suriname																		
Turks and Caicos																		
Trinidad & Tobago																		
United States																		
Uruguay													11,118					
Venezuela									101,392	177,412								
<b>TOTAL</b>	<b>718,510</b>	<b>615,173</b>	<b>242,928</b>	<b>239</b>	<b>1,251,091</b>	<b>0</b>	<b>153</b>	<b>162,630</b>	<b>445,062</b>	<b>3,080,752</b>	<b>145,065</b>	<b>53,661</b>	<b>51,863,387</b>	<b>204,100</b>	<b>325,217</b>	<b>6,558</b>	<b>3,597</b>	<b>206</b>

\*Data updated as of 7 December 2016. Results from some countries are still pending.