



Learning Forum: Middle-income Countries New Vaccine Introduction Experiences Geneva, Switzerland, 23-25 April 2024

Coverage & Key Indicators

	HPV	Rota	PCV
Introduction Status	Nationwide	Nationwide	Nationwide
If Yes, from which year	February 2024	October 2023	October 2023
For HPV:			
Target group: age and sex	Girls aged 12 years		
Delivery mode: Facility, School-based, Mixed	Majorly school-based but also available in health facilities for girls who missed vaccination at school.		
Dose schedule: current and year if one-dose switch is planned	1 dose		

Key Challenges and Strategies

Achievements/Strengths	<ul style="list-style-type: none"> •Secured strong political support and financing •Thorough preparations for the launch, including formative research & a communication plan •Achieved high acceptance and uptake of vaccination, exceeding 90% •Effective coordination between schools and the health sector for school-based immunization •Ensured vaccination teams are well-trained to adapt to the updated immunization calendar •Raised awareness among health care professionals, policymakers, parents, and caregivers •Trainings for health care workers, immunization managers, pediatricians, and gynecologists. •Responsive media coverage regarding the HPV introduction. 	<ul style="list-style-type: none"> •Secured strong political support and financing •Achieved high acceptance and uptake of vaccination, exceeding 90% •Eliminated parental hesitancy towards vaccinating children with the Rota vaccine •Excellent coordination between municipal PHC responsible for vaccination implementation and the central level (NIPH) •Ensured vaccination teams are well-prepared to adapt to the updated immunization calendar •Raised awareness among health professionals, policymakers, parents, & caregivers
Challenges	<ul style="list-style-type: none"> •Online misinformation contributing to parental hesitancy; •Administering the HPV vaccine separately from other vaccines in schools resulted in stigma surrounding it; •Limited PHC HR for promoting demand and communication in schools; •Addressing demand among ineligible age groups (>12 years); •Lower vaccine uptake among vuln. populations (Roma, Ashkali, Egyptian comm.) due to limited vaccination awareness & high % of children out of school. •Lower vaccine uptake among vulnerable populations (Roma, Ashkali, and Egyptian communities) due to limited vaccination awareness •The health information system lacks complete coverage, preventing real-time monitoring of children's vaccination status, especially among vulnerable populations. 	
Partner Support	<p>USAID: Financial support to renovate cold-chain system.</p> <p>UNICEF: Technical support for vaccine procurement, digitalization of the vaccination module for data registration; Promoting demand for the HPV vaccine; Technical support in devising communication and social mobilization plan for 3 new vaccines; Assisted in the application process for GAVI TA.</p> <p>WHO: Technical support for health care worker training on new vaccines and refresher training on Immunization in Practice; Technical support in conducting a qualitative study to generate evidence for developing an effective communication strategy and intervention plan tailored to the needs of key target groups; Support for documentation for Gavi support with the introduction of HPV, rotavirus, and PCV vaccines; Organized capacity-building events for medical academia, leading clinicians, and immunization staff at national and municipal levels</p>	
Gaps	<ul style="list-style-type: none"> •The health information system lacks comprehensive coverage, preventing real-time monitoring of children's vaccination status, particularly among vulnerable populations •Insufficient financial resources to expand HPV vaccination to other age groups •Inadequate human resources and capacity at both central and municipal levels to address online misinformation and promote vaccine demand 	
Possible Strategies	<ul style="list-style-type: none"> •Strengthen health information systems to enhance real-time monitoring capabilities •Increase human resources and of HW capacities to conduct outreach in vulnerable communities •Enhance digital engagement skills among health care workers and improve demand promotion efforts to enable effective online engagement with the public 	