Weekly Highlights

- No new cases reported this week - epi week 17
- The total number of confirmed circulating vaccine derived poliovirus type 1 (cVDPV1) in Indonesia remains 1 (positive samples from two healthy children have been collected confirming the circulation of VDPV type 1 in Yahukimo District, Papua Province.
- On completion of round 1 of the outbreak response, the Director General Communicable Disease travelled with a senior team to review progress in Papua, 29-30 April.
- The first immunization response round targeting children 0 to 15 years in Papua and West Papua provinces concluded on the 28th of April. In total, 968,977 of the 1,262,880 targeted children in both provinces were vaccinated with bOPV.
- The second immunization response round has begun in all districts of West Papua and districts of Papua that reached >95% of targeted children by 13 April. This second round started on the 29 April. High-land districts of Papua that extended their vaccination efforts during the first round, plan to start their second round on the 13 May, following validation of micro-plans and concurrence on logistics and budgeting.
- Social mobilization activities have been intensified this week. They include media sensitization and monitoring; the production and dissemination of advocacy materials (poster, banners, discussion guides), the production of radio/TV spots, mobilization of key civil society groups (churches, scouts, midwives and professional associations), the contracting of local NGOs in hard-to-reach areas and real-time vaccine hesitancy monitoring in accessible areas (5 partners in Papua, 1 in West Papua).
- Rapid Convenience Assessments (RCA) have been conducted in Papua and West Papua provinces – As of 2 May, results from 19 RCA in 4 districts in Papua and 48 RCA in 12 districts of West Papua have been analyzed. RCA found 12% missed children in Papua and 5% in West Papua.
- New AFP cases from both Papua and West Papua have been reported this week – the total number of AFP cases reported in Papua this year has increased to 17, and W. Papua 2.

Summary

New cVDPV1 cases this week: 0
Total number of cVDPV1 cases: 1
Total number of healthy children contact positive for VDPV1: 2
Outbreak grade: 1
Most recent detection: 13 Feb 2019

Case Details

Sex: Male
Age: Thirty-one months
Onset of paralysis: 27 Nov 2018
Vaccination status: 0 dose

Infected Area

Dekai Subdistrict
Yahukimo District
Papua Province

Outbreak Response

Where: Papua and West Papua
Who: All children 0 to below 15 years
Target: 1.26 Million Children
Vaccine Type: bOPV
Indonesia has adopted a differentiated approach for reaching all children that is tailored to 3 geographical and social risk blocks (1) West Papua, all districts (2) Papua accessible/lowland districts, and (3) Papua poorly accessible/highland districts.

Travelers visiting Papua for longer than four weeks are being vaccinated at points of entry until the outbreak is closed.

**Round 1**

The first polio sub-national response round, targeting children 0 to below 15 years with a supplementary dose of bivalent oral polio vaccine (bOPV) has been completed.

In West Papua, all 13 districts reached >95% of the targeted population with many districts reaching more than 100% of the estimated target. Polio vaccine was delivered along with Albendazole tablets to treat tape worm infection in targeted children.

In Papua Province, 11 of 29 districts reached >95% coverage. A further five reached more than 80% coverage. 13 districts have coverage reported at less than 80%, including Yahukimo District where coverage has remained at 17%.

Approx 320,000 children 0-15 years were missed during round 1. Almost all of these children live in very hard to reach districts of the highlands in Papua.

As of 2 May, more than 3,200 children have been monitored for vaccination through Rapid Coverage Assessments (RCA) in both Papua and West Papua. RCA results indicate that the main reasons for missed children in Papua were parent traveling or working and in West Papua because the child was sick or because parents did not know about the polio vaccination.
Round 2

- Round 2 of the polio sub-national outbreak response has begun in all districts of West Papua and in low-land districts of Papua province. As of 2 May, reported coverage from W Papua is 28% and in Papua it is 6%.

- Intensified microplanning efforts have been undertaken by the MOH and partners last week to strengthen planning and operations for high-risk districts in Papua Province where critical coverage thresholds in round 1 were not achieved. Efforts have continued this week to update and validate micro-plans and budgets ensuring that clear plans are made to reach all children in these areas whether helicopter, plane, boat, four-wheel drive, motorbike or even porter are needed to ensure access.

- MoH and partners have worked on a special implementation plan for Yahukimo - where outreach beyond the district capital has been insufficient (coverage 17%). The aim is to intensify a coordinated effort to reach the approximately 40,000 children who have not received vaccination during the first round. 47 landing sites have been mapped and helicopters and planes organized through local partners to deliver vaccines to these communities. Special teams that include MoH, UNICEF, WHO, local church representatives, social mobilizers and logisticsian will visit these areas for a number of days and conduct social mobilization, assess the accuracy of denominators, conduct immunization and scan for AFP cases. The aim of this operation is to inform robust planning across 17 other high-risk districts.

Surveillance Summary

- In 2018, Indonesia’s non-polio AFP rate was 2.14 with a stool specimen adequacy rate of 79%. 13 provinces of 34 met both key indicators for AFP surveillance: >2 or more non-polio AFP cases per 100,000 children below 15 years of age and >80 percent or above AFP cases with adequate specimens.

- In 2018, Papua province had a NP AFP rate of 1.5 with stool collection at 62%. West Papua province had a NP AFP rate of 0.3 with stool collection at 0%.

- Four cases of AFP have been reported this week from the outbreak response zone. Two cases have been reported from Papua and two from West Papua.

- Lab results for an AFP case reported from Papua in week 6, are negative for poliovirus. However, the case will be reviewed by the Expert Review Committee as stool samples were inadequate.

- Environmental Surveillance results are pending this week.

- Hospital Record Reviews in 12 high risk provinces continue. WHO is working with the MoH to develop an integrated plan to refresh training and improve VPD surveillance and strengthen links between hospitals and the national surveillance network.

- Indonesia’s Pediatric Society (IDAI) is planning to conduct a webinar emphasizing the importance of sensitive and timely reporting of suspected acute flaccid paralysis (AFP) cases within its organization. A number of refresher videos on AFP surveillance and polio is being shared through this network.
Communication and Social Mobilization

- Social mobilization activities were initiated in all districts during round.
- Mobile applications have been developed to assist with real-time mapping and monitoring community activation efforts in accessible areas. In Papua, 33 outreach events have been uploaded from at least 10 districts reaching 2713 influencers including caregivers, community/traditional leaders, religious leaders and health workers. In West Papua, at least 16 key events in 10 districts reaching 814 influencers have been documented.
- Data from RCAs have shown little evidence of vaccine hesitancy as a reason for children not being vaccinated.
- A pictorial community discussion guide has been rapidly developed and pretested, printed and distributed widely through community social mobilizers, religious and traditional leaders to aid in raising awareness of polio, AFP, benefits of immunization, and importance of accepting bOPV each time it is offered.
- Additional IEC and media materials have been developed including radio jingles, video PSAs, and key messages for distribution on air, on social media, and to be played during community gatherings. These will be aired to support round 2 activities.
- Community involvement in social mapping component of micro-planning process in all high-risk districts has been added to assist in mapping areas of congregation, vulnerable or under-vaccinated children and other local community social structures that can be utilized to reach more children.
- Civil society engagement / mobilization in support of the polio campaign has taken place with a range of groups including religious leaders, scouts, the Red Cross, midwives and other professional associations, the military as well as village-based civic and traditional leadership structures.
- Six local NGOs have been contracted to provided additional social mobilization support and vaccine hesitancy monitoring for inaccessible/high-land districts in Papua Province. Ground-level outreach will be particularly important in high-risk districts where access to print, broadcast and social media are known to be poor.
Surge Support

Ministry of Health

- The Indonesian Ministry of Health continues to deploy senior experts to Papua and West Papua Provinces to support the planning, monitoring, coordination and evaluation of polio response activities.

- Director General Communicable Disease as well as two senior representatives to the Minister of Health travelled to Jayapura and met with the Provincial and District Health Offices to review first round performance and challenges for improving outbreak response quality, specifically the logistics and resources needed in highland districts.

- DG also chaired a partners meeting in Jayapura to enhance coordination for the response. This meeting was attended by focal points from WHO, UNICEF, CDC (Indonesia office), Indonesian Epidemiologist Association and NHRD.

WHO

- WHO have established a field office in Papua Province and recruited 10 national officers to support Papua and West Papua. A senior NPO from Jakarta has been deployed all of May to assist the local team.

- Two WHO international consultants are currently assisting with data, information analysis and communication coordination/management while supporting the quality of operations in Papua and West Papua.

- WHO Geneva has deployed a senior polio medical officer to support operations in the outbreak zone until 20 May. He is currently in West Papua.

- WHO SEARO regional polio focal point will arrive this week to support planning and operations in Papua.

UNICEF

- UNICEF has two established field offices in the capitals of Papua and West Papua Provinces. These teams have been re-enforced with surge support of national officers and consultants for immunization and C4D; alongside re-deployment of EPI specialists from Jakarta and other field offices across Indonesia.

- Two international polio experts - an immunization and communication specialist are scheduled to arrive in Jakarta the first week of May.

Other

- 60 Red Cross (RC) Volunteers continue to provide support to local Puskesmas staff vaccinating (giving oral vaccination) and marking children that have been vaccinated (covering 12 Puskesmas in Jayapura district).

- Rotary continues to provide Soc Mob and IEC material support in key districts of Papua and West Papua.

- US CDC Indonesia office is planning to strengthen their support for outbreak response operations through the Indonesian Epidemiologist Association (PAEI). A senior focal point from the central branch will be contracted for 3 months to provide support to provincial authorities. Additional support from the Papuan branch of PAEI will be deployed to districts to conduct RCA, strengthen AFP surveillance and EWARS.

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<tr>
<th>Partner</th>
<th>Support April 26</th>
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<tbody>
<tr>
<td>WHO</td>
<td>Nat Staff 4</td>
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<tr>
<td>UNICEF</td>
<td>2 (pending)</td>
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<td>Other</td>
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Red Cross Volunteers vaccinate and mark children in Jayapura District, Papua during the first polio response round. Credit: IFRC/PMI
Coordination

• The Ministry of Health continues to lead and coordinate government and partner support for all polio outbreak response activities. Weekly meetings at a national level help to coordinate activities and monitor the implementation of the polio outbreak response plan at local levels.

• A senior representative of the Minister of Health, has been nominated to directly support Indonesia’s polio outbreak response and will travel weekly to Papua to ensure the provincial emergency operating centre in Jayapura is working effectively.

• Strong cross-ministerial support has been received early in the campaign through the office of the President’s Chief of Staff, who have brought together the ministries of finance, home affairs and the military – the latter who have offered logistical support where needed.

• A weekly Joint WHO/UNICEF Video Conference between national and provincial teams is established to strengthen coordination and information sharing.

• Rotary International and IFRC continue to provide valuable support in mobilizing local communities working with local NGO and church groups to sensitize and build demand for polio vaccination. A weekly partners meeting hosted by WHO in Jakarta helps coordination and sharing of strategies and tools between key partners.

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Left and Right: Adrian and Merina Suu from Cenderawasih village, Nalca Sub-district, Yahukimo proudly show their finger markings after polio vaccination. Read more about their hopes for the future and the polio response in Papua and West Papua at www.searo.int/indonesia Credit: Dr. Indrini/WHO Indonesia.