



Bhutan

BUILDING BACK BETTER WORKSHOP

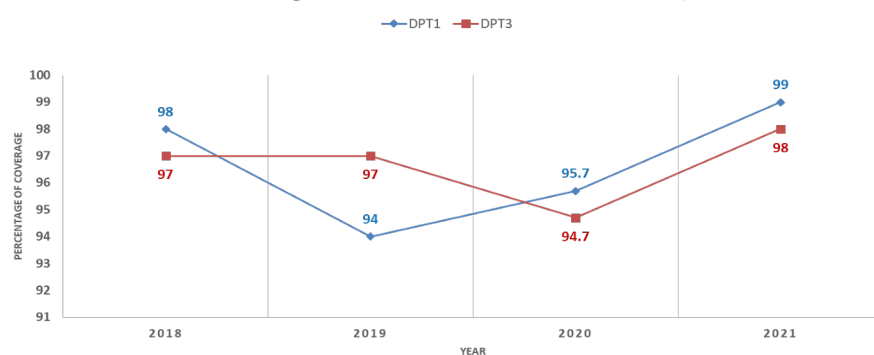
Sri Lanka, December 6-7, 2022



Key Measures 2018 - 2021

	18	19	20	21
Number of Children under 1 year of age	11337	11287	10600	11314
Coverage with third dose of DTP vaccine (%)	97	97	94.7	98
Coverage with the first DTP dose under 12 m. (%)	98	94	95.7	99
Drop-out rate between the first and third dose of DTP vaccine under 12 m. (%)	-1.29	+3	-1.09	-0.64
Coverage with the first DTP dose w/t age restriction (%)	-	-	-	-
Drop-out rate between the first and third DTP dose w/t age restriction (%)	-	-	-	-
Rota-1 coverage (%)	-	-	-	-
PCV-1 coverage (%)	-	63	89.44	99
DPT-1 coverage by 4 months (%)	-	-	-	-
MCV-1 coverage timely (as per schedule)	98	98	92.6	97
MCV-2 coverage timely (as per schedule)	93.7	92	99.5	91
Number of Zero dose children by 12 months	187	675	449	106
Number of Zero dose children by 24 months	-	-	-	-

DPT1 & DPT3 Coverage Rates Post Gavi Transition In Bhutan, 2018-2021



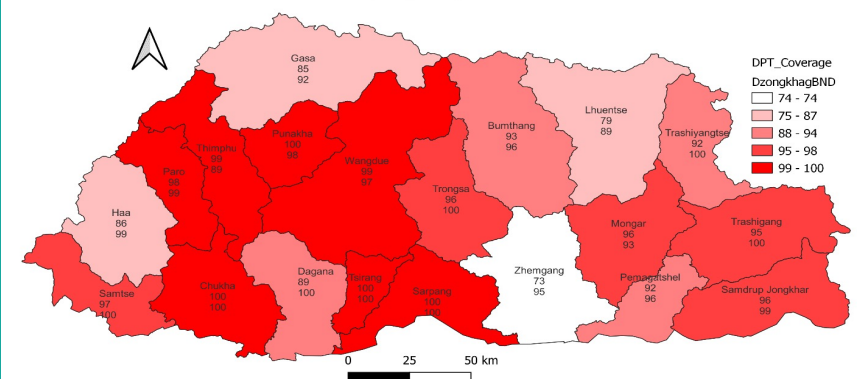
Under Immunised Children
0.64%

Zero Dose Children
0.94%

Workforce (National):
National Program: 2
NITAG: 9

Workforce (Sub-national):
Regional EPI Centres: 4
Districts/Sub districts: 600 av

DPT1 & DPT3 (Penta) Coverage Rates for Bhutan in 2021



Restoring RI Coverage in the Wake of COVID-19

Drivers:	Explaining Factors:	Current Initiatives:	Possible Solutions:
<ul style="list-style-type: none"> Frequent Lockdowns and movement restrictions during COVID-19 pandemic More focused on COVID-19 vaccination campaign Fear of COVID-19 acquisition while coming out of homes Prior/advance vaccine supply reserve placed to UNICEF – (While the world faced travel restriction, shortage of vaccines and disruption in vaccine supply chain management) 	<ul style="list-style-type: none"> Governance – more focused on pandemic managements – <i>Its immediate management and unforeseen long terms impacts!</i> Institutional – Ministry of Health (MoH) alone taking up the pandemic response in the fore-front initially Behavioural – people not taking risk to come out of homes for vaccination 	<ul style="list-style-type: none"> Uninterrupted Regular immunization across the country MoH shall not let vaccine stock outs Cold chain strengthened in all the health facilities Refresher training course for the health staffs being provided continuously Social media handles on importance of immunization/advocacy Cold chain capacity increased (Boxes) due to different temperature/storage of vaccines Cold Chain equipment's: Walk in Cooler/Freezer, ILR, Deep freezer, Solar Powered Freezer BVS – Bhutan Vaccine System (Online reporting system) developed which can be further used to incorporate other EPI vaccines Contingency Plan to Ensure Essential Healthcare Service in the Worst Case COVID-19 Pandemic Scenario in Bhutan 	<ul style="list-style-type: none"> Uninterrupted solar powered refrigerators Upgraded Cold-Chain equipment at Sub-posts, Primary Health Centres, Regional and National EPI Centres Assessment of Zero dose in the districts/ catchment area and plan for catch-up vaccination Refresher training course for the healthcare workers Best Performing District Award Initiative Vaccine data audit and validation by a joint team (Internal and External Experts)

Reaching zero-dose and under-immunized children

Drivers:	Explaining Factors:	Current Initiatives:	Possible Solutions:
<ul style="list-style-type: none"> Data Reporting error at different stages – Hospitals/PHCs to District Health Offices to HMIS/VDCP/DPEI Program Monitoring of drop-out rates Accuracy of under one population Coverage survey Infant mortality underreporting, possibly triggering high number of zero dose in Bhutan 	<ul style="list-style-type: none"> Governance – different priority for the Govt. Institutional – ownership problem Behavioural- Health workers dedication and consistency 	<ul style="list-style-type: none"> Assessment of zero dose in the districts/catchment area and plan for catch-up vaccination Assessment in the hard to reach areas Monitoring of hard to reach areas Uninterrupted/ Continuous EPI vaccines supply chain maintenance 	<ul style="list-style-type: none"> Identify causes of zero dose - Root cause analysis Missed opportunities – Reinforce through verbal questioning of the attendants on the immunization status of the child Service providers: Reorient the doctors, nurses and other service providers on immunization schedule and remind them to refer to MCH Empower Community Leaders, Teachers, Religious Heads and VHWs ad NGOs on immunization