

Immunization

7. Immunization

Overview: In the past decade, Thailand has achieved targets of elimination and control all vaccine preventable diseases. With the national EPI launched in 1977, starting with 4 vaccines (BCG and DTP), to date we have increased in total 10 vaccines into the national EPI under the Universal Health Coverage Scheme. We can maintain high vaccine coverage at all levels. All children can be protected from disability and death, and grow up with good quality of life. In mid- 2017 HPV will be the 11th vaccine introduce to our national program-this will lower the risk for cervical cancer of our female population in the future.

Questions	Responses	Documents Required
Contextual Questions: N/A		
Technical Questions:		
P.7.1 Vaccine coverage (measles) as part of national program		
1. Does the country have a national-level immunization program or plan?	Yes	Vaccine preventable diseases operational plan
a. What vaccine preventable diseases are covered by this program or plan?	At birth : BCG, HB1 2 months : OPV1, DTP-HB1 4 months : IPV1, OPV2, DTP-HB2 6 months : OPV3, DTP-HB3 9 months : MMR1 1 year : LAJE1 1 year 6 months : OPV4, DTP4 2 years 6 months : MMR2, LAJE2 4 years : OPV5, DTP5 7 years (Student grade 1) : MR, HB, LAJE, IPV, dT, BCG for incomplete vaccination 11 years (Female student grade 5) : HPV1, HPV2 12 years (Student grade 6) : dT Pregnancy : dT depend on vaccination	National immunization schedule

Questions	Responses	Documents Required
	<p>history Risk population and health staff : Influenza vaccine</p>	
<p>b. Please list the target rates for coverage for each of these vaccines.</p>	<p>Target coverage for all vaccines are higher than 90%, except MMR and Vaccine coverage among student group are higher than 95%</p>	<p>Vaccine preventable diseases operational plan</p>
<p>c. Is the country's national vaccine action plan aligned with the WHO Global Vaccine Action Plan?</p>	<p>Yes</p>	
<p>d. Does the country's plan take into account zoonoses of national concern?</p>	<p>Yes, postexposure rabies vaccination</p>	
<p>e. Is immunization mandatory or voluntary?</p>	<p>Voluntary</p>	
<p>2. What programs or incentives are in place to encourage/support routine vaccination?</p>	<p>EPI program do not support for any incentive.</p>	
<p>3. What factors discourage/hinder routine vaccination?</p>	<ul style="list-style-type: none"> - Remote area - 3 southernmost insurgency provinces - Some religious/ethnics group - Migrant 	
<p>4. Please describe the systems used to monitor vaccine coverage.</p>	<ol style="list-style-type: none"> 1) Vaccine coverage survey 2) Health Data Center electronic database 	<ul style="list-style-type: none"> - Vaccine coverage survey report - Vaccine coverage data summary
<p>a. Is the % coverage with MCV and DTP tracked for the population?</p>	<p>Yes, the coverage in the local level tracks for population who live in the area.</p>	
<p>b. Which offices or agencies are involved in monitoring vaccine coverage for the</p>	<p>Department of Disease Control, Ministry of Public Health</p>	

Questions	Responses	Documents Required
country?		
c. How often is vaccine coverage measured?	Every 5 years at national level for coverage survey. Local health office monitors vaccine coverage using population registration continuously.	
d. What is the source and quality of the data used as denominator in coverage estimates?	Birth cohort is used as denominator at the national level. Number of population live in the area is used as denominator at the local level.	
e. Which systems do you have in place to monitor the quality of coverage data?	Health data center is developing to monitor data quality.	
5. Is there specific support (monetary and staffing) for data gathering/reporting?	National Health Security Office supports budget to healthcare providers which encourage them to send a vaccination report. We have a monthly video conference with all provinces to monitor vaccine coverage and provide technical support.	
P.7.2 National vaccine access and delivery		
1. Please describe how national systems ensure continuous cold chains as necessary for vaccine delivery throughout the country.	We conduct an immunization standard evaluation in all health regions which include logistics and cold chains.	Immunization standard manual
2. What is the structure and mechanisms which are in place to ensure sustainable supply to enable a successful program?	Vaccine storage at the hospital should be enough to supply for 2 months, and 6 months at the national vaccine storage.	Immunization standard manual
3. Please describe the most recent national	- MR vaccine campaign for children age 2.5	Campaign reports and documents

Questions	Responses	Documents Required
vaccine campaign(s) or any recent functional exercises geared towards vaccine distribution and/or administration in the country.	years – 7 years in 2015. - Nationwide dT campaign for adult age 20-50 in 2015. - OPV campaign in southernmost provinces of Thailand in early 2016. - MR vaccination campaign for adult in 2016.	
4. Is there specific support (monetary and staffing) for immunization delivery?	Immunization delivery throughout Thailand is operated by the Government Pharmaceutical Organization under National Health Security Office responsibility.	

Challenge issues in Immunization Programs

Vaccine coverage data

Vaccine coverage is carried out using survey method, which can be done every 5 years at the national level. However, health staff at the local level (district or sub-district) has a registration of population in the responsible area. They can track target population for the completeness of vaccination.

Cause of issues

1. Highly population movement; urban, border provinces, special economic zone
2. Insurgency provinces; 3 southernmost provinces
3. Migrant
4. Health database system
5. Healthcare providers that provide vaccination are under different government agencies and also private sector.

Recommendation

1. Development of health database system; Health Data Center
2. Recruit every healthcare providers to send vaccination data to the national level