

Vaccination Week in the Americas

25 APRIL – 2 MAY

FINAL REPORT 2020



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“Love. Trust. Protect. #GetVax”



www.paho.org/vwa



PAHO/WHO



@pahowho

PAHO



Pan American
Health
Organization



World Health
Organization
REGIONAL OFFICE FOR THE
Americas

Vaccination Week in the Americas 2020 FINAL REPORT

Return to PAHO by 15 June 2020

| | |
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| Country | |
| <i>Summarize in a short paragraph how your country celebrated VWA 2020</i> | |
| | |

| Evaluation Activities | | |
|--|---------------------------------|--------------------------------|
| <i>Countries are highly encouraged to undertake short surveys during VWA; a proposed template can be found on the website (see direct link below), followed by a model survey for evaluating VWA social communication campaigns (see direct link below).</i> | | |
| <i>Did you use Vaccination Week in the Americas as a platform to monitor public satisfaction with vaccination? Describe below.</i> | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| | | |
| <i>Did you conduct any evaluation activities for VWA? (e.g.: administration coverage, assessment of public satisfaction with vaccination, vaccine confidence, evaluation of VWA social communication campaigns, targeted coverage surveys). Describe below</i> | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| | | |

| Launching Events | | | | |
|------------------|----------|------------------------------|---|-----------------|
| Date | Location | Local/National/International | Invited guests (from government, UN agencies, civil society, celebrities, etc.) | Additional info |
| | | | | |
| | | | | |
| | | | | |

| Number of people vaccinated by population | | | | | | | | | |
|---|--------------------------|--------------------------------------|----------------------------------|---------------------------------|---------------------|-------------------------------------|-----------------------|--------------------|-------|
| <i>Please enter the number of persons vaccinated per age group.</i> | | | | | | | | | |
| 0-12 months | 1-4 years | <5 years | > 5 to 18 years | WCBA s Td | Adults | >60 years | High risk occupations | Others/Unspecified | TOTAL |
| | | | | | | | | | |
| Comment/Explanation (if needed): | | | | | | | | | |
| Goals by Antigen | | | | | | | | | |
| <i>Please enter the number of persons vaccinated with each antigen.</i> | | | | | | | | | |
| Measles Mumps Rubella (MMR) | Measles and Rubella (MR) | Diphtheria, Tetanus, Pertussis (DTP) | Diphtheria Tetanus (<7 yrs) (DT) | Tetanus diptheria (>7 yrs) (Td) | Tetanus toxoid (TT) | Haemophilus influenzae type b (Hib) | Hepatitis B | Penta-valent | |
| | | | | | | | | | |
| Polio OPV | Polio IPV | BCG | Yellow Fever | Influenza | Rotaviruses | Pneumo | HPV | Other | |
| | | | | | | | | | |
| Comment/Explanation (if needed): | | | | | | | | | |

| Campaign Specifics | | |
|--|---------------------------------|--------------------------------|
| Sustaining the achievements <i>Did you carry out activities to protect achievements (e.g.: maintaining elimination of diseases, completion of childhood schedules, etc.)? Briefly describe in the space below.</i> | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| | | |
| Completing the unfinished agenda in order to prevent and control vaccine-preventable diseases <i>Did you carry out activities to complete the unfinished agenda (e.g.: seasonal influenza prevention, elimination of neonatal tetanus, protection of occupational risk groups, hep. B elimination, etc.)? Briefly describe in the space below.</i> | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| | | |
| Tackle new challenges <i>Did you carry out activities to face new challenges (e.g.: introduction of new vaccines, HPV campaigns, strengthening occupational capacity and infrastructure, etc.)? Briefly describe in the space below.</i> | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

| | | |
|--|---------------------------------|--------------------------------|
| | | |
| Strengthen health services for effective vaccine administration <i>Did you carry out activities to strengthen health services?</i> | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| | | |
| Vulnerable Population Group Activities <i>Did you carry out activities to target vulnerable population groups?</i> | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| | | |

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| Measles | | |
| VWA 2020 is a great opportunity for all the countries of the Region to do their part to end the current outbreaks of measles, protect their communities, and permanently eliminate the measles virus in the Americas. | | |
| Protect the achievement of measles elimination <i>Did you carry out activities to protect the elimination of measles in your country?</i> <i>Describe activities below.</i> | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| | | |
| What ages? | | |
| Were adults vaccinated against measles? How many | Yes <input type="checkbox"/> No <input type="checkbox"/> Number: _____ | |
| | | |

| Social Mobilization and Communication Activities | | |
|--|---------------------------------|--------------------------------|
| Did you use the Regional slogan, “Love. Trust. Protect. #GetVax”? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Did you develop other targeted messages/slogans? This can include the adaptation of slogans into indigenous languages. Describe below. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| | | |
| Did your country develop additional communicational/promotional materials (e.g.: brochures, posters, t-shirts, etc.)? Describe below. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| | | |
| Did your country carry out activities to improve public awareness regarding the importance of immunization for good health? (e.g.: health fairs, sensitization sessions, other public awareness activities). Describe below. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| | | |
| Were there press releases for media attention? Describe below. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| | | |
| Did you use social media (Facebook/Twitter) to promote VWA? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| | | |
| Did you document activities through photos, videos, and other audiovisual materials? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| <i>Please share links to photos, videos, and other materials.</i> | | |
| | | |
| Did you capture images of the materials being used in public spaces such as health clinics, school, or others? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| | | |

Integrated Activities

Did your country involve integrated interventions (non-vaccination related) during VWA? (eg: Zika prevention, Vitamin A, deworming treatments, health screening, and health education). Please describe below the type of activity and targeted audience.

Yes

No

Annexes

Please attach any additional information you would like to share.