



Expanded Programme on Immunization

Expanded Programme on Immunization has been delivered the immunization services to the targeted children of under one year old child and pregnant women. Currently total eight antigens have been providing to all yearly birth cohort in the country.

The National Immunization Strategies has been developed based on the framework reflected in the Global Vaccine Action Plan - GVAP (2011-2020), its mission being to improve health by achieving the full benefits of immunization regardless of where they are born, who they are, or where they live. The efforts has been made to accomplish the vision of Decade of Vaccine by delivering universal access to immunization. National immunization system and its functions focus to achieve the following objectives.

- (1) To maintain the country status of “free of poliomyelitis”
- (2) To achieve the regional elimination targets for Measles in 2020 and Congenital Rubella Syndrome control
- (3) To sustain the elimination status of Maternal and Neonatal tetanus elimination
- (3) To get vaccination coverage targets in every district and community
- (4) To introduce new vaccines and technologies
- (5) To contribute the effort in achieving the Millennium Development Goal 4 target of reducing child mortality

The five principles which are guiding the elaboration of GVAP ; the country ownership, shared responsibility and partnership, equity, integration, sustainability and innovation has been incorporated to the costed plan of EPI(comprehensive multiyear plan - 2012 to 2016).

EPI in 2013-2014

Strengthening National technical advisory body; National Committee for Immunization Practices

Under guidance from Ministry of Health, the technical issues for National Immunization Programme have been advised by National Committee on Immunization in Practice (NCIP). The NCIP has been formed in 2009 and has been strengthened in 2012 by upgrading the members and developing its charter. The NCIP developed charter has been approved Ministry of Health.

Recently NCIP has advised policy and practice on vaccine preventable outbreak control, polio eradication and polio vaccination to travelers, hepatitis B control in Myanmar and new vaccine to be introduced into national immunization schedule.

Cross Border collaboration for joint Vaccine Preventable Disease outbreak control

Myanmar is actively collaborating with the neighboring countries for health care activities. The vaccine preventable diseases trend has been monitoring with the regional network for rapid sharing the outbreak information for effective control measures. Identification of a child in China from Myanmar with vaccine-derived poliovirus in 2012 and the response activities further illustrated the importance of good communication and challenges across national and regional borders.

In order to foster relationships and facilitate local information sharing of disease surveillance and control efforts of polio and other vaccine preventable diseases (VPDs), the Government of Myanmar suggested a cross border meeting with neighboring countries and WHO's South-East Asia Regional Office organized a cross-border meeting with the participation of countries of the Greater Mekong Subregion (GMS) including Cambodia, China, Lao People's Democratic Republic, Myanmar, Thailand, and Viet Nam to identify high risk populations at border areas and activities to be initiated to mitigate the risk of importation and transmission, starting with polio. The recommendations were to enhance coordination mechanisms for data sharing on EPI surveillance and to synchronize activities whenever possible. The meeting was held in Bangkok, Thailand, from 23 to 25 July 2013. In addition to polio, experiences of measles and other VPD outbreaks were also discussed.



Post Introduction Evaluation of New Vaccine in Myanmar

Following the introduction of pentavalent vaccine and Measles second dose in November 2012, EPI has conducted Post Introduction Evaluation in March 2014. The immunization expert from WHO Headquarters, Regional office, country office and UNICEF country office's participant visited to selected regions and States from 21-25 March 2014.

The team access to all level of EPI administration and concluded that Myanmar has successfully introduced the new vaccine into the immunization programme. Also the team debriefed to senior officials from Department of health and recommend areas to be strengthened.

Advocacy to local government to strengthen Immunization in Border and Hard to reach Areas

In 2013 , the areas previously uncovered by routine immunization services and the areas where there was vulnerable population due to displacement and conflicts were paid attention by Central EPI.

A series of advocacy meetings had been conducted in capitals of Eastern Shan State, Kachin State and Northern Shan State for the leadership and commitment from stakeholders.

The advocacy meeting being focused to the local authority, the leaders of the self-administrative areas , special region (4) in Eastern Shan State, pockets areas in Kachin State and Northern Shan State had been planned to be reached by Central EPI and State Health Department by assigning Health Poverty Action as immunizers to cover routine immunization services with all antigens as routine services in 2014.

As the involvement of the community and stake holder is crucial for the immunization target, central EPI has conducted the advocacy meeting targeted to the Bengali population in IDP camps and villages in Rakhine State. The strong commitment of the stakeholders including religious leaders lead to more access to immunization services in Rakhine state where the services had been distorted after series of social riots in mid 2012.



Advocacy Meeting to Local Government for Strengthening Immunization Services

Collaboration with the Partner Agencies and strengthening EPI workforce

According to the recognized reasons for left out or miss children for immunization , the most challenging issue is imbalance proportion among the immunizers and target beneficiaries, the children and pregnant women. EPI has been planning to increase the workforce for the skill care providers addition to current immunizers, midwives. Ministry of health has already approved the proposed plan to expand the immunizers by assigning the Public Health Supervisors Grade II as immunizers. Also the care providers from newly collaborated partners from local and international non government organizations has been trained the management and implementing skill for immunization services. There is significant impact to expand immunization services in critical areas in Rakhine, Kachin, Shan and Kayin States.

Revitalization of Routine Immunization Services in Rakhine State

After Polio catch-up campaign in 2013 April and in September 2013 onwards , the uncovered areas by immunization services in 12 Townships in Rakhine State had planned to revitalize routine immunization services.

Among those townships with conflicts, Sittwe Township Health Department could start successfully pilot to resume immunization in most of the Bengali camps and Rakhine villages which are sandwiched between Bengali villages.

About 1000 under 2 children and 500 pregnant women had been covered by routine immunization services in Sittwe. Altogether 62500 under 2 year children and 31500 pregnant women from 12 Townships are going to be received all vaccines in routine immunization.



Maintenance Campaign for Neonatal Tetanus Elimination

After a Lot quality Assurance Survey, World Health Organization has validated Myanmar as Maternal and neonatal Tetanus elimination 2010. The elimination status has to be maintained and EPI has conducted the desk review participated by related units for maternal and child health care. Also the review team was consisted of the representatives from school health team and officials from Ministry of Education since future activities would like to expand tetanus toxoid vaccine in the school based immunization programme. Following the desk review, 22 Townships from 7 States & Regions with Neonatal Tetanus Rate more than 0.1 had been

selected to boost the immunity by conducting 3 rounds of TT SIA in January, February and August 2014 , from 17th to the end of each month. About 1.4 millions of women of child-bearing age (15 years of age to 45 years of age) have being received 3 doses of TT through mass campaign.

Cold Chain Logistics Strategic Planning

Cold chain is regarded as the vital part of Expanded Programme on Immunization. To strengthen the system concerning cold chain logistics, EPI had conducted a series of assessment and studies in 2011, 2012 and 2013.

The findings and recommendations were disseminated in Cold Chain Logistics Strategic Planning Workshop at Nay Pyi Taw, 1 to 5 April 2013. From the recommendations of the Workshop, being made on (8) of strategic areas, the cold chain logistics system of EPI is planned to be established as an international standardized system.

The cold chain capacity needed for planned news vaccines has been analyzed, in consultation jointly with EPI and international consultant.

The gap has been identified and Department of Health lead the cold chain expansion plan in line with the need already evaluated.

More new vaccine planned to be introduced

As recommended from the National Committee for Immunization Practices (NCIP) meeting (1/2013) and (1/2014), Measles-Rubella (MR) Vaccine, Inactivated Polio Vaccine (IPV) and Pneumococcal Conjugate Vaccine has been prioritized as new vaccines to be introduced in National Immunization Programme in 2015-2016.

The proposals had been submitted to Government by Ministry of Health for cost sharing of Rubella containing MR vaccine and to Co-finance for Pneumococcal Conjugate Vaccines (PCV). The estimated amount for 5 years Government co-financing for two new vaccines is 6,490,600 US\$.

MR catch-up campaign for 9 months to 15 years old children which will be fully funded by GAVI Vaccine Alliance for Measles elimination and Congenital Rubella Syndrome (CRS) control in Myanmar and EPI is working closely with partners to conduct phase-wise campaign in January and February 2015.

