

# Immunization Pulse Poll 2

Analysis of final data

- 1 Respondent numbers & demographics**
- 2 Overall status of vaccination services: May 2020
- 3 Status of demand for vaccination services: May 2020
- 4 Other information provided

# Overview

## Brief summary of pulse poll methodology and respondent composition

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- **Overview**

- Developed by WHO, UNICEF & Gavi, in collaboration with the Global Immunization Division/US Centers for Disease Control and Prevention (CDC), the Boost Initiative at the Sabin Vaccine Institute and the International Vaccine Access Center (IVAC) at Johns Hopkins
- This poll does not intend to replace any regional or other immunization data collection efforts, but was designed to get a quick idea of the global impact of COVID-19 on immunization services in May 2020
- Shared through WHO, UNICEF, Boost, Gavi & TechNet networks; MOHs were not directly contacted
- Going forward, it is expected that collection will be harmonized with regional office data collection activities

- **Poll Dates: 5 – 20 June 2020**

- Follow up to a similar, earlier poll conducted in April 2020

- **Respondent composition**

- **260** respondents from **82** different countries/territories
- Respondents came from 3 distinct categories of organization:
  - Ministry of Health respondents
  - WHO, UNICEF & Gavi respondents
  - Other respondents from: health facilities (public & private), NGO/faith-based organizations & NITAGs
- Fewer respondents than for the 1<sup>st</sup> pulse poll (which had 801 respondents from 107 countries), largely due to the fact that the 2<sup>nd</sup> pulse poll was not shared with the Scholar Network
- 34 individuals responded to both Pulse surveys (based on information\* collected in the optional email address field)

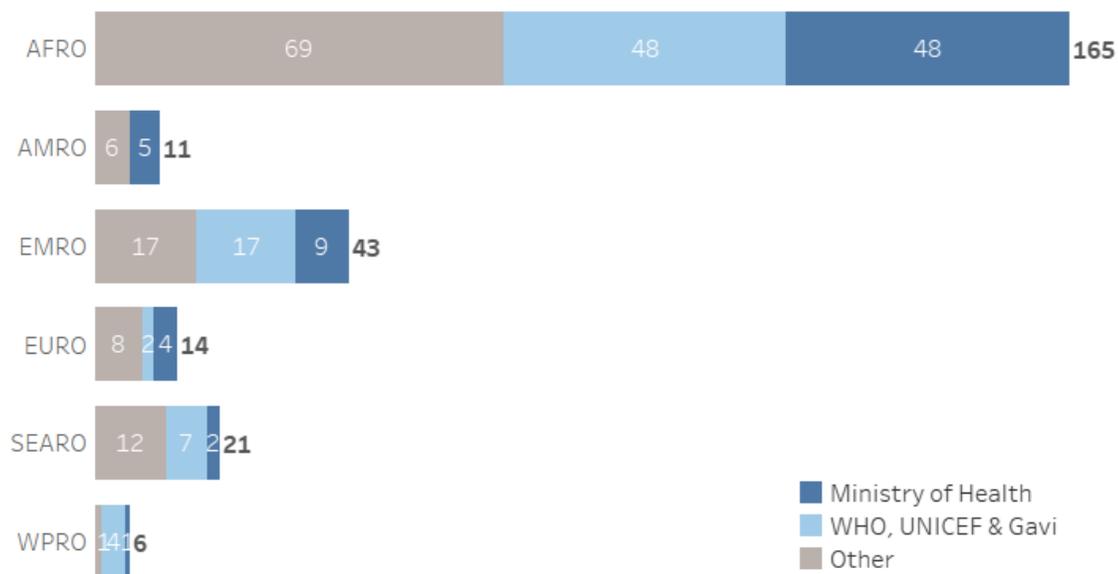
Source: Immunization Pulse Poll 2. \*706/801 Pulse Survey #1 respondents provided email addresses; 224/281 Pulse Survey #2 respondents provided email addresses

*The data collected are subject to limitations inherent to voluntary self-reporting, self-selection bias, not all countries responded, countries with only one response vis-à-vis countries with many, possibility of fraudulent responses and not having a sampling frame to make inferences. Furthermore, the information about each country does not represent official reporting from Member States to WHO or UNICEF. Thus, the results presented here need to be interpreted with caution and do not represent in any way a WHO or UNICEF position regarding any country or territory for which one or more replies were received.*

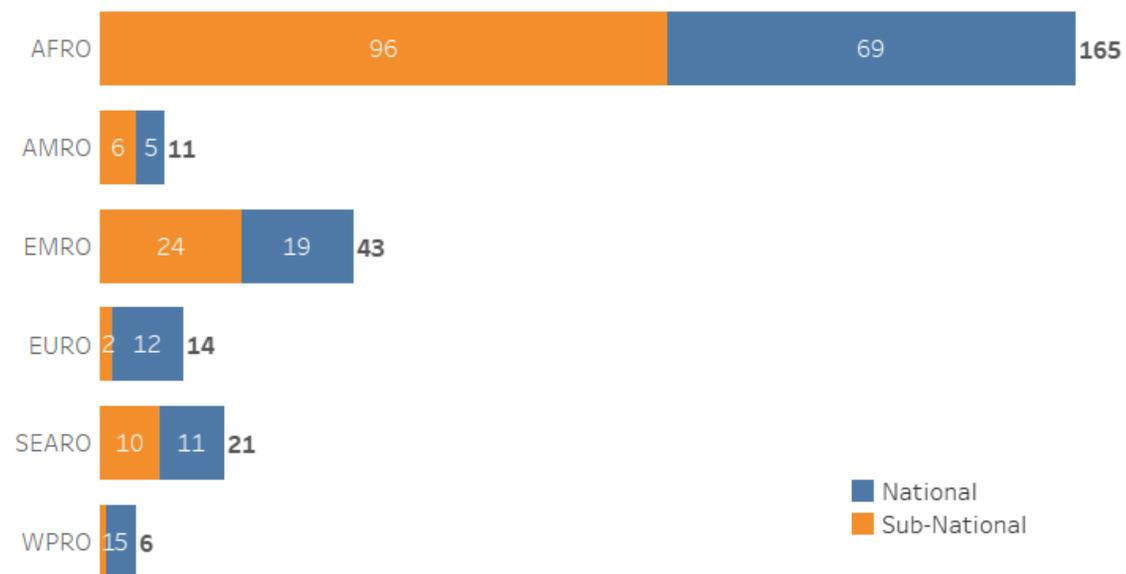
# Respondent information

## Regional breakdown of respondent numbers by organization and respondent level

By organization



By respondent level



Number of unique countries/territories responded

WHO Region	National	Sub-National	Total Unique Countries
AFRO	30	20	34 /47
AMRO	4	6	10 /35
EMRO	12	5	14 /22*
EURO	10	2	11 /53
SEARO	7	3	8 /11
WPRO	4	1	5 /27
<b>Grand Total</b>	<b>67</b>	<b>37</b>	<b>82 /195*</b>

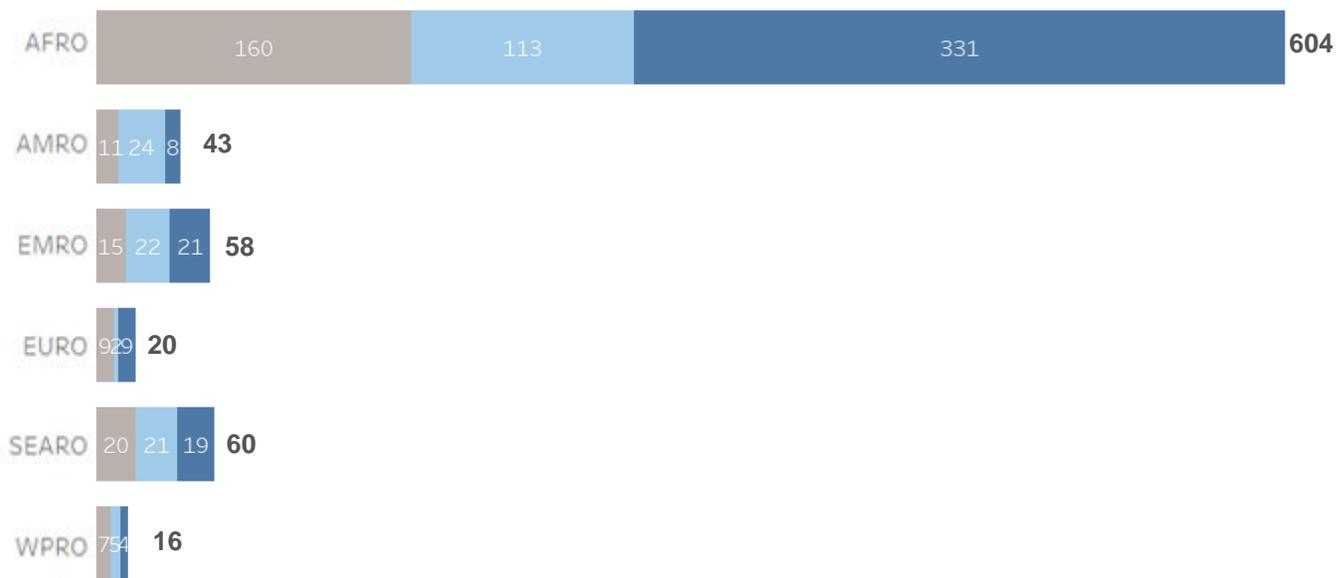
**# Respondents = 260**  
**# Countries/territories = 82**

Source: Immunization Pulse Poll 2. 'Other' respondents comprised of respondents from health facilities (public & private), NGO/faith-based organizations & NITAGs. \*Includes West Bank & Gaza Strip for purpose of analysis. The data collected are subject to limitations inherent to voluntary self-reporting, self-selection bias, not all countries responded, countries with only one response vis-à-vis countries with many, possibility of fraudulent responses and not having a sampling frame to make inferences. Furthermore, the information about each country does not represent official reporting from Member States to WHO or UNICEF. Thus, the results presented here need to be interpreted with caution and do not represent in any way a WHO or UNICEF position regarding any country or territory for which one or more replies were received.

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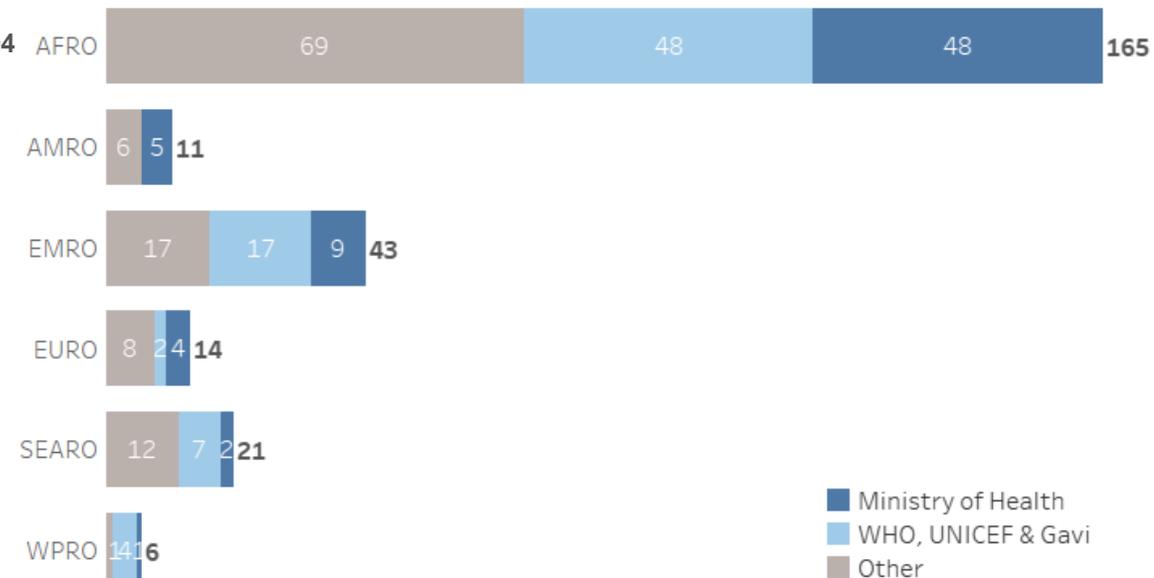
## Comparison of number of respondents in Pulse Poll 1 and Pulse Poll 2 by organization

### Pulse Poll 1 (April 14-24 2020)



**# Respondents = 801**  
**# Countries/territories = 107**

### Pulse Poll 2 (June 5-20 2020)



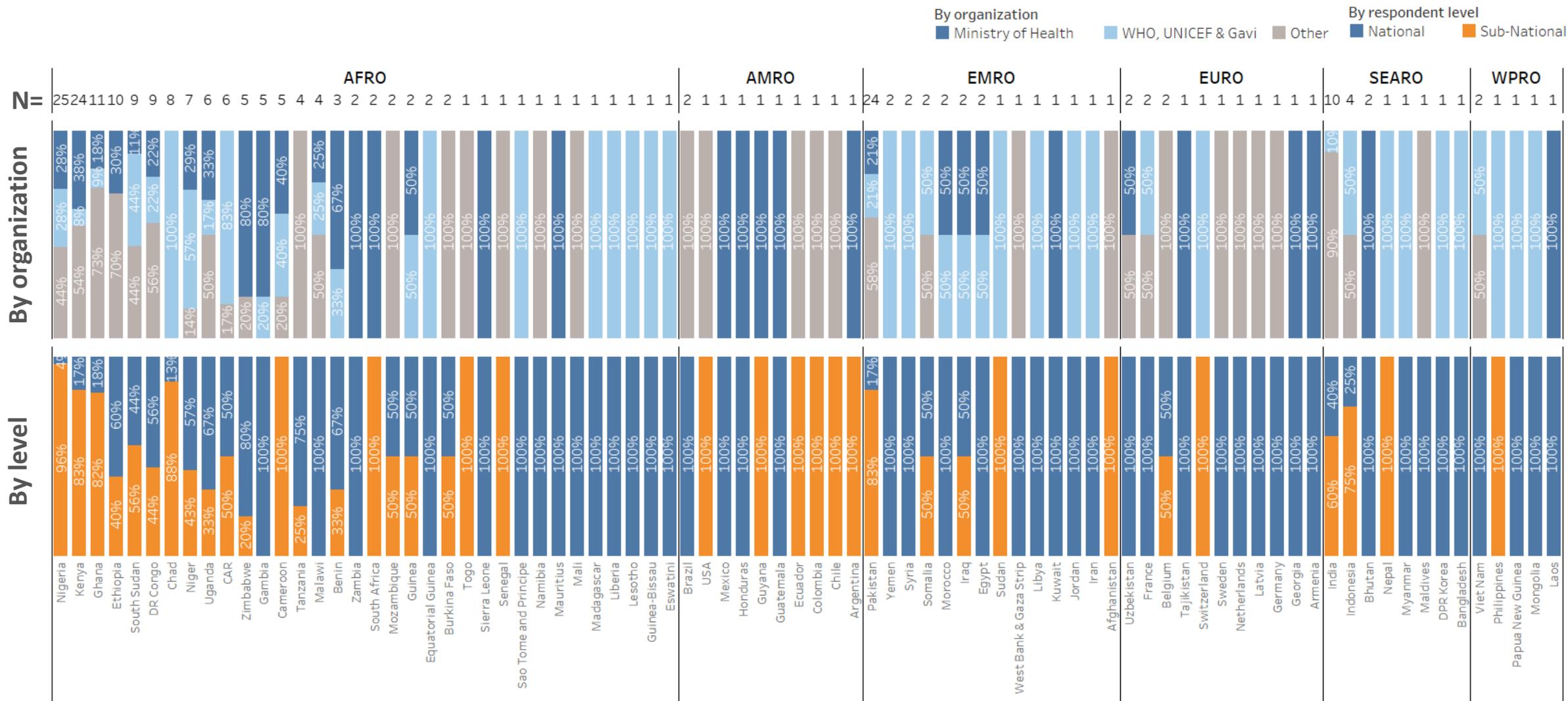
**# Respondents = 260**  
**# Countries/territories = 82**

■ Ministry of Health  
 ■ WHO, UNICEF & Gavi  
 ■ Other

Source: Immunization Pulse Poll 1 & 2. 'Other' respondents comprised of respondents from health facilities (public & private), NGO/faith-based organizations & NITAGs. The data collected are subject to limitations inherent to voluntary self-reporting, self-selection bias, not all countries responded, countries with only one response vis-à-vis countries with many, possibility of fraudulent responses and not having a sampling frame to make inferences. Furthermore, the information about each country does not represent official reporting from Member States to WHO or UNICEF. Thus, the results presented here need to be interpreted with caution and do not represent in any way a WHO or UNICEF position regarding any country or territory for which one or more replies were received.

# Respondent information

## Country level breakdown of respondent numbers by organization and respondent level

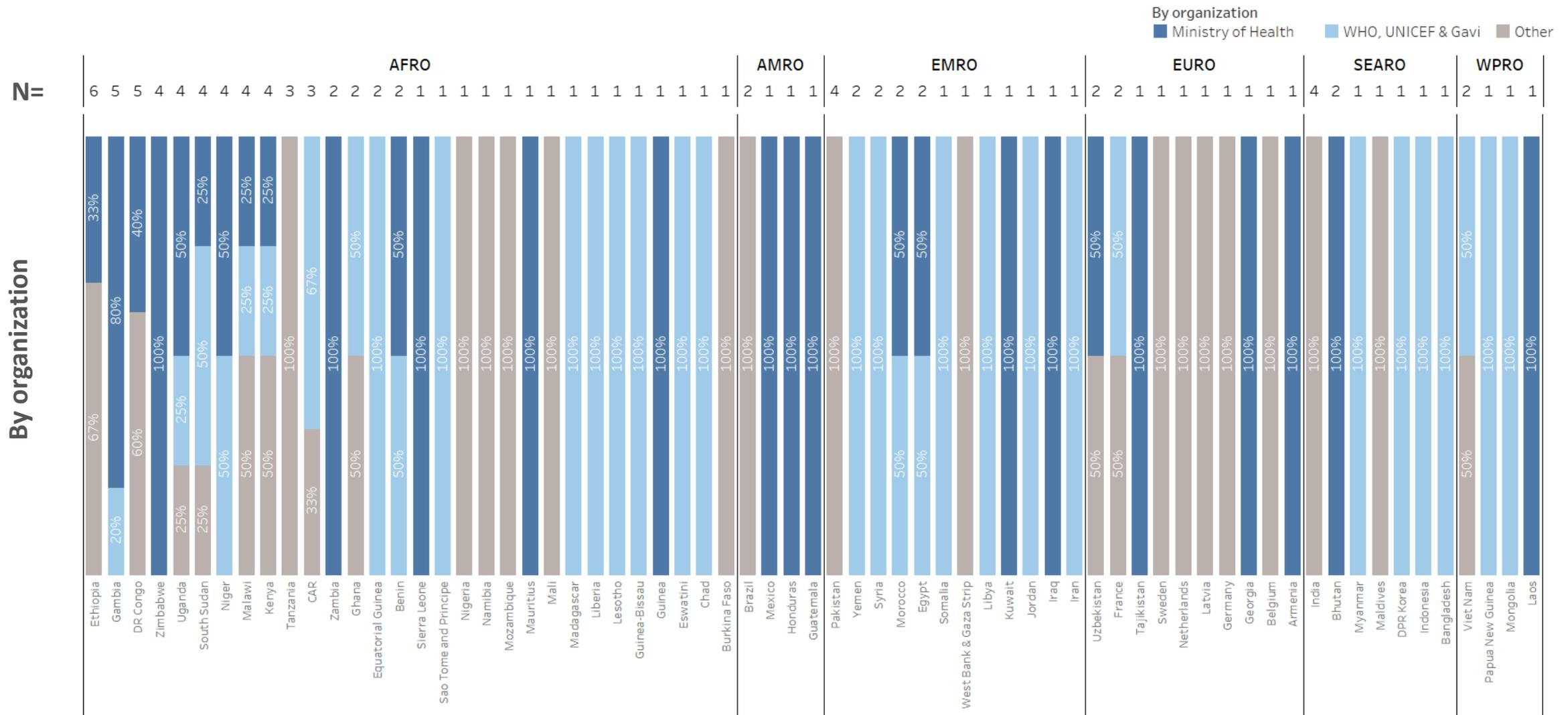


Source: Immunization Pulse Poll 2. 'Other' respondents comprised of respondents from health facilities (public & private), NGO/faith-based organizations & NITAGs

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# Respondent information

## Country level breakdown of national level respondent numbers by organization

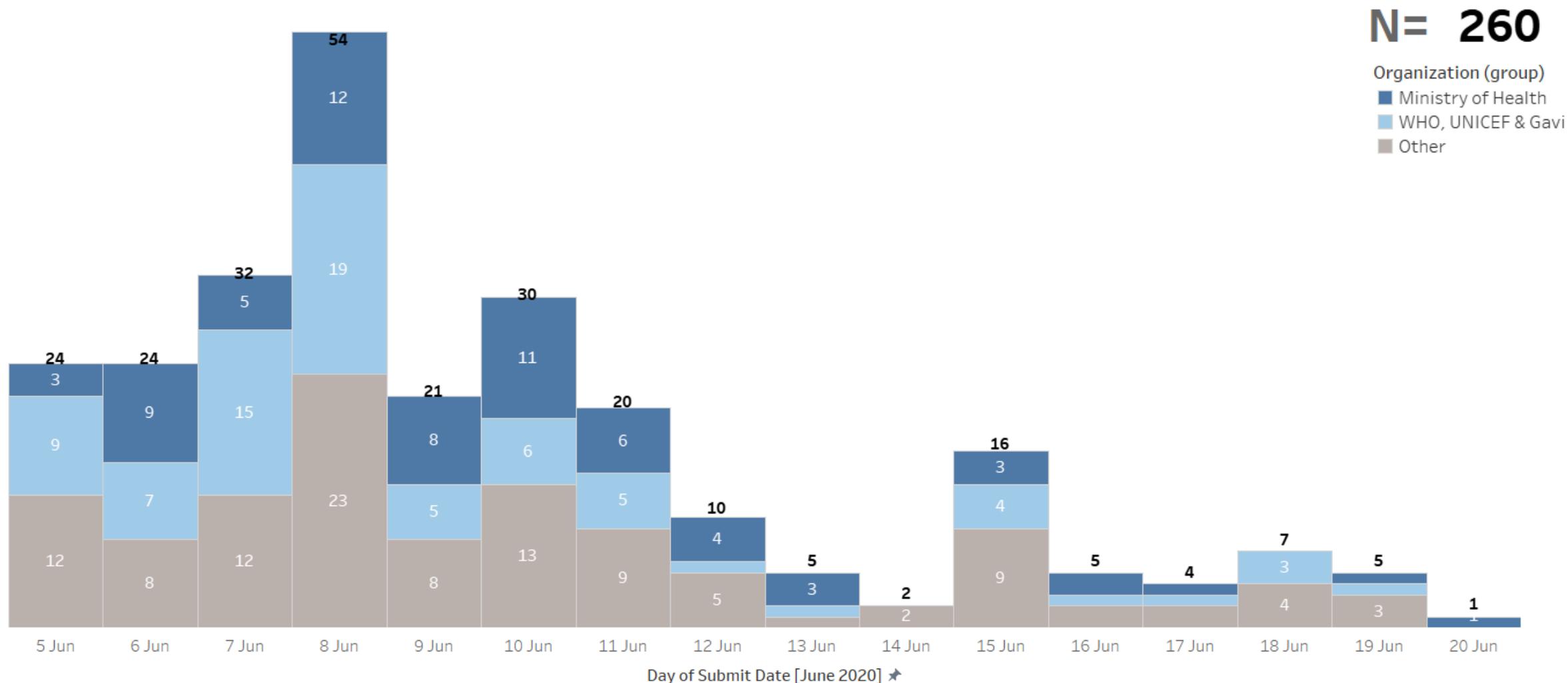


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# Respondent information

## Breakdown of number of responses submitted by date



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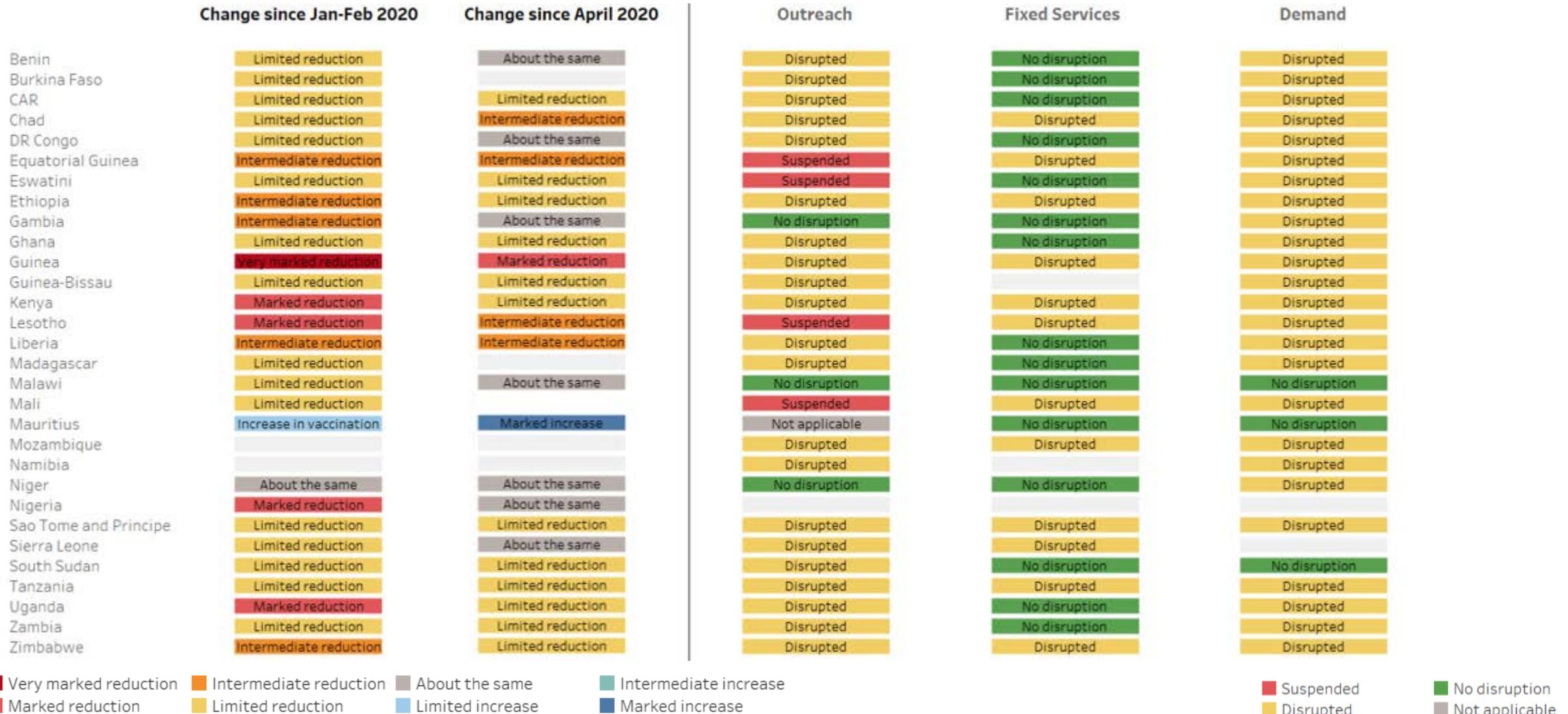
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# Status of Vaccination Services

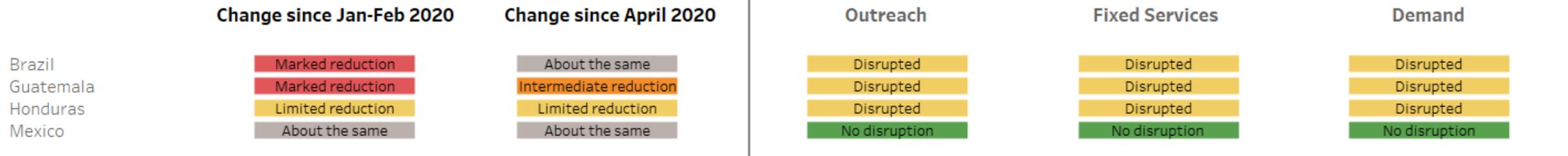
Reported level of disruption to vaccination services in May 2020 due to COVID-19



Source: Immunization Pulse Poll 2. Question 5, 7, 10, 16 & 17. National respondents only. Change analyses based on average response. Outreach, fixed & demand status analyses based on single majority response. The data collected are subject to limitations inherent to voluntary self-reporting, self-selection bias, not all countries responded, countries with only one response vis-à-vis countries with many, possibility of fraudulent responses and not having a sampling frame to make inferences. Furthermore, the information about each country does not represent official reporting from Member States to WHO or UNICEF. Thus, the results presented here need to be interpreted with caution and do not represent in any way a WHO or UNICEF position regarding any country or territory for which one or more replies were received.

# Status of Vaccination Services

Reported level of disruption to vaccination services in May 2020 due to COVID-19



■ Very marked reduction   
 ■ Intermediate reduction   
 ■ About the same   
 ■ Intermediate increase  
■ Marked reduction   
 ■ Limited reduction   
 ■ Limited increase   
 ■ Marked increase

■ Suspended   
 ■ No disruption  
■ Disrupted   
 ■ Not applicable

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	Change since Jan-Feb 2020	Change since April 2020	Outreach	Fixed Services	Demand
Egypt	Limited reduction	About the same	Disrupted	No disruption	No disruption
Iran	Limited reduction	About the same	Not applicable	No disruption	Disrupted
Iraq	Intermediate reduction	Limited reduction	Suspended	No disruption	Disrupted
Jordan	Marked reduction	Intermediate reduction	Suspended	Suspended	Disrupted
Kuwait	Limited reduction	Limited reduction	Not applicable	No disruption	Disrupted
Libya		Limited reduction	Not applicable	Disrupted	No disruption
Morocco	Limited reduction	Limited increase	Disrupted	No disruption	Disrupted
Pakistan	Intermediate reduction	Intermediate reduction	Disrupted	Disrupted	Disrupted
Somalia	Limited reduction	Limited reduction	Disrupted	Disrupted	
Syria	Limited reduction	Limited increase	Disrupted	No disruption	No disruption
West Bank & Gaza Strip	Limited reduction	Marked increase	No disruption	No disruption	Disrupted
Yemen	Intermediate reduction	Limited reduction	Disrupted	No disruption	Disrupted

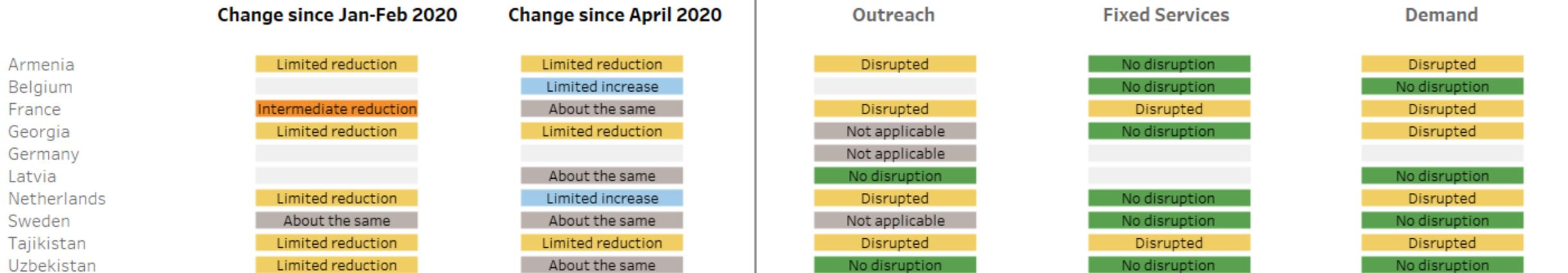
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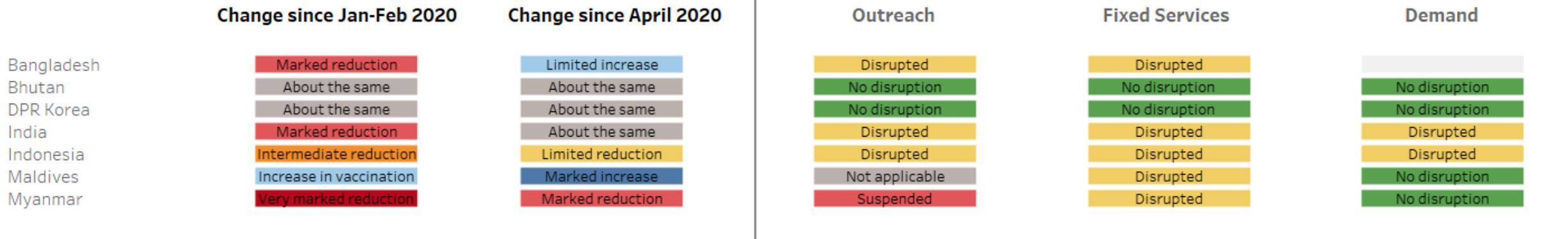
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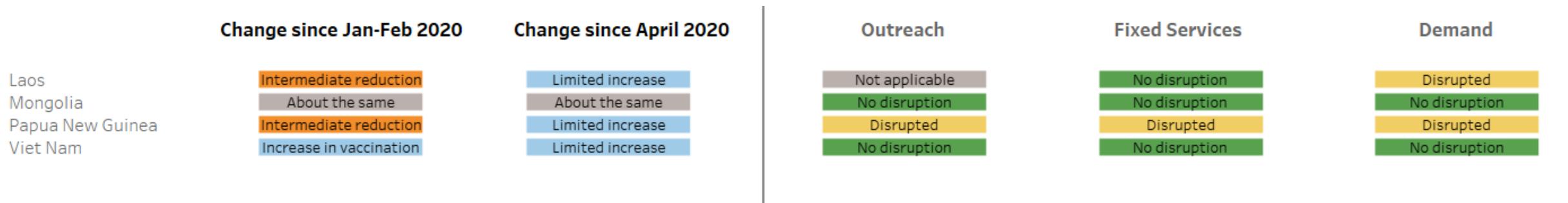
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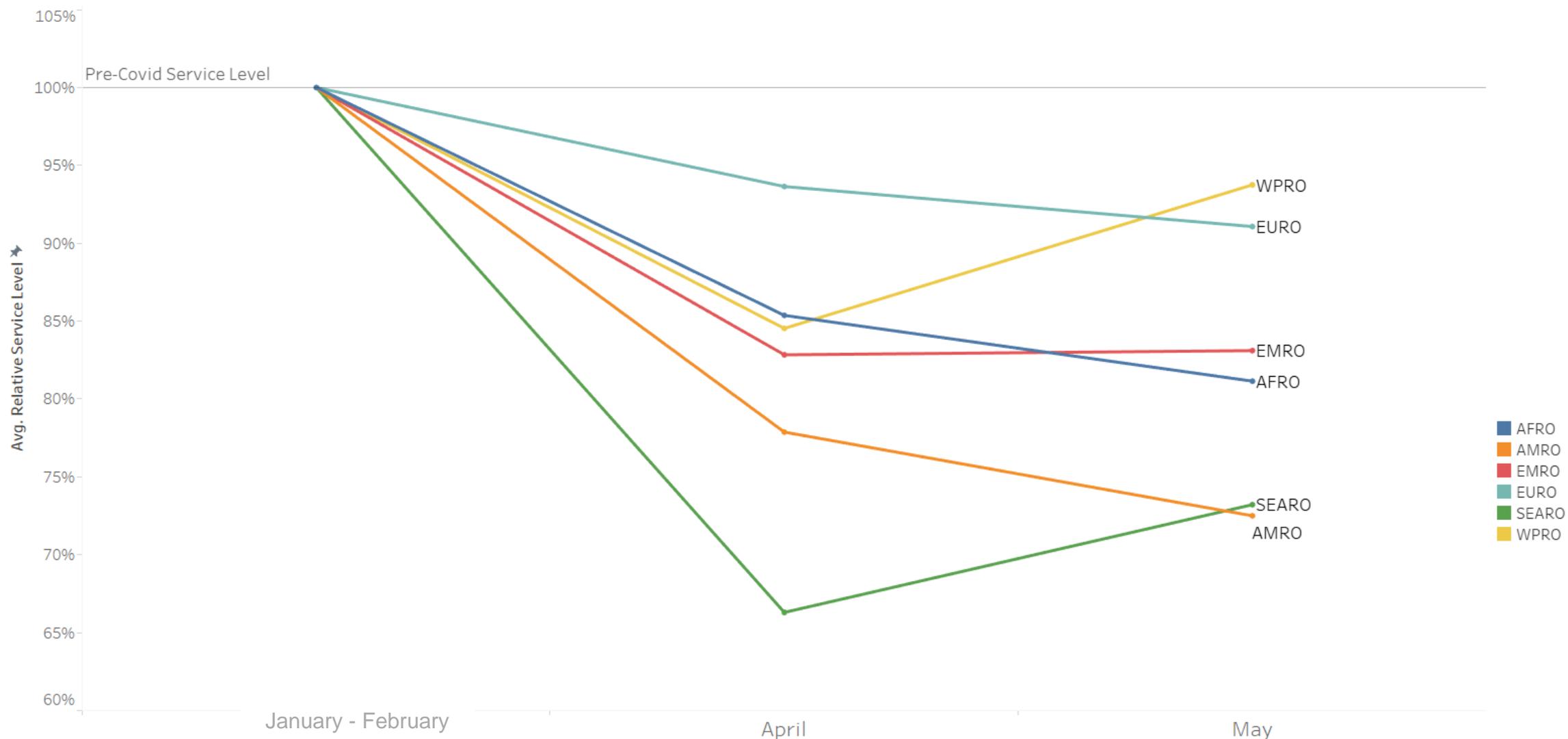


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# Perceived vaccination service levels vs January-February 2020

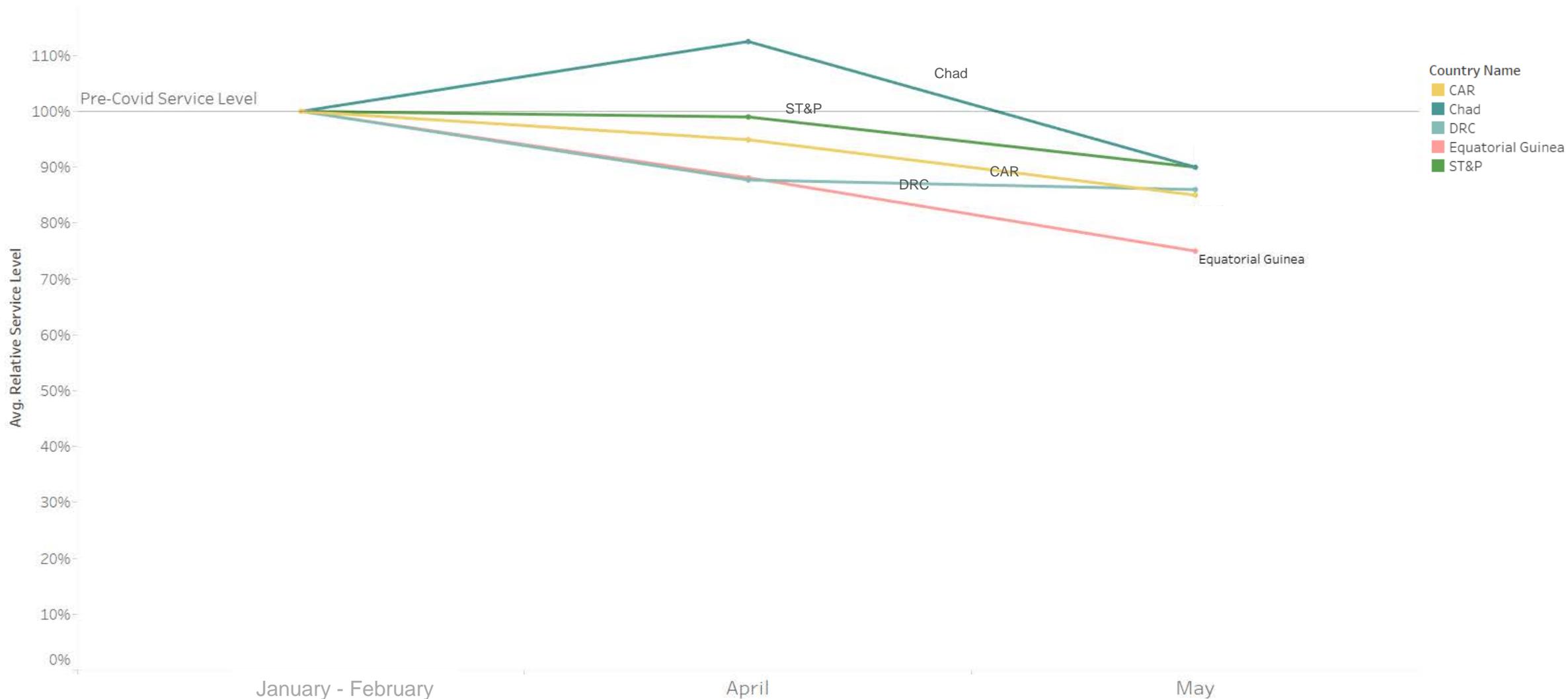
## Regional comparison



Source: Immunization Pulse Poll 2. Questions 16 & 17, National respondents only. Analysis shows average response of all national level respondents within a particular region. The data collected are subject to limitations inherent to voluntary self-reporting, self-selection bias, not all countries responded, countries with only one response vis-à-vis countries with many, possibility of fraudulent responses and not having a sampling frame to make inferences. Furthermore, the information about each country does not represent official reporting from Member States to WHO or UNICEF. Thus, the results presented here need to be interpreted with caution and do not represent in any way a WHO or UNICEF position regarding any country or territory for which one or more replies were received.

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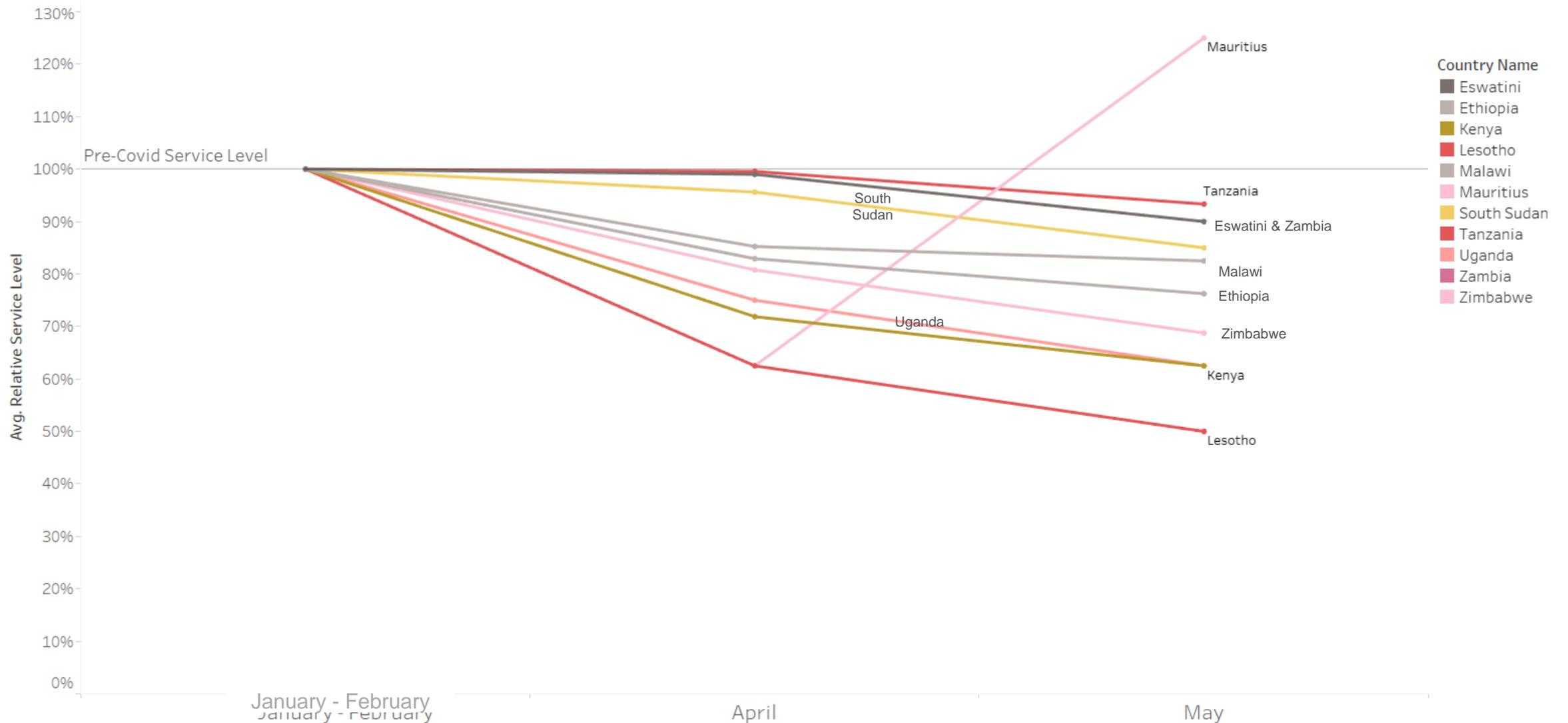
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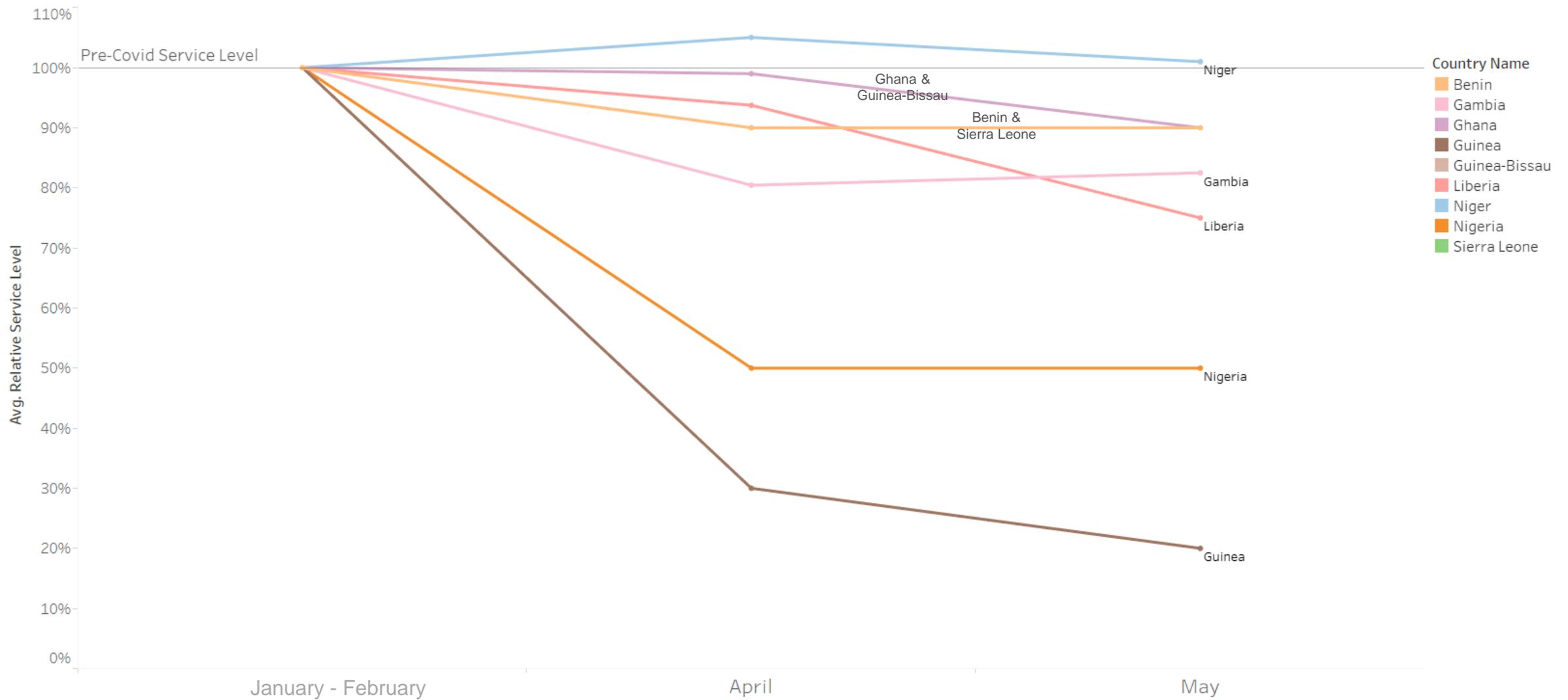
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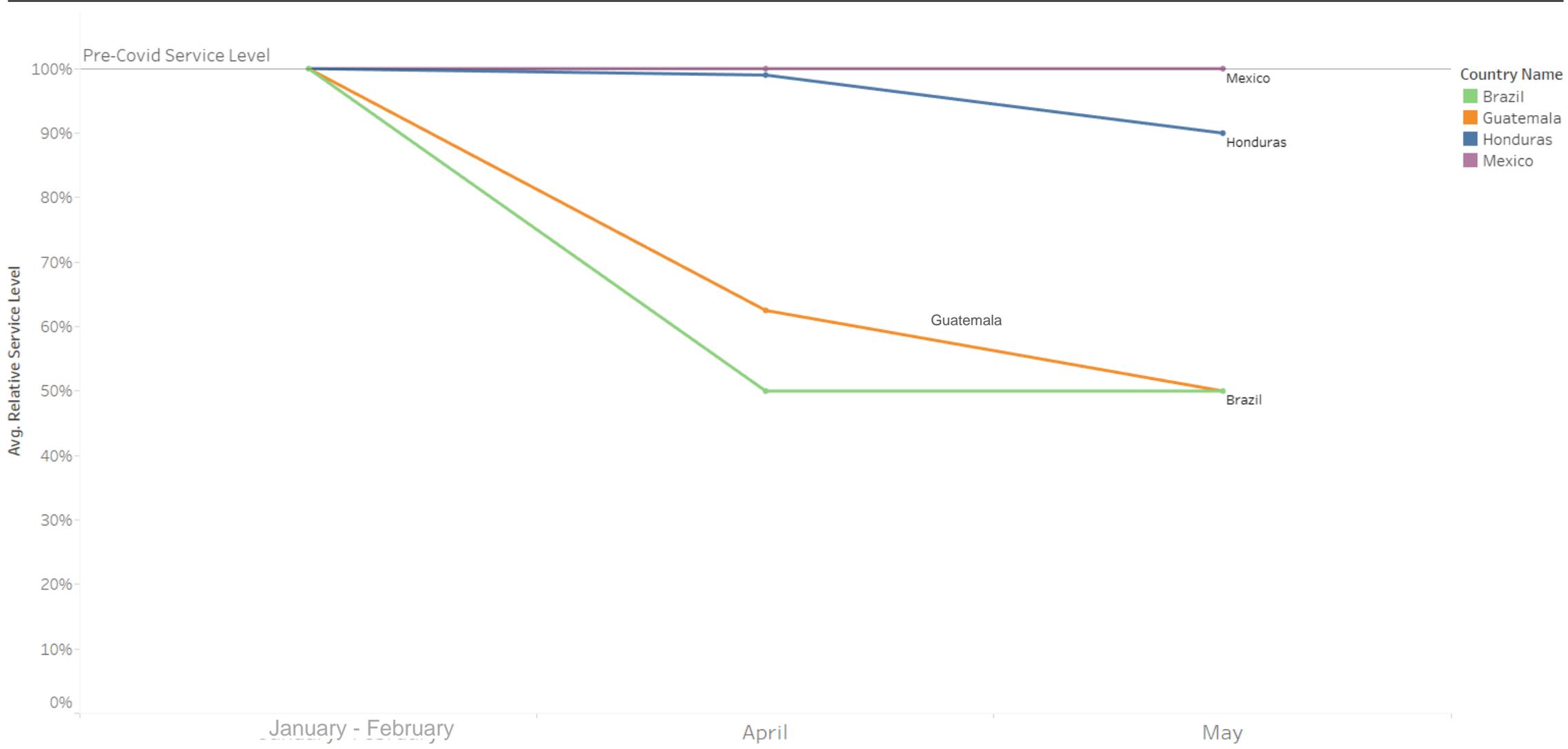
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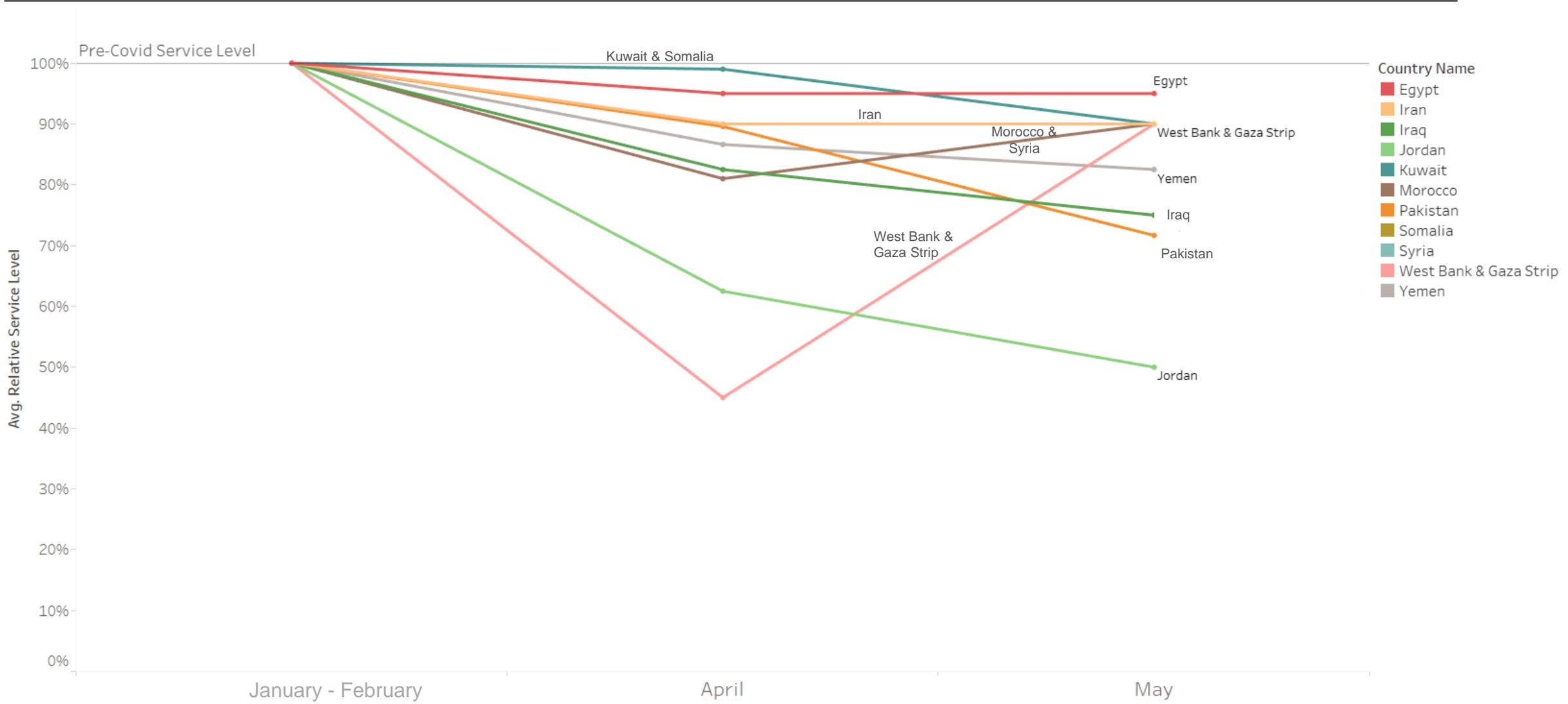
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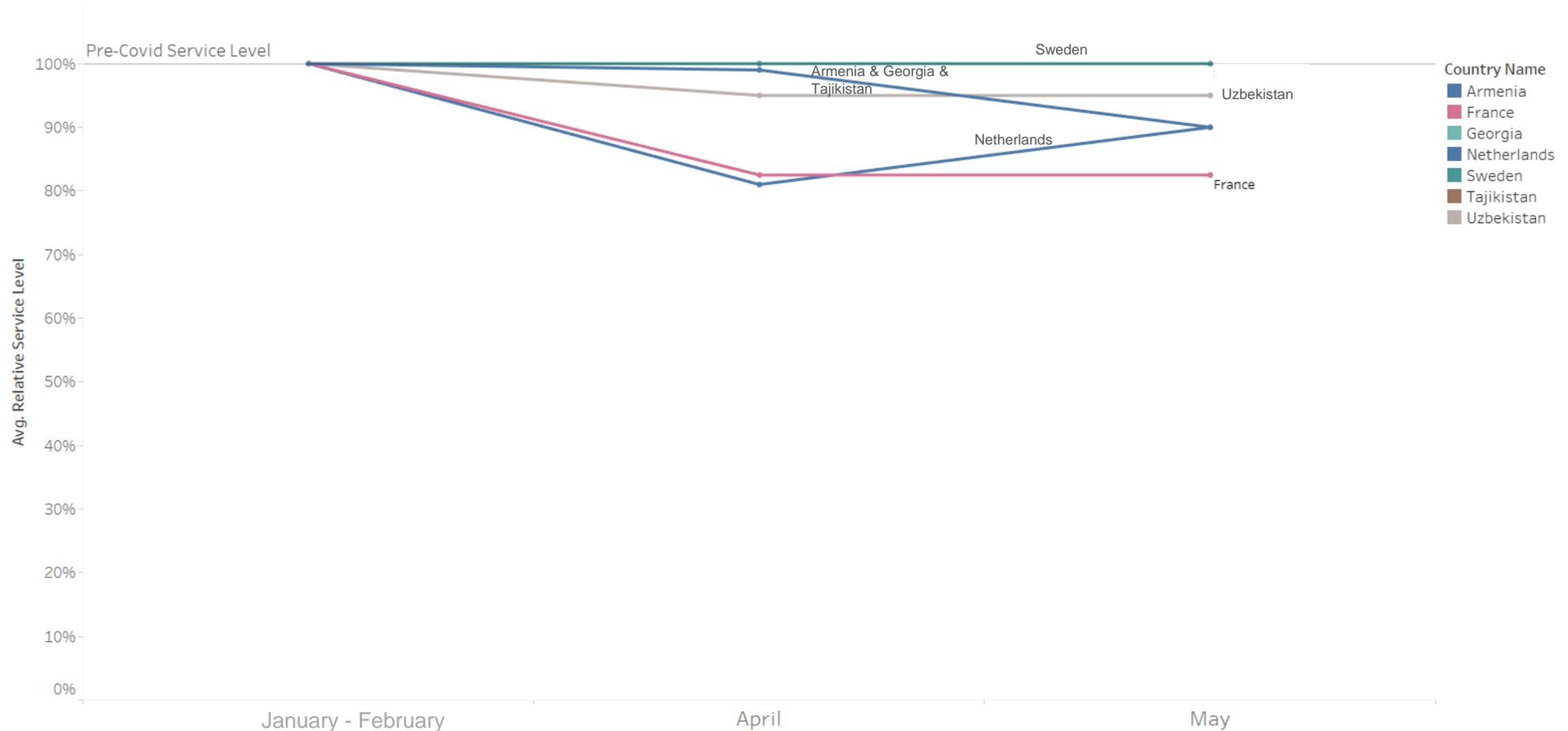
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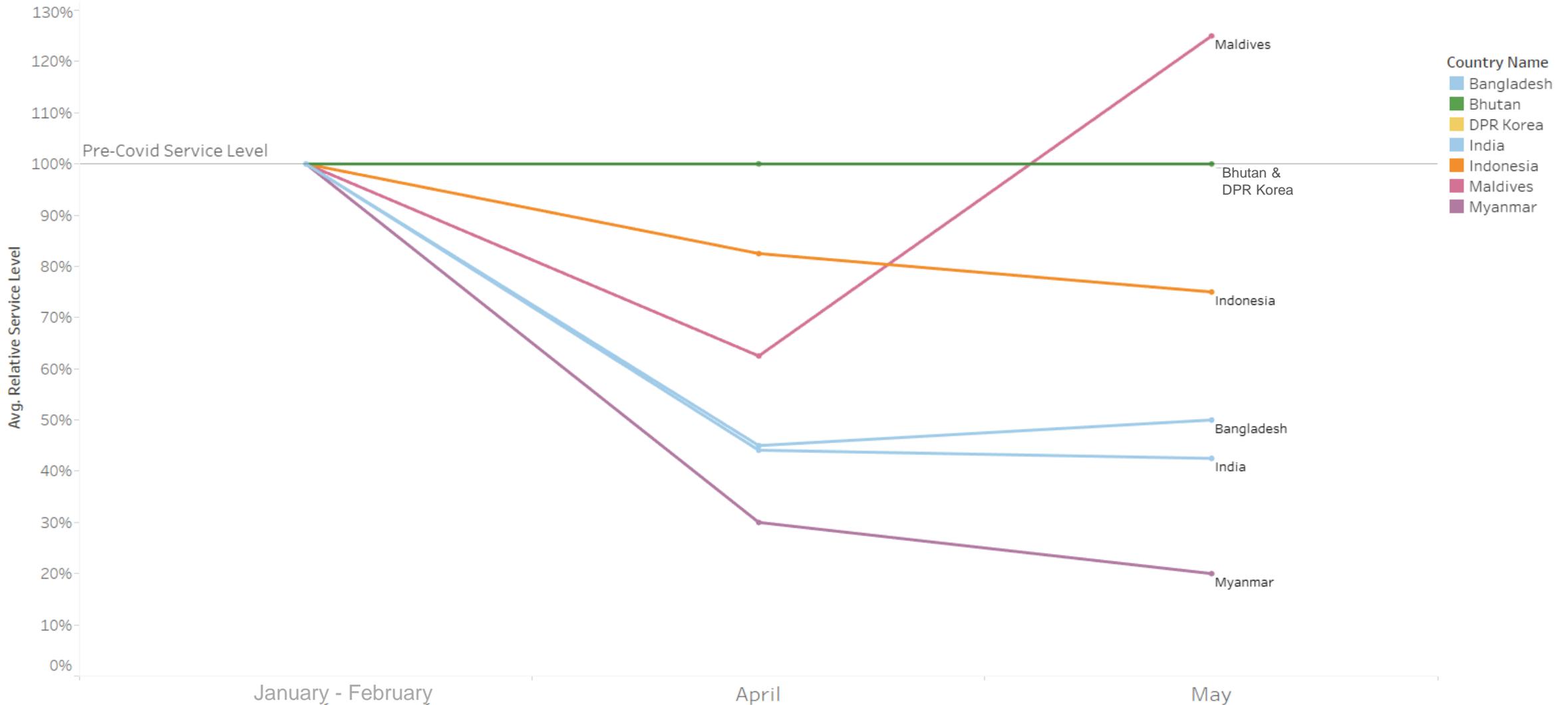


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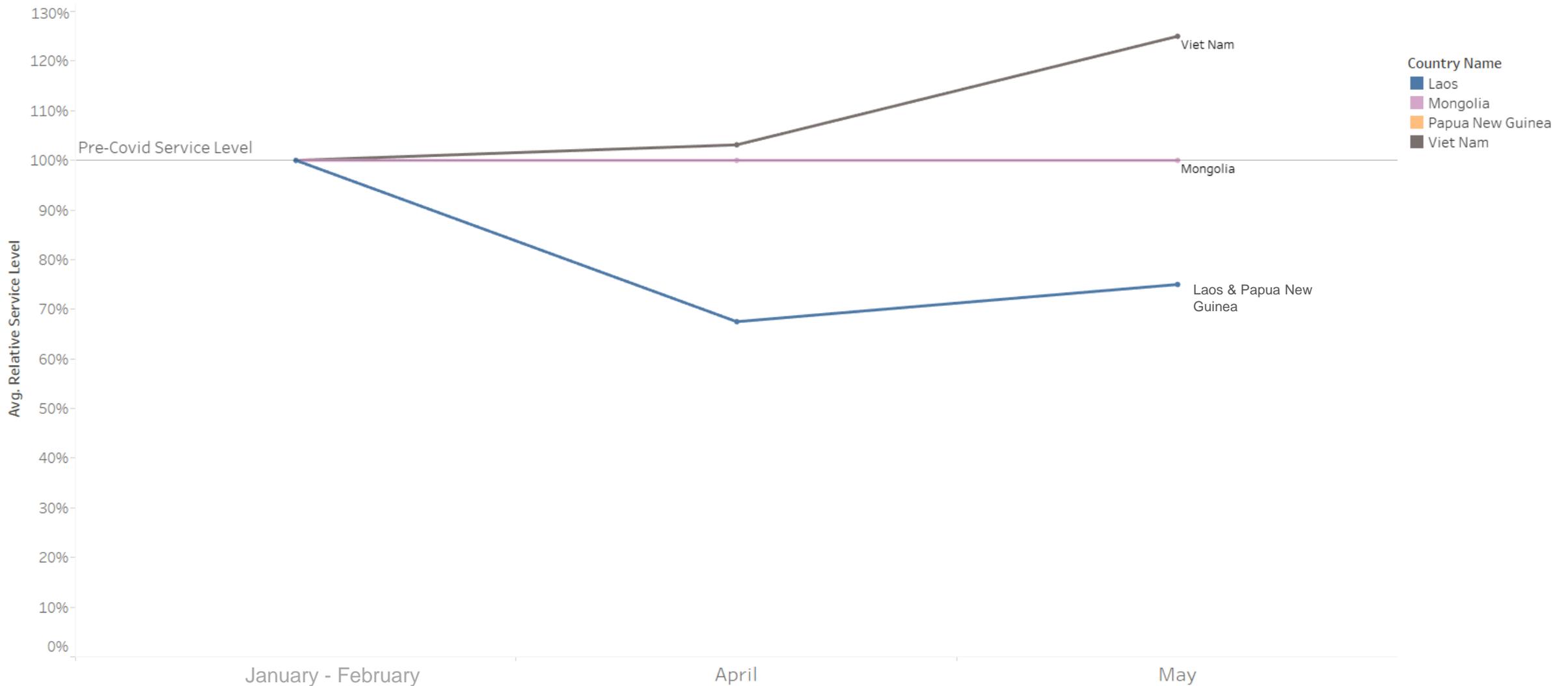
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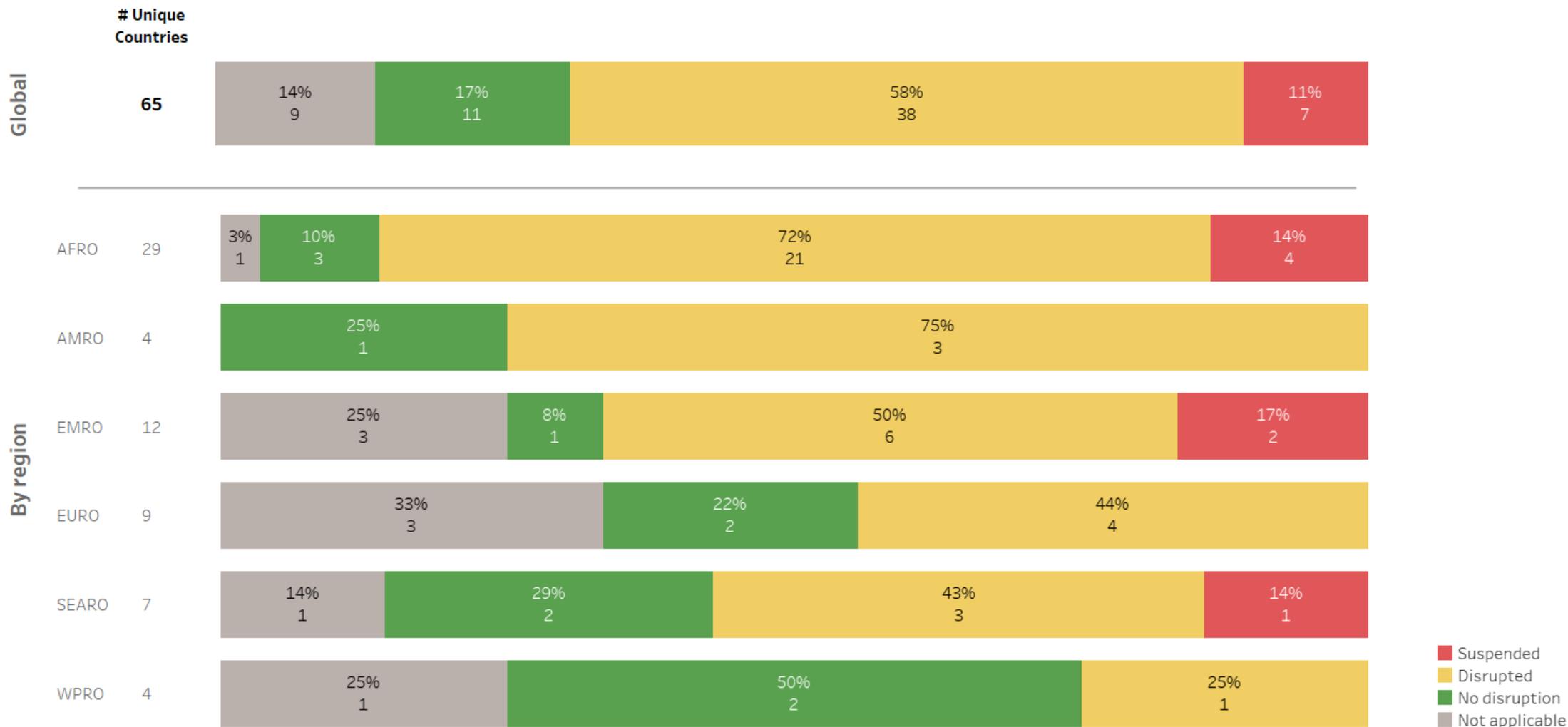


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# Outreach Disruption: Global

## Reported level of disruption to outreach vaccination activities in May 2020 as a result of COVID-19

Percentage of countries reporting a given level of disruption. Includes national level respondents only, once 'Other' and 'Do not know' responses have been excluded.

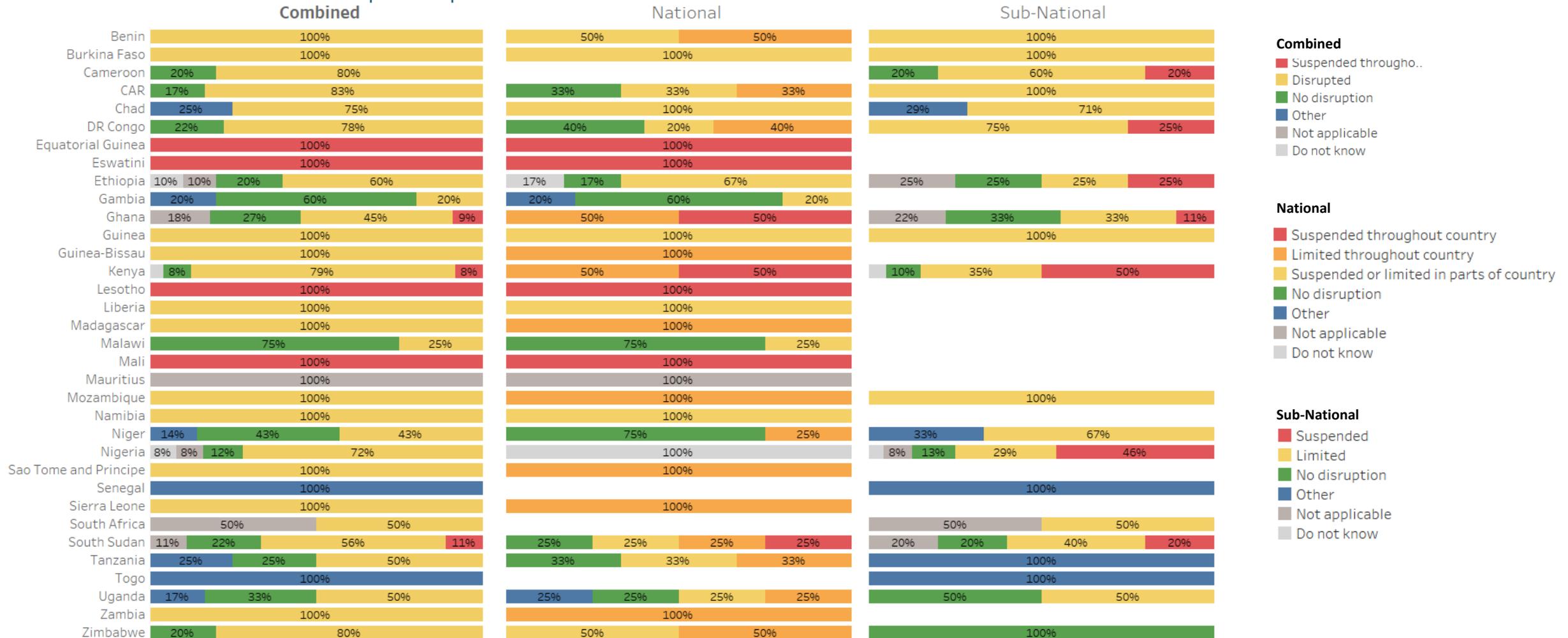


Source: Immunization Pulse Poll 2, Question 5. Displayed percentages are of the calculated single status for disruption level in a country based on the majority response from that country. The data collected are subject to limitations inherent to voluntary self-reporting, self-selection bias, not all countries responded, countries with only one response vis-à-vis countries with many, possibility of fraudulent responses and not having a sampling frame to make inferences. Furthermore, the information about each country does not represent official reporting from Member States to WHO or UNICEF. Thus, the results presented here need to be interpreted with caution and do not represent in any way a WHO or UNICEF position regarding any country or territory for which one or more replies were received.

# Outreach Disruption: Country level

## Reported level of disruption to outreach vaccination activities in May 2020 as a result of COVID-19

For combined view, sub-national responses of 'Suspended' or 'Limited' were combined with national responses of 'Disrupted'. 'No disruption' sub-national responses were combined with national 'No disruption' responses.



Source: Immunization Pulse Poll 2, Questions 5 & 6

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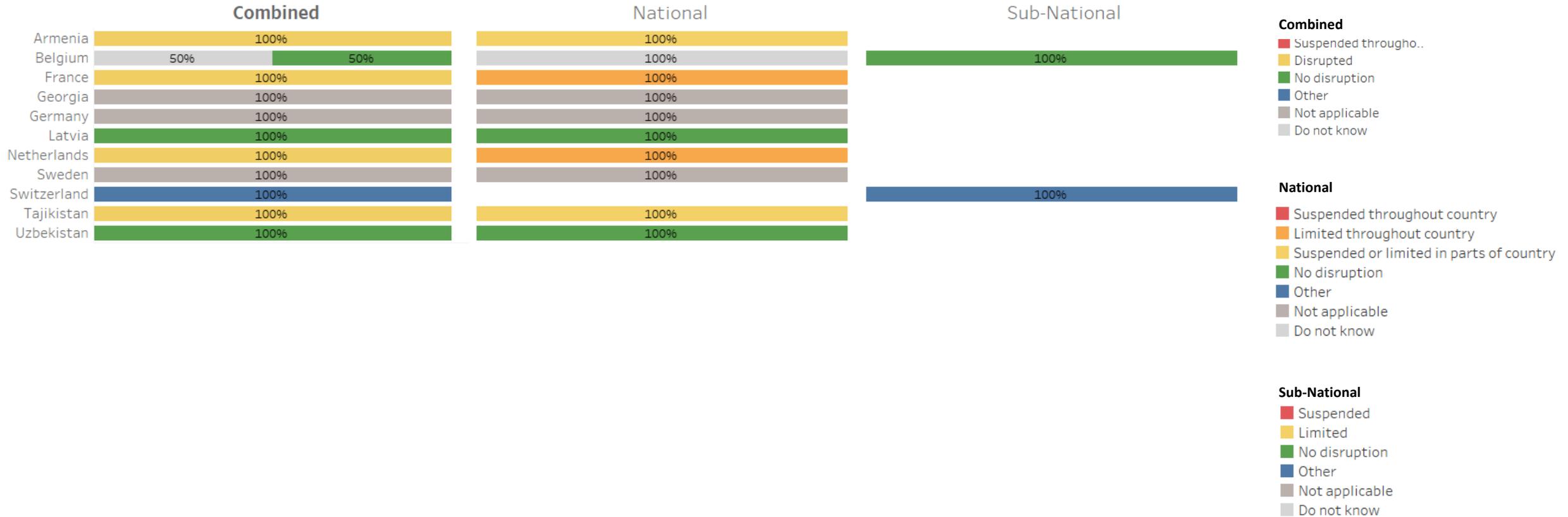
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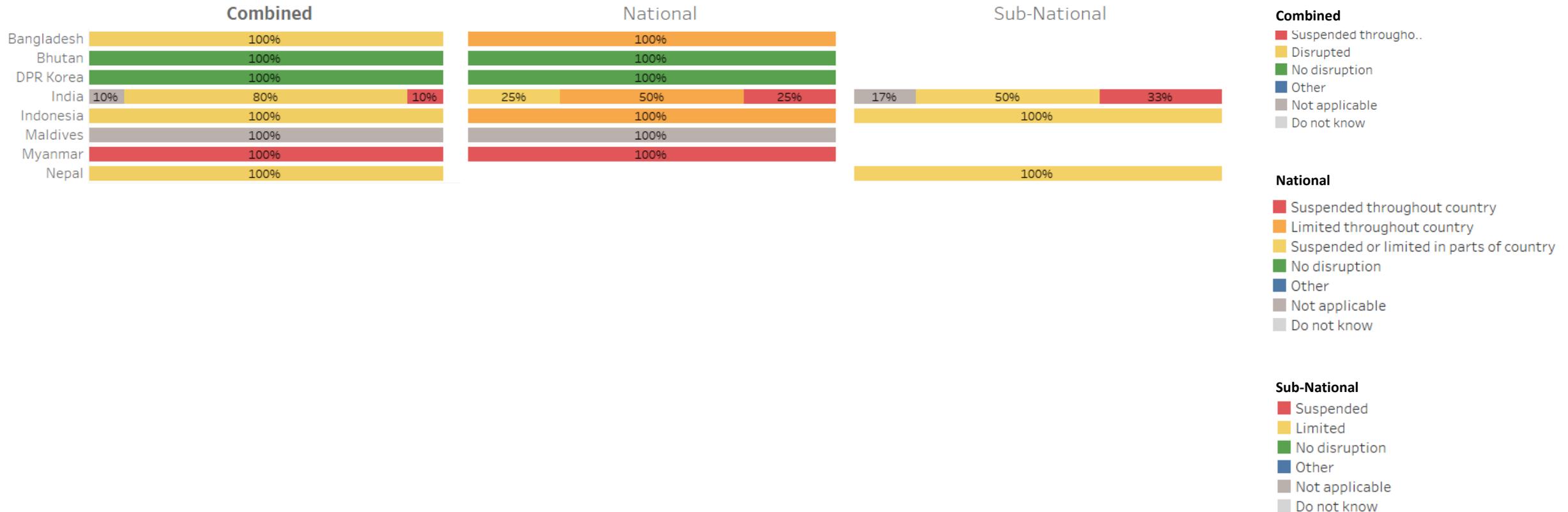
Source: Immunization Pulse Poll 2, Questions 5 & 6

The data collected are subject to limitations inherent to voluntary self-reporting, self-selection bias, not all countries responded, countries with only one response vis-à-vis countries with many, possibility of fraudulent responses and not having a sampling frame to make inferences. Furthermore, the information about each country does not represent official reporting from Member States to WHO or UNICEF. Thus, the results presented here need to be interpreted with caution and do not represent in any way a WHO or UNICEF position regarding any country or territory for which one or more replies were received.

# Outreach Disruption: Country level

## Reported level of disruption to outreach vaccination activities in May 2020 as a result of COVID-19

For combined view, sub-national responses of 'Suspended' or 'Limited' were combined with national responses of 'Disrupted'. 'No disruption' sub-national responses were combined with national 'No disruption' responses.



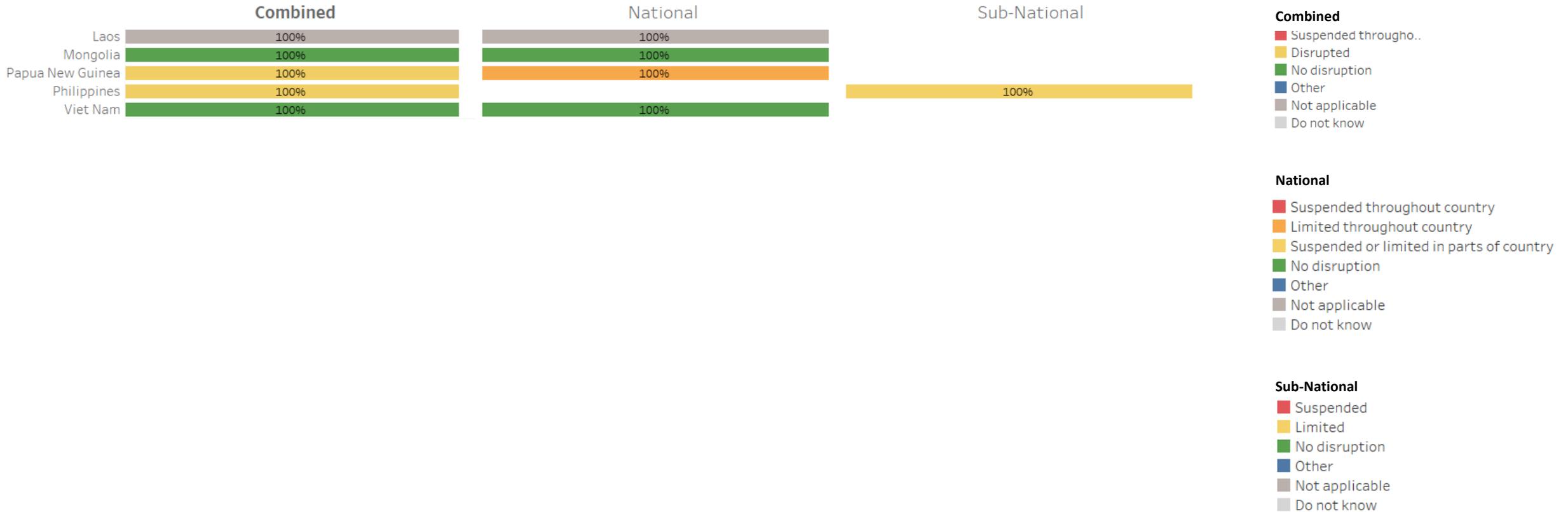
Source: Immunization Pulse Poll 2, Questions 5 & 6

The data collected are subject to limitations inherent to voluntary self-reporting, self-selection bias, not all countries responded, countries with only one response vis-à-vis countries with many, possibility of fraudulent responses and not having a sampling frame to make inferences. Furthermore, the information about each country does not represent official reporting from Member States to WHO or UNICEF. Thus, the results presented here need to be interpreted with caution and do not represent in any way a WHO or UNICEF position regarding any country or territory for which one or more replies were received.

# Outreach Disruption: Country level

## Reported level of disruption to outreach vaccination activities in May 2020 as a result of COVID-19

For combined view, sub-national responses of 'Suspended' or 'Limited' were combined with national responses of 'Disrupted'. 'No disruption' sub-national responses were combined with national 'No disruption' responses.



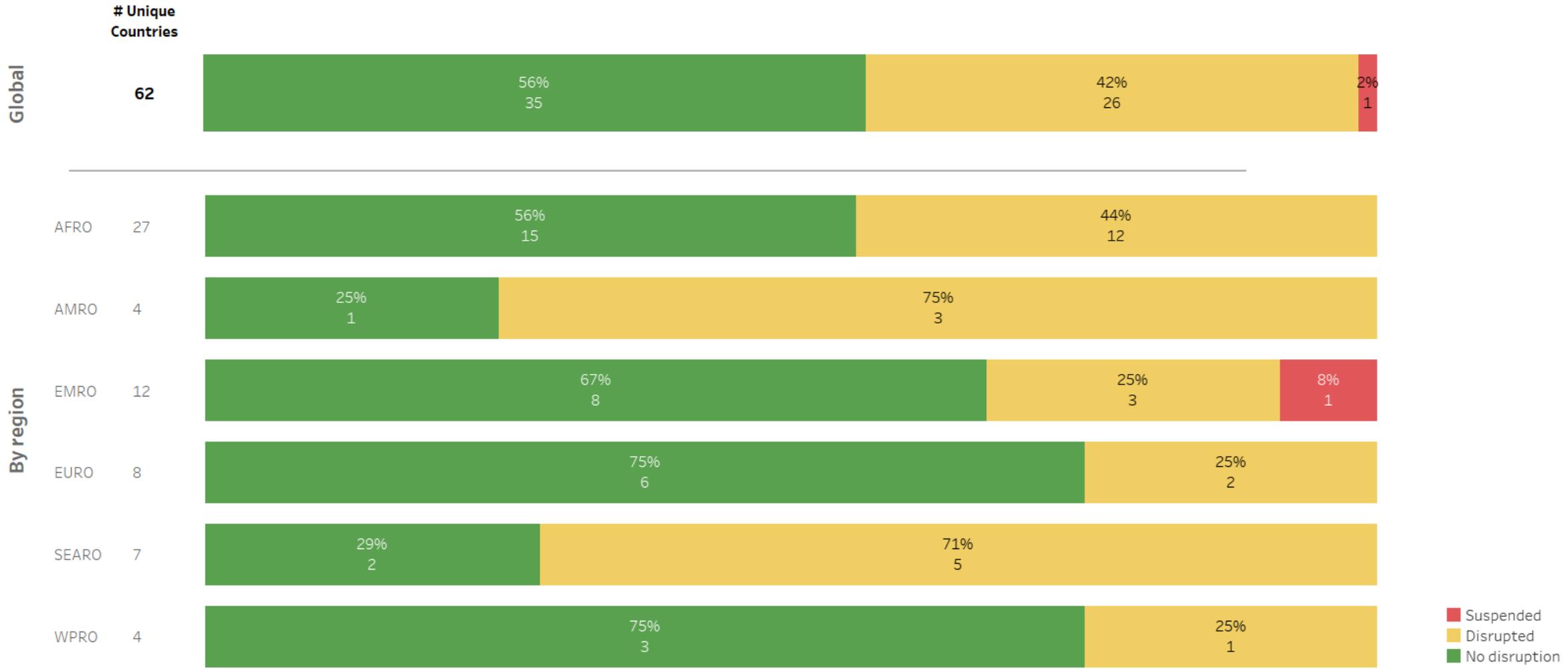
Source: Immunization Pulse Poll 2, Questions 5 & 6

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# Fixed Post Disruption: Global

## Reported level of disruption to fixed post vaccination activities in May 2020 as a result of COVID-19

Percentage of countries reporting a given level of disruption. Includes national level respondents only, once 'Other' and 'Do not know' responses have been excluded.



Source: Immunization Pulse Poll 2, Question 7. Displayed percentages are of the calculated single status for disruption level in a country based on the majority response from that country. The data collected are subject to limitations inherent to voluntary self-reporting, self-selection bias, not all countries responded, countries with only one response vis-à-vis countries with many, possibility of fraudulent responses and not having a sampling frame to make inferences. Furthermore, the information about each country does not represent official reporting from Member States to WHO or UNICEF. Thus, the results presented here need to be interpreted with caution and do not represent in any way a WHO or UNICEF position regarding any country or territory for which one or more replies were received.

# Fixed Post Disruption: Country level

Reported level of disruption to fixed post vaccination activities in May 2020 as a result of COVID-19

For combined view, sub-national responses of 'Suspended' or 'Limited' were combined with national responses of 'Disrupted'. 'No disruption' sub-national responses were combined with national 'No disruption' responses.



Source: Immunization Pulse Poll 2, Questions 7 & 8

The data collected are subject to limitations inherent to voluntary self-reporting, self-selection bias, not all countries responded, countries with only one response vis-à-vis countries with many, possibility of fraudulent responses and not having a sampling frame to make inferences. Furthermore, the information about each country does not represent official reporting from Member States to WHO or UNICEF. Thus, the results presented here need to be interpreted with caution and do not represent in any way a WHO or UNICEF position regarding any country or territory for which one or more replies were received.

# Fixed Post Disruption: Country level

## Reported level of disruption to fixed post vaccination activities in May 2020 as a result of COVID-19

For combined view, sub-national responses of 'Suspended' or 'Limited' were combined with national responses of 'Disrupted'. 'No disruption' sub-national responses were combined with national 'No disruption' responses.



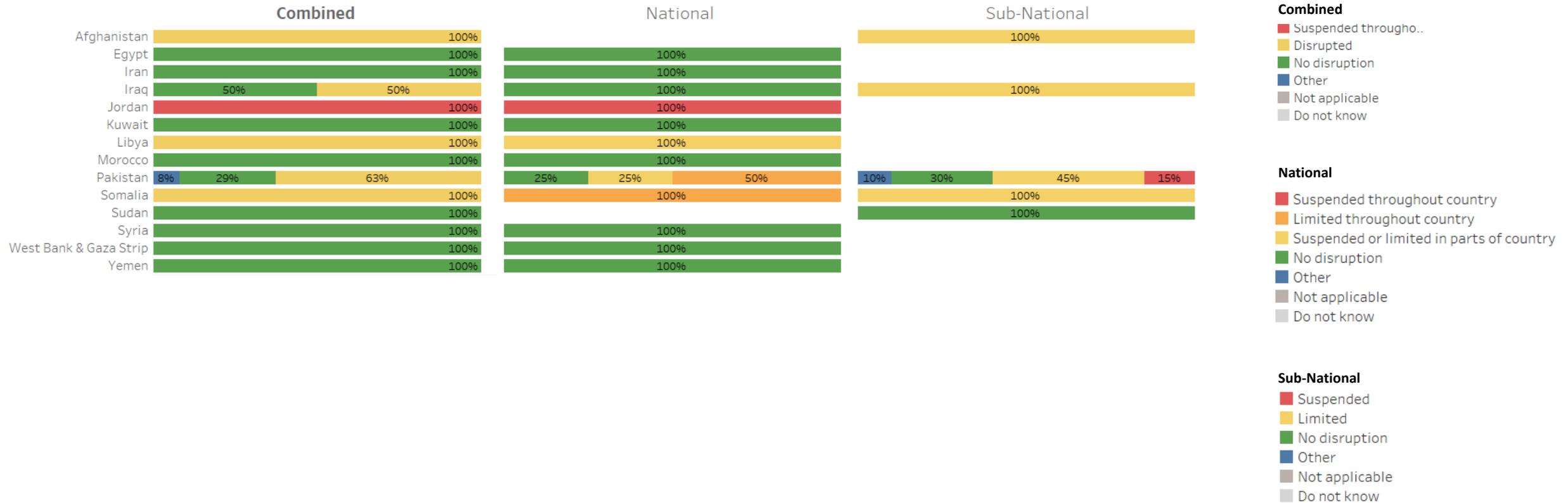
Source: Immunization Pulse Poll 2, Questions 7 & 8

The data collected are subject to limitations inherent to voluntary self-reporting, self-selection bias, not all countries responded, countries with only one response vis-à-vis countries with many, possibility of fraudulent responses and not having a sampling frame to make inferences. Furthermore, the information about each country does not represent official reporting from Member States to WHO or UNICEF. Thus, the results presented here need to be interpreted with caution and do not represent in any way a WHO or UNICEF position regarding any country or territory for which one or more replies were received.

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Source: Immunization Pulse Poll 2, Questions 7 & 8

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## Reported level of disruption to fixed post vaccination activities in May 2020 as a result of COVID-19

For combined view, sub-national responses of 'Suspended' or 'Limited' were combined with national responses of 'Disrupted'. 'No disruption' sub-national responses were combined with national 'No disruption' responses.



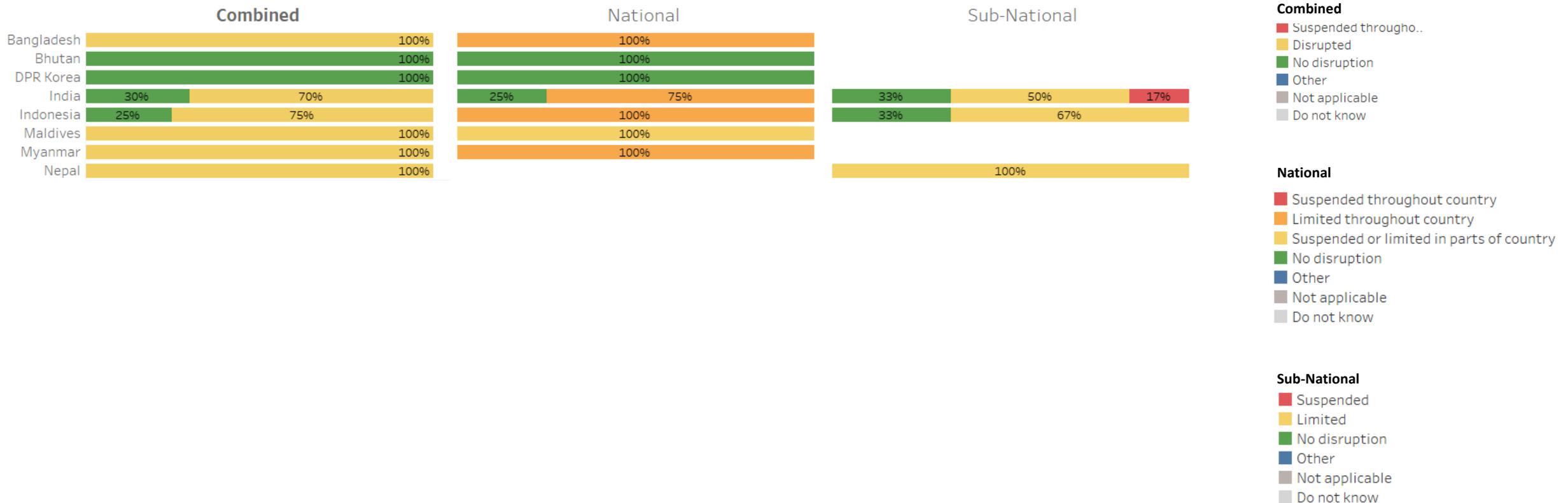
Source: Immunization Pulse Poll 2, Questions 7 & 8

The data collected are subject to limitations inherent to voluntary self-reporting, self-selection bias, not all countries responded, countries with only one response vis-à-vis countries with many, possibility of fraudulent responses and not having a sampling frame to make inferences. Furthermore, the information about each country does not represent official reporting from Member States to WHO or UNICEF. Thus, the results presented here need to be interpreted with caution and do not represent in any way a WHO or UNICEF position regarding any country or territory for which one or more replies were received.

# Fixed Post Disruption: Country level

## Reported level of disruption to fixed post vaccination activities in May 2020 as a result of COVID-19

For combined view, sub-national responses of 'Suspended' or 'Limited' were combined with national responses of 'Disrupted'. 'No disruption' sub-national responses were combined with national 'No disruption' responses.



Source: Immunization Pulse Poll 2, Questions 7 & 8

The data collected are subject to limitations inherent to voluntary self-reporting, self-selection bias, not all countries responded, countries with only one response vis-à-vis countries with many, possibility of fraudulent responses and not having a sampling frame to make inferences. Furthermore, the information about each country does not represent official reporting from Member States to WHO or UNICEF. Thus, the results presented here need to be interpreted with caution and do not represent in any way a WHO or UNICEF position regarding any country or territory for which one or more replies were received.

# Fixed Post Disruption: Country level

## Reported level of disruption to fixed post vaccination activities in May 2020 as a result of COVID-19

For combined view, sub-national responses of 'Suspended' or 'Limited' were combined with national responses of 'Disrupted'. 'No disruption' sub-national responses were combined with national 'No disruption' responses.

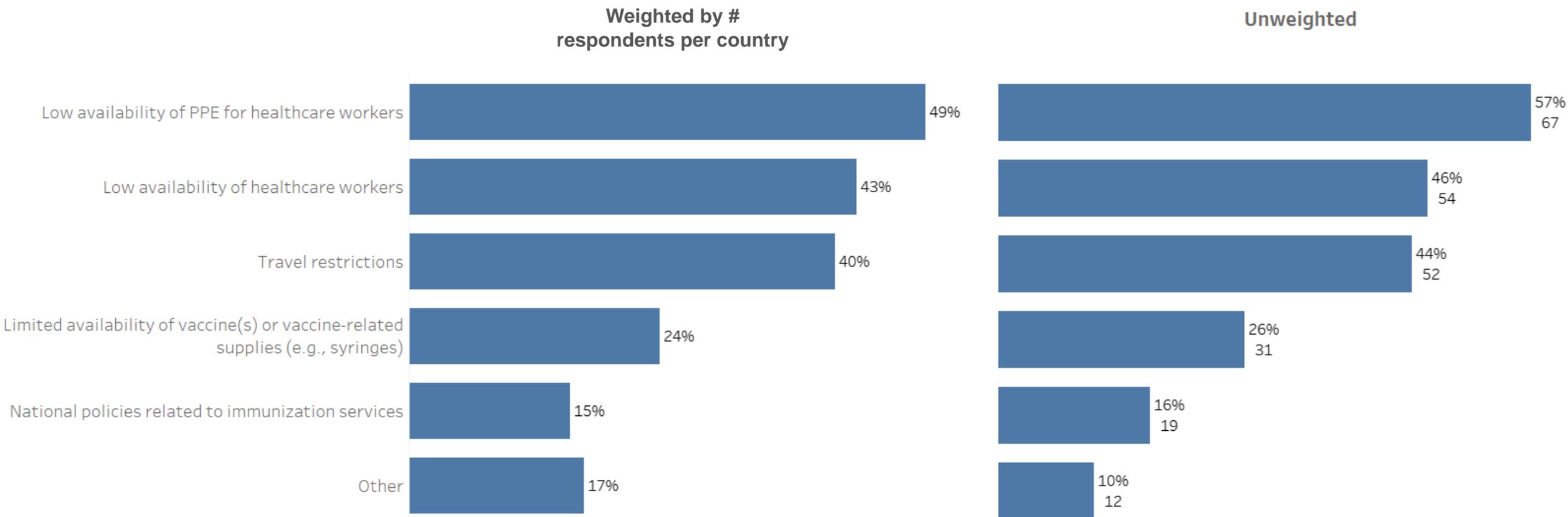


Source: Immunization Pulse Poll 2, Questions 7 & 8

The data collected are subject to limitations inherent to voluntary self-reporting, self-selection bias, not all countries responded, countries with only one response vis-à-vis countries with many, possibility of fraudulent responses and not having a sampling frame to make inferences. Furthermore, the information about each country does not represent official reporting from Member States to WHO or UNICEF. Thus, the results presented here need to be interpreted with caution and do not represent in any way a WHO or UNICEF position regarding any country or territory for which one or more replies were received.

# Reasons for disruption: Global

Reasons reported for disruption to availability of immunization services due to COVID-19 in month of May

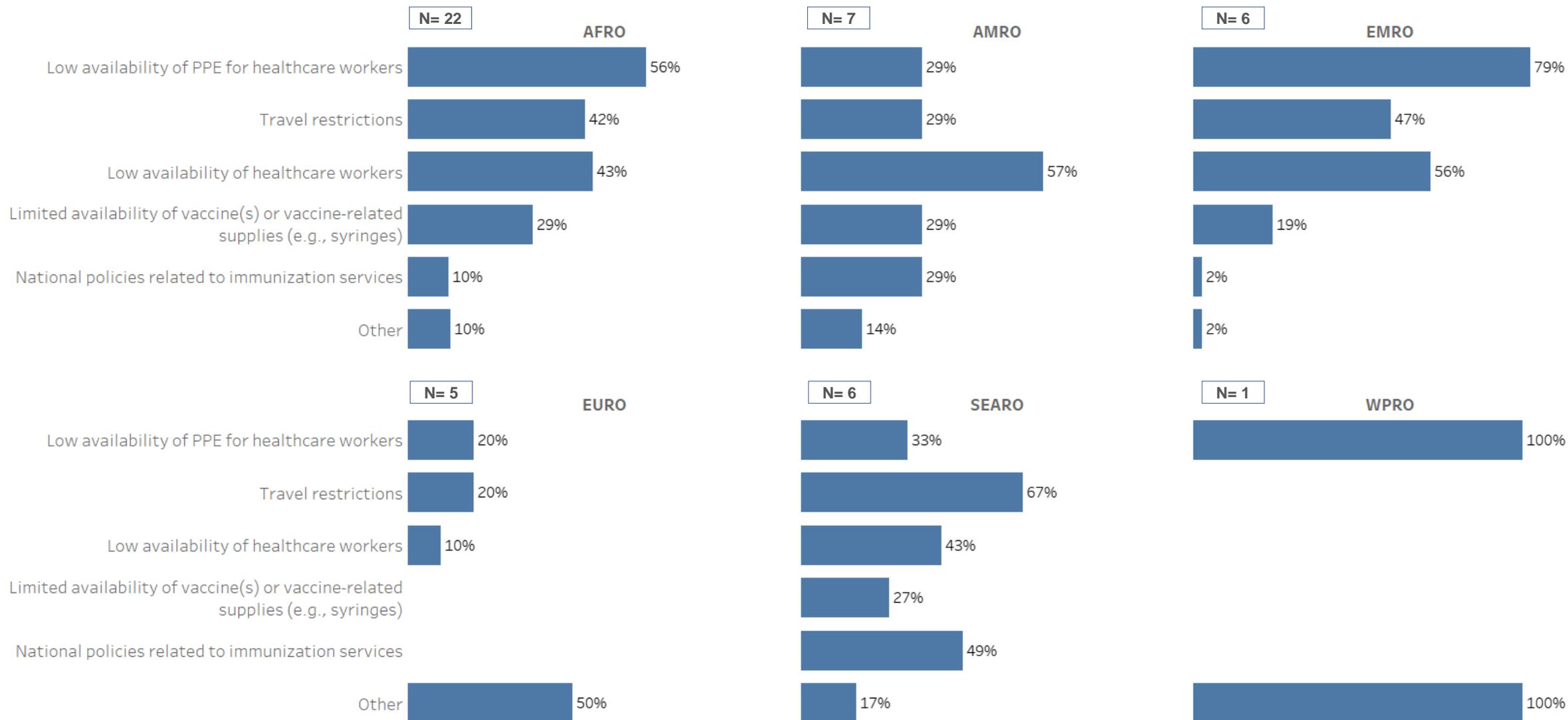


Source: Immunization Pulse Poll 2, Question 9. Includes both national & sub-national respondents. Results weighted by # respondents per country.

The data collected are subject to limitations inherent to voluntary self-reporting, self-selection bias, not all countries responded, countries with only one response vis-à-vis countries with many, possibility of fraudulent responses and not having a sampling frame to make inferences. Furthermore, the information about each country does not represent official reporting from Member States to WHO or UNICEF. Thus, the results presented here need to be interpreted with caution and do not represent in any way a WHO or UNICEF position regarding any country or territory for which one or more replies were received.

# Reasons for disruption: Regional

Reasons reported for disruption to availability of immunization services due to COVID-19 in month of May



Source: Immunization Pulse Poll 2, Question 9. Includes both national & sub-national respondents. Results weighted by # respondents per country. N= number of countries/territories responded  
 The data collected are subject to limitations inherent to voluntary self-reporting, self-selection bias, not all countries responded, countries with only one response vis-à-vis countries with many, possibility of fraudulent responses and not having a sampling frame to make inferences. Furthermore, the information about each country does not represent official reporting from Member States to WHO or UNICEF. Thus, the results presented here need to be interpreted with caution and do not represent in any way a WHO or UNICEF position regarding any country or territory for which one or more replies were received.

# Immunization Pulse Poll 2

Analysis of final data

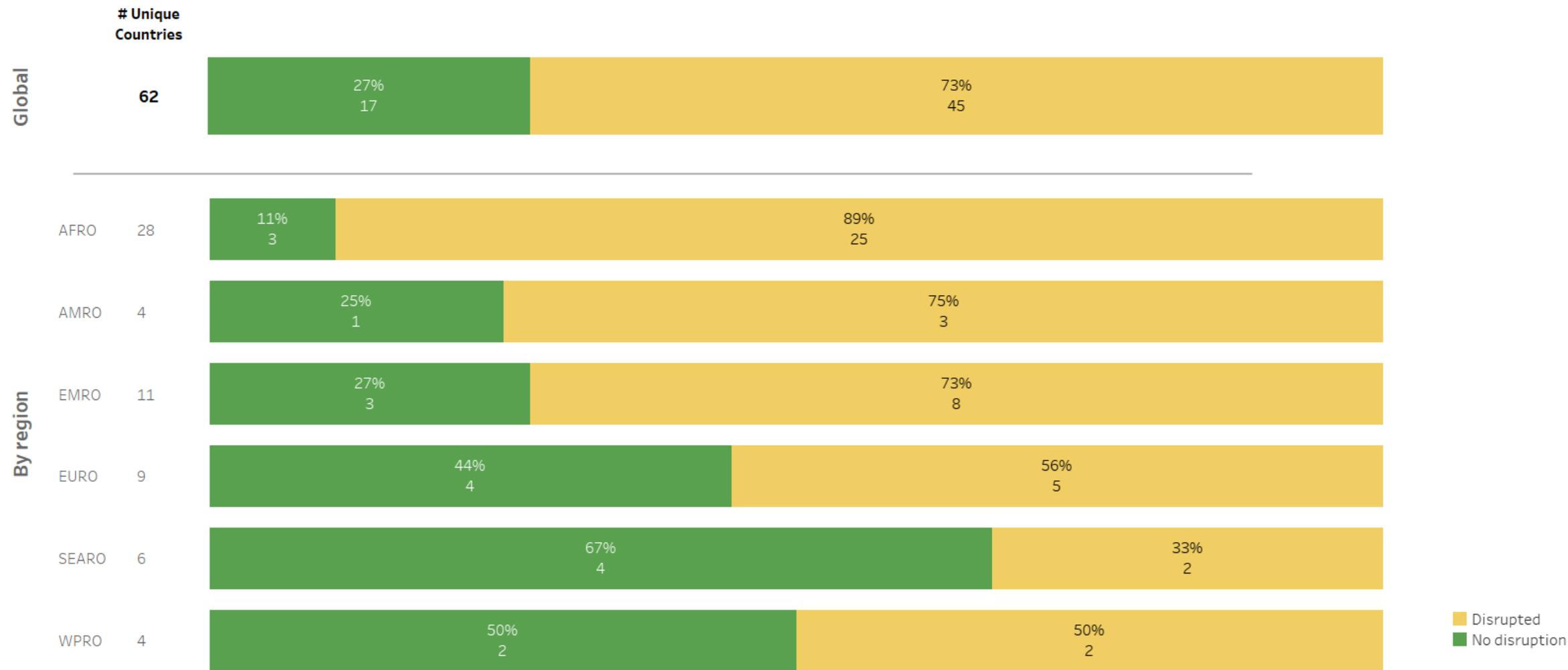
- 1 Respondent numbers & demographics
- 2 Overall status of vaccination services: May 2020
- 3 Status of demand for vaccination services: May 2020**
- 4 Other information provided



# Demand Disruption: Global

## Reported level of disruption to demand for vaccination services in May 2020 as a result of COVID-19

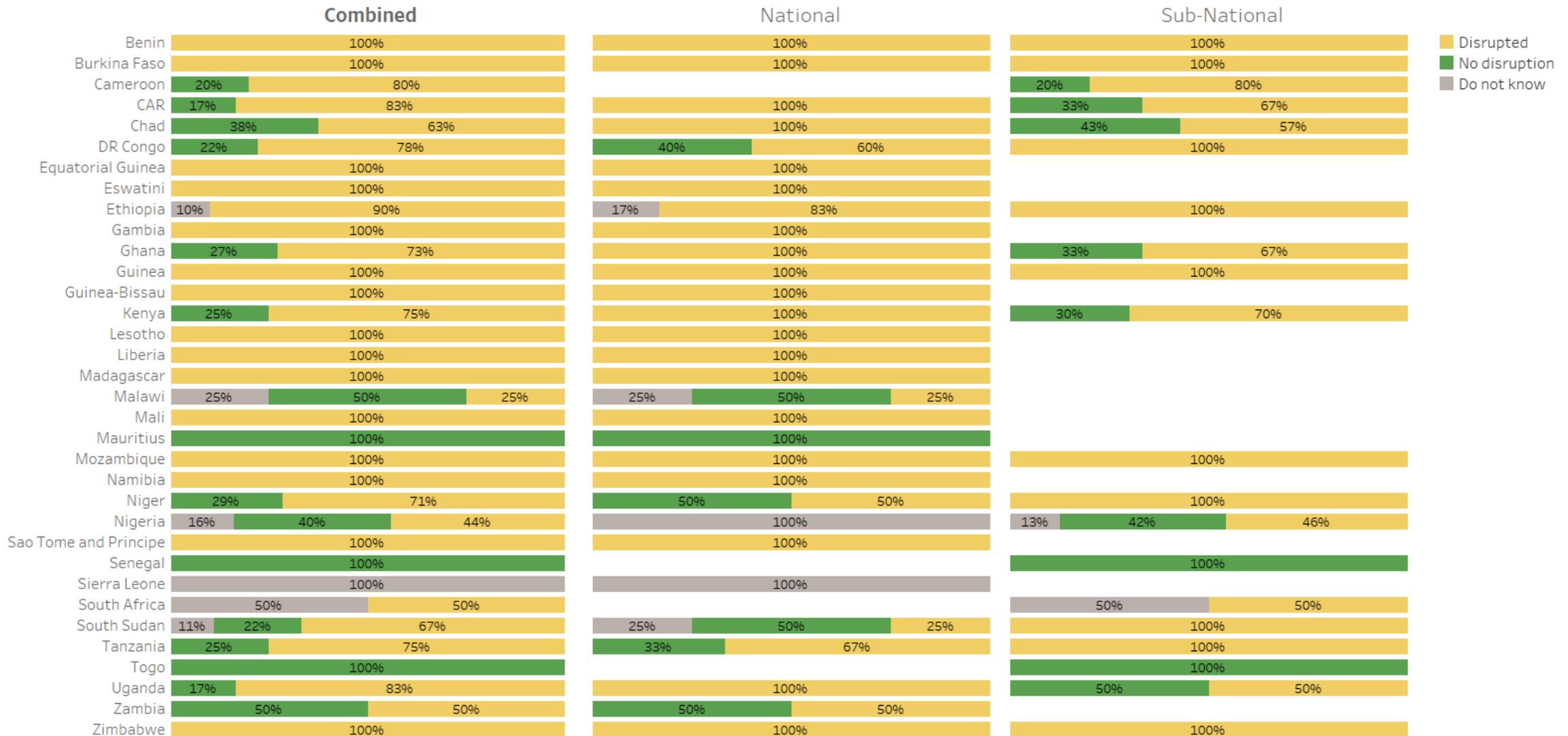
Percentage of countries reporting a given level of disruption. Includes national level respondents only, once 'Other' and 'Do not know' responses have been excluded.



Source: Immunization Pulse Poll 2, Question 10. Displayed percentages are of the calculated single status for disruption level in a country based on the majority response from that country. The data collected are subject to limitations inherent to voluntary self-reporting, self-selection bias, not all countries responded, countries with only one response vis-à-vis countries with many, possibility of fraudulent responses and not having a sampling frame to make inferences. Furthermore, the information about each country does not represent official reporting from Member States to WHO or UNICEF. Thus, the results presented here need to be interpreted with caution and do not represent in any way a WHO or UNICEF position regarding any country or territory for which one or more replies were received.

# Demand Disruption: Country level

Reported level of disruption to demand for vaccination services in May 2020 as a result of COVID-19

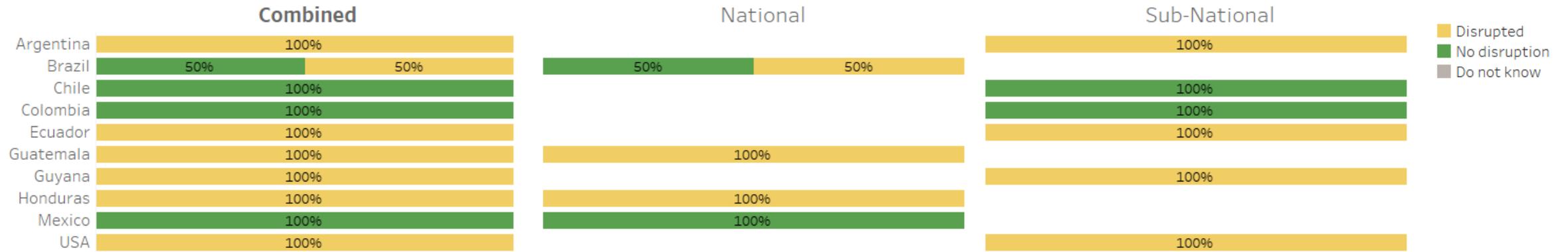


Source: Immunization Pulse Poll 2, Question 10

The data collected are subject to limitations inherent to voluntary self-reporting, self-selection bias, not all countries responded, countries with only one response vis-à-vis countries with many, possibility of fraudulent responses and not having a sampling frame to make inferences. Furthermore, the information about each country does not represent official reporting from Member States to WHO or UNICEF. Thus, the results presented here need to be interpreted with caution and do not represent in any way a WHO or UNICEF position regarding any country or territory for which one or more replies were received.

# Demand Disruption: Country level

Reported level of disruption to demand for vaccination services in May 2020 as a result of COVID-19

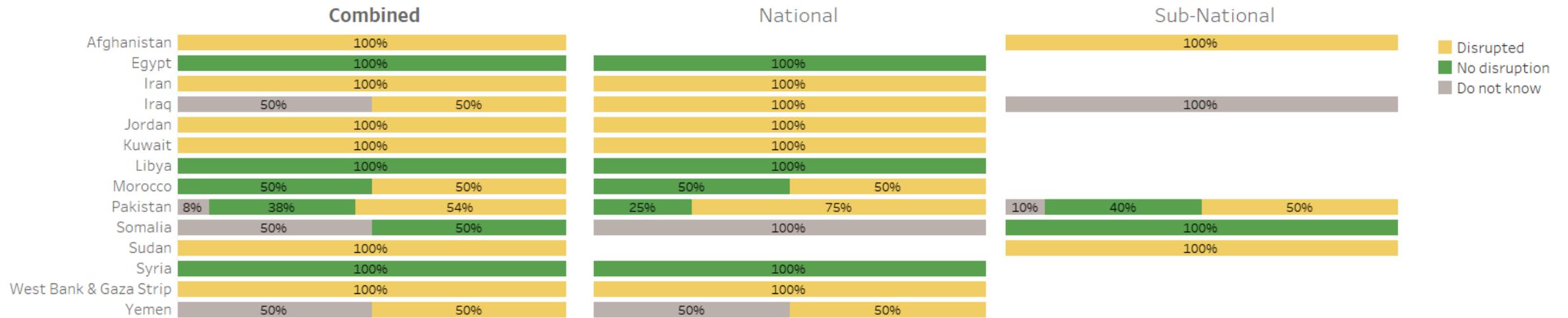


Source: Immunization Pulse Poll 2, Question 10

The data collected are subject to limitations inherent to voluntary self-reporting, self-selection bias, not all countries responded, countries with only one response vis-à-vis countries with many, possibility of fraudulent responses and not having a sampling frame to make inferences. Furthermore, the information about each country does not represent official reporting from Member States to WHO or UNICEF. Thus, the results presented here need to be interpreted with caution and do not represent in any way a WHO or UNICEF position regarding any country or territory for which one or more replies were received.

# Demand Disruption: Country level

Reported level of disruption to demand for vaccination services in May 2020 as a result of COVID-19

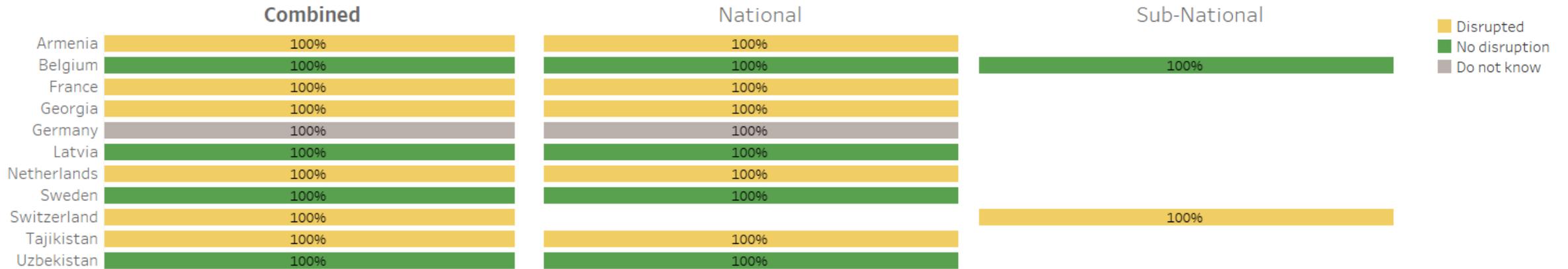


Source: Immunization Pulse Poll 2, Question 10

The data collected are subject to limitations inherent to voluntary self-reporting, self-selection bias, not all countries responded, countries with only one response vis-à-vis countries with many, possibility of fraudulent responses and not having a sampling frame to make inferences. Furthermore, the information about each country does not represent official reporting from Member States to WHO or UNICEF. Thus, the results presented here need to be interpreted with caution and do not represent in any way a WHO or UNICEF position regarding any country or territory for which one or more replies were received.

# Demand Disruption: Country level

Reported level of disruption to demand for vaccination services in May 2020 as a result of COVID-19

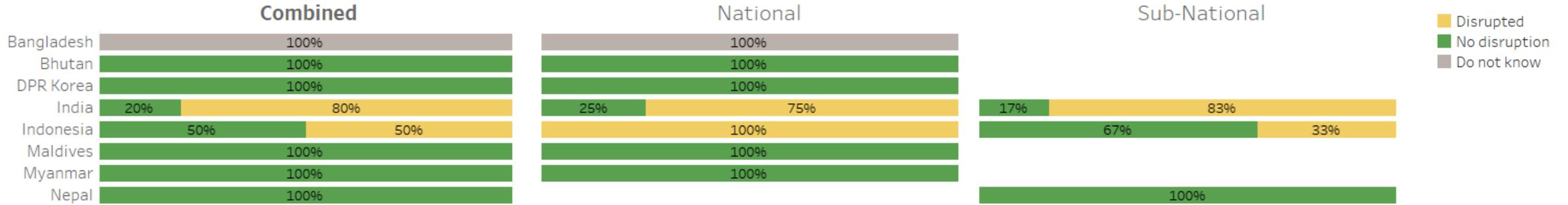


Source: Immunization Pulse Poll 2, Question 10

The data collected are subject to limitations inherent to voluntary self-reporting, self-selection bias, not all countries responded, countries with only one response vis-à-vis countries with many, possibility of fraudulent responses and not having a sampling frame to make inferences. Furthermore, the information about each country does not represent official reporting from Member States to WHO or UNICEF. Thus, the results presented here need to be interpreted with caution and do not represent in any way a WHO or UNICEF position regarding any country or territory for which one or more replies were received.

# Demand Disruption: Country level

Reported level of disruption to demand for vaccination services in May 2020 as a result of COVID-19

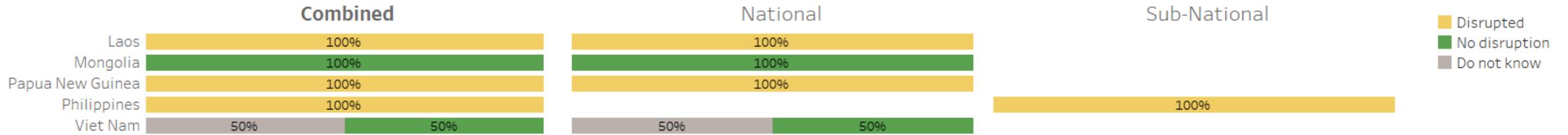


Source: Immunization Pulse Poll 2, Question 10

The data collected are subject to limitations inherent to voluntary self-reporting, self-selection bias, not all countries responded, countries with only one response vis-à-vis countries with many, possibility of fraudulent responses and not having a sampling frame to make inferences. Furthermore, the information about each country does not represent official reporting from Member States to WHO or UNICEF. Thus, the results presented here need to be interpreted with caution and do not represent in any way a WHO or UNICEF position regarding any country or territory for which one or more replies were received.

# Demand Disruption: Country level

Reported level of disruption to demand for vaccination services in May 2020 as a result of COVID-19

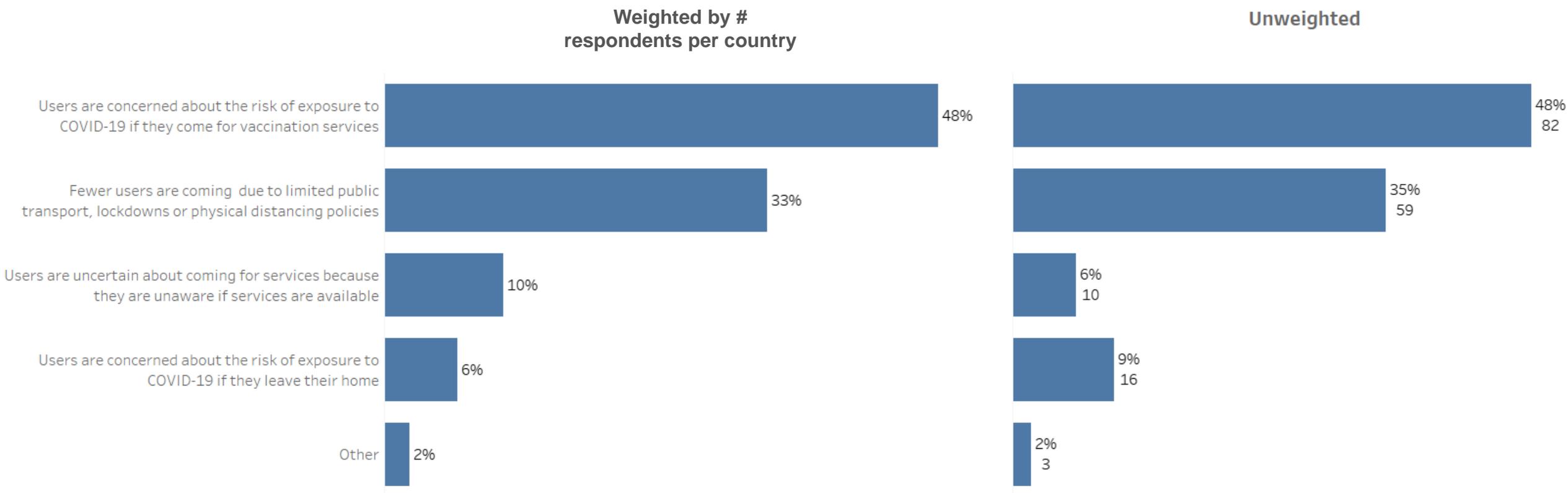


Source: Immunization Pulse Poll 2, Question 10

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# Reasons for demand disruption: Global

Reasons reported for disruption to demand for immunization services due to COVID-19 in month of May

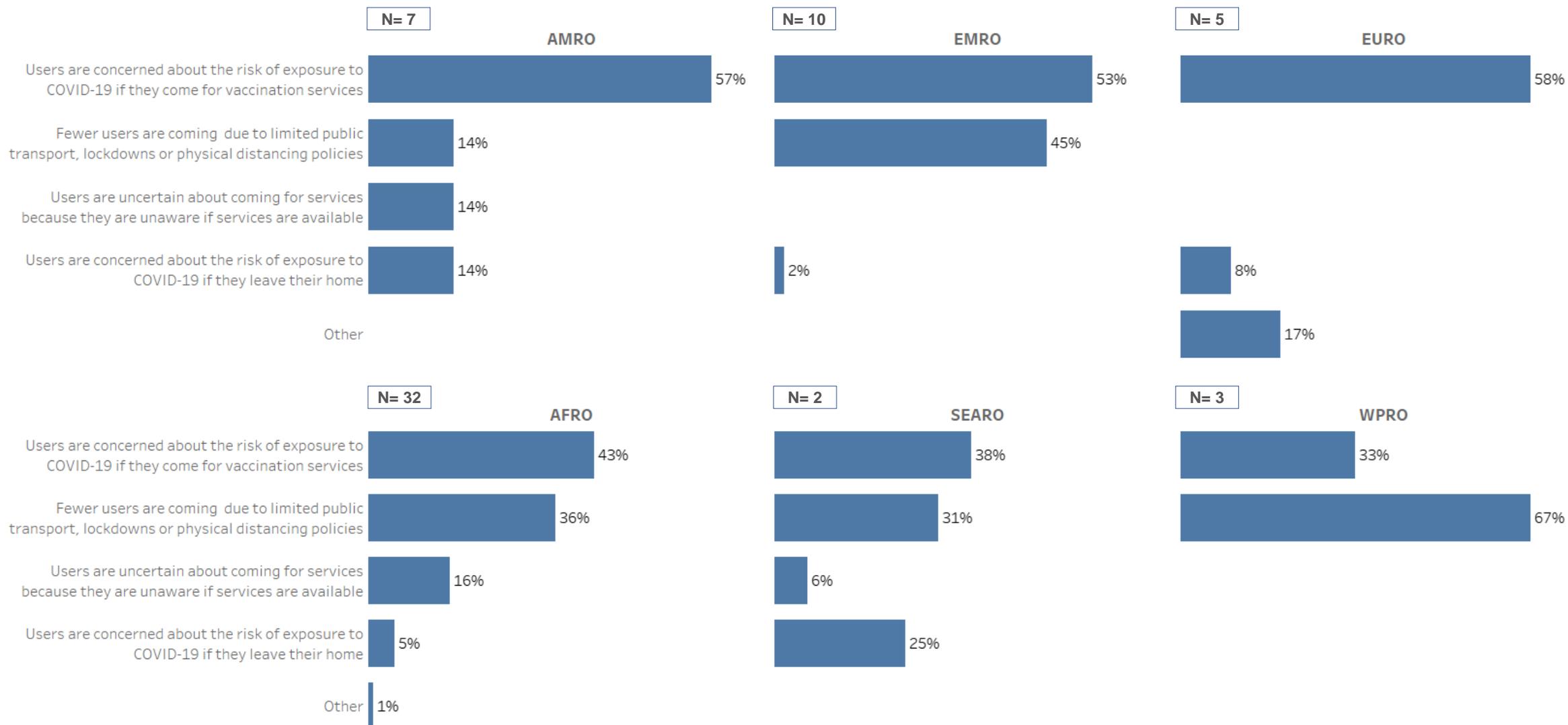


Source: Immunization Pulse Poll 2, Question 11. Includes both national & sub-national respondents. Results weighted by # respondents per country.

The data collected are subject to limitations inherent to voluntary self-reporting, self-selection bias, not all countries responded, countries with only one response vis-à-vis countries with many, possibility of fraudulent responses and not having a sampling frame to make inferences. Furthermore, the information about each country does not represent official reporting from Member States to WHO or UNICEF. Thus, the results presented here need to be interpreted with caution and do not represent in any way a WHO or UNICEF position regarding any country or territory for which one or more replies were received.

# Reasons for demand disruption: Regional

Reasons reported for disruption to demand for immunization services due to COVID-19 in month of May



Source: Immunization Pulse Poll 2, Question 11. Includes both national & sub-national respondents. Results weighted by # respondents per country. N = number of countries/territories responded  
 The data collected are subject to limitations inherent to voluntary self-reporting, self-selection bias, not all countries responded, countries with only one response vis-à-vis countries with many, possibility of fraudulent responses and not having a sampling frame to make inferences. Furthermore, the information about each country does not represent official reporting from Member States to WHO or UNICEF. Thus, the results presented here need to be interpreted with caution and do not represent in any way a WHO or UNICEF position regarding any country or territory for which one or more replies were received.

# Demand plans

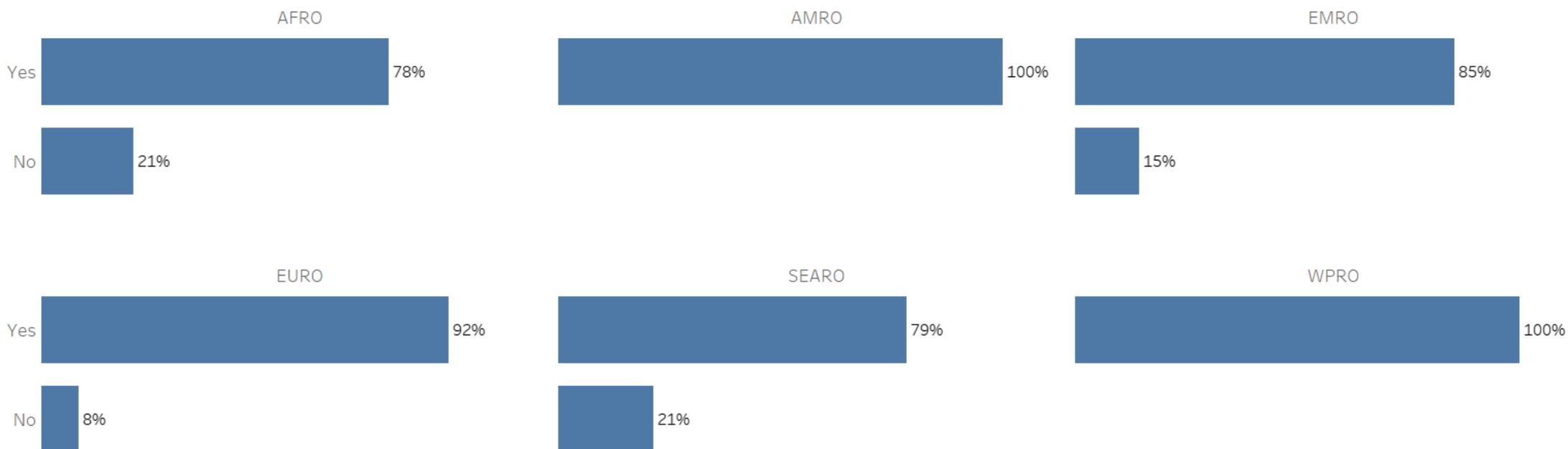
## Are there any demand-related plans in place to rebuild acceptance and/or demand for vaccination?

View of all respondents, weighted by the number of respondents from a particular country. Don't know' and 'Not applicable' responses have been excluded.

### Global



### Regional



Source: Immunization Pulse Poll 2, Question 12. Includes both national & sub-national respondents. Results weighted by # respondents per country. The data collected are subject to limitations inherent to voluntary self-reporting, self-selection bias, not all countries responded, countries with only one response vis-à-vis countries with many, possibility of fraudulent responses and not having a sampling frame to make inferences. Furthermore, the information about each country does not represent official reporting from Member States to WHO or UNICEF. Thus, the results presented here need to be interpreted with caution and do not represent in any way a WHO or UNICEF position regarding any country or territory for which one or more replies were received.

# Demand plans

## Briefly describe plans to increase demand

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Free text responses from 119 respondents representing 54 unique countries. 71% of respondents reporting from AFRO.<sup>a</sup>

- **82%** of respondents reported efforts involving **awareness building, community engagement, and social mobilization**
  - Tactics included: mass media (television, radio, newspaper, etc.), engagement through community leaders, and house-to-house sensitization
- **13%** plan to conduct **enhanced outreach**, with several respondents noting this will mitigate concerns over crowding at health facilities
- Other plans included: increased infection prevention and control (IPC) measures; training of healthcare workers; and, research into reasons for missed vaccination

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*There is already an existing active and trained network of Volunteer Community Mobilizers (VCMs) **going house-to-house to sensitize caregivers** to continue their child's immunization schedule. Secondly, **traditional and religious leaders have been trained** on COVID-19 and their roles and responsibilities are clearly defined. They ensure a regular mosque announcement on COVID-19 by Imams during Jumat prayers so as to prevent the spread of rumours that may affect demand... Also **health workers have been trained** on how to protect themselves and their clients so as to prevent the spread of COVID-19...*

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a. Number of respondents by region: AFRO 84 ; AMRO 6; EMRO 15 ; EURO 5; SEARO 6; WPRO 3.

Source: Immunization Pulse Poll 2, Question 13. Free-text field. Quote edited for clarity.

*The data collected are subject to limitations inherent to voluntary self-reporting, self-selection bias, not all countries responded, countries with only one response vis-à-vis countries with many, possibility of fraudulent responses and not having a sampling frame to make inferences. Furthermore, the information about each country does not represent official reporting from Member States to WHO or UNICEF. Thus, the results presented here need to be interpreted with caution and do not represent in any way a WHO or UNICEF position regarding any country or territory for which one or more replies were received.*

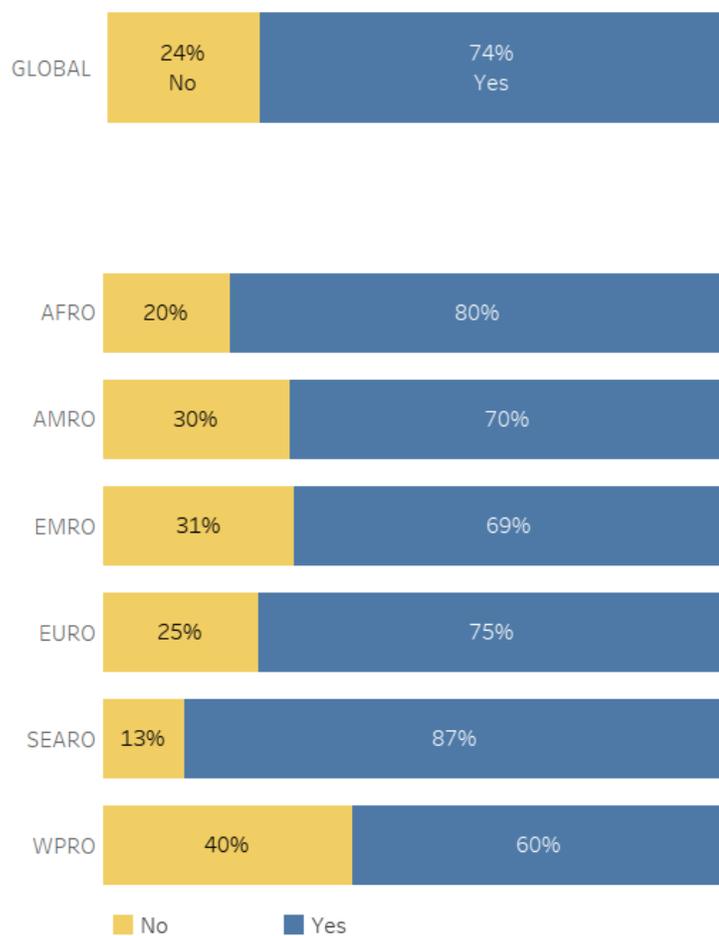
# Immunization Pulse Poll 2

Analysis of final data

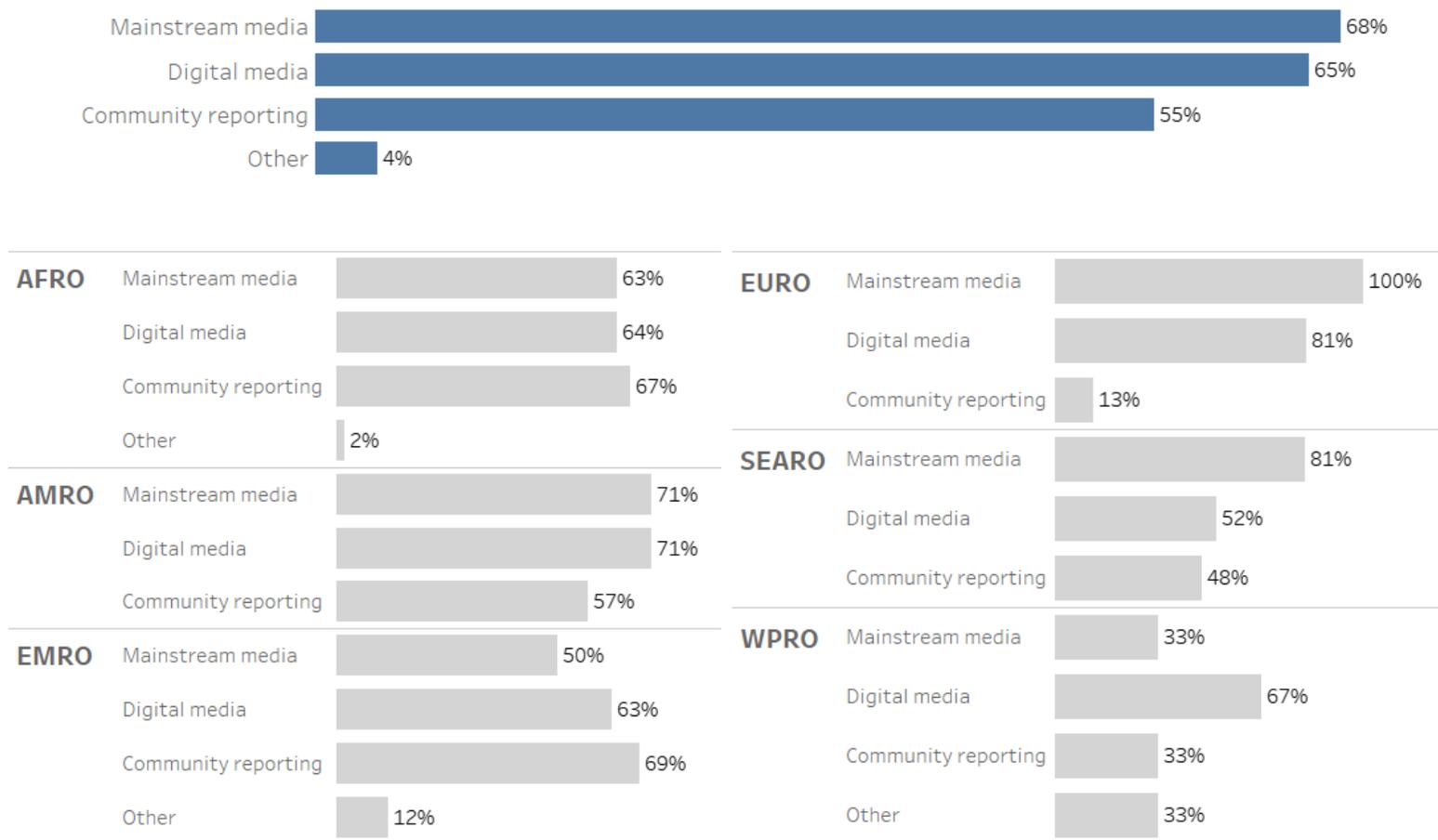
- 1 Respondent numbers & demographics
- 2 Overall status of vaccination services: May 2020
- 3 Status of demand for vaccination services: May 2020
- 4 Other information provided**

# Rumors & misinformation

Is your country tracking misinformation or rumors related to COVID 19 and immunization?



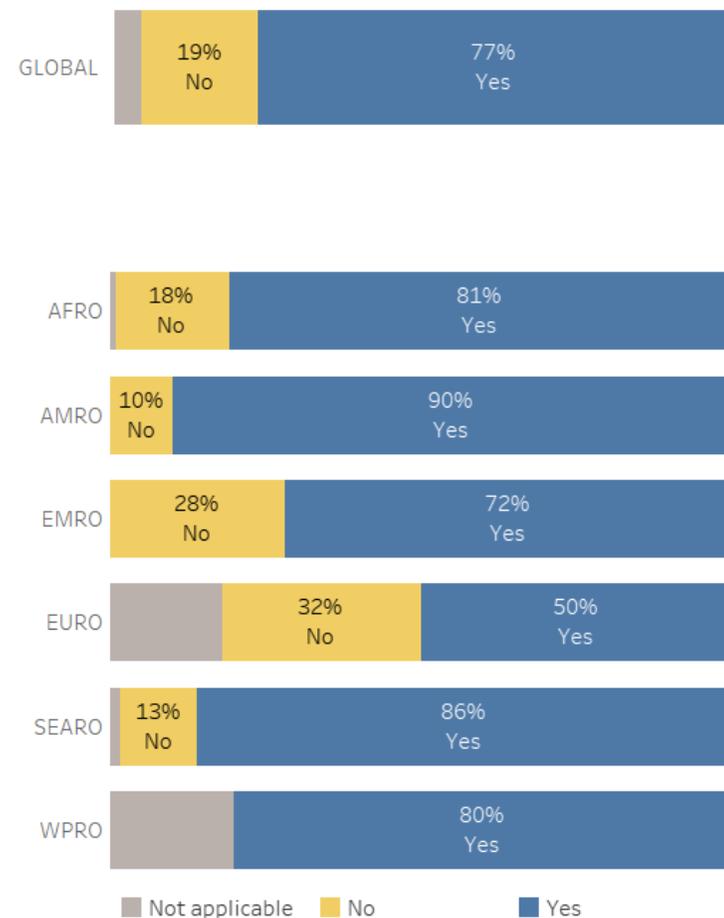
What channels are being used to monitor rumors or misinformation?



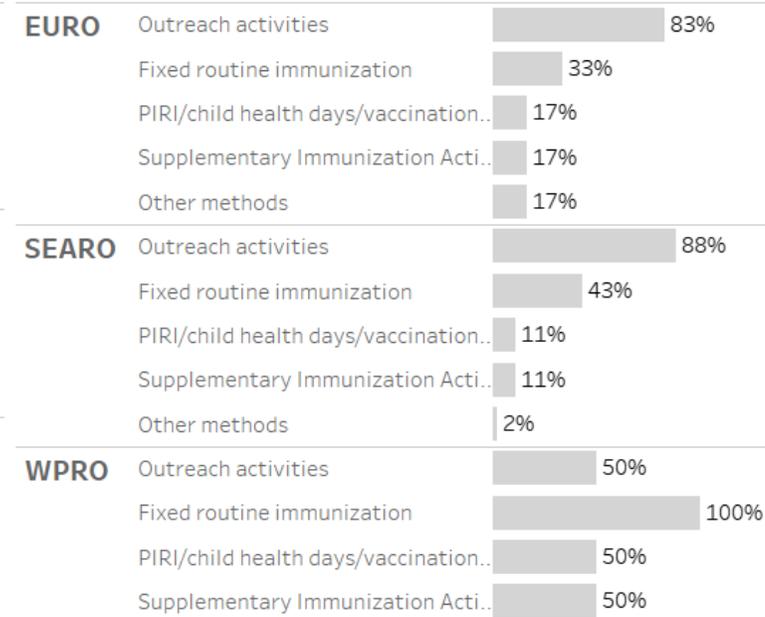
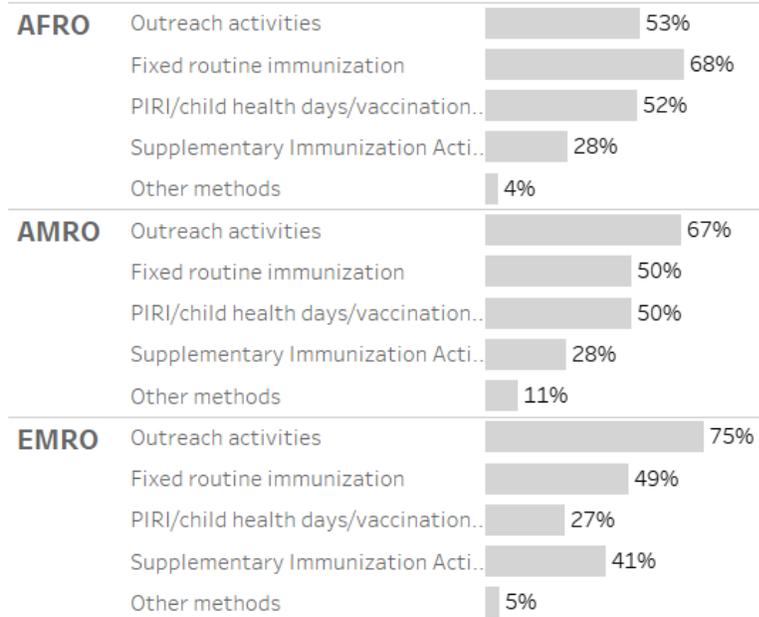
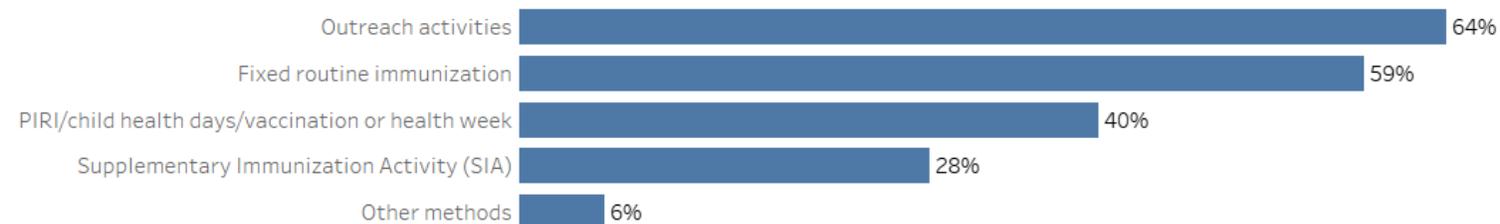
Source: Immunization Pulse Poll 2, Question 14 & 15. Includes both national & sub-national respondents. Results weighted by # respondents per country. 'Don't know' and 'not applicable' responses excluded. The data collected are subject to limitations inherent to voluntary self-reporting, self-selection bias, not all countries responded, countries with only one response vis-à-vis countries with many, possibility of fraudulent responses and not having a sampling frame to make inferences. Furthermore, the information about each country does not represent official reporting from Member States to WHO or UNICEF. Thus, the results presented here need to be interpreted with caution and do not represent in any way a WHO or UNICEF position regarding any country or territory for which one or more replies were received.

# Catch up plans

Has your country/province/district started to plan activities to vaccinate groups of persons who may have missed their vaccines?



Which activities are being planned to address immunity gaps/ catch-up people missed?



Source: Immunization Pulse Poll 2, Question 19 & 20. Includes both national & sub-national respondents. Results weighted by # respondents per country. 'Don't know' responses excluded. The data collected are subject to limitations inherent to voluntary self-reporting, self-selection bias, not all countries responded, countries with only one response vis-à-vis countries with many, possibility of fraudulent responses and not having a sampling frame to make inferences. Furthermore, the information about each country does not represent official reporting from Member States to WHO or UNICEF. Thus, the results presented here need to be interpreted with caution and do not represent in any way a WHO or UNICEF position regarding any country or territory for which one or more replies were received.

# Planned catch ups

## Information on catch-up activities planned

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Free text responses from 155 respondents representing 66 unique countries. 66% of respondents reporting from AFRO.<sup>a</sup>

- **20%** of respondent reported plans for **defaulter tracing** or MOV investigations
- **18%** plan to support catch-up plans with increased **community outreach, communication, sensitization and advocacy**
- **9%** report plans to enhance fixed post vaccination catch-up through **increasing number of sessions held**, and increasing **number of sites**
- **4%** plan to make **use of pre-scheduled appointments** to control for overcrowding at vaccination sites

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We have asked IT to **strengthen the vaccination sessions**, to change strategy not only to the fixed-post RI but also outreach, and to **increase the number of vaccination sessions**, **sensitize the community** and to **engage community stakeholders** such as CAC (Comité à Assise Communautaire; community committees) or RECOs (Rélais Communautaires; community leaders and influencers) to ensure children come for vaccination. We plan to enhance **training of providers** and EPI management.

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a. Number of respondents by region: AFRO 103; AMRO 10; EMRO 23; EURO 8; SEARO 8; WPRO 3.

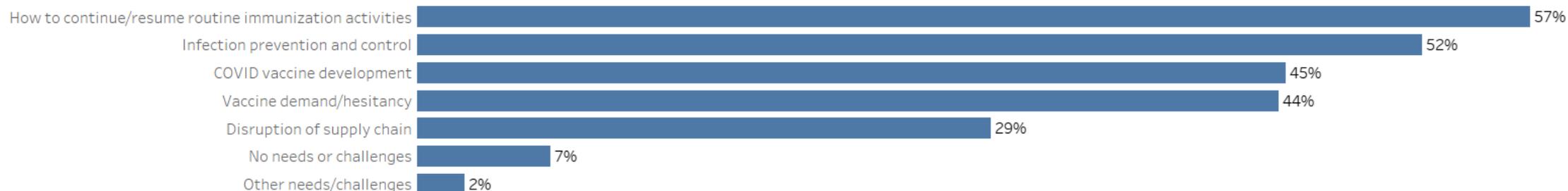
Source: Immunization Pulse Poll 2, Question 21. Free-text field. Quote edited for clarity.

The data collected are subject to limitations inherent to voluntary self-reporting, self-selection bias, not all countries responded, countries with only one response vis-à-vis countries with many, possibility of fraudulent responses and not having a sampling frame to make inferences. Furthermore, the information about each country does not represent official reporting from Member States to WHO or UNICEF. Thus, the results presented here need to be interpreted with caution and do not represent in any way a WHO or UNICEF position regarding any country or territory for which one or more replies were received.

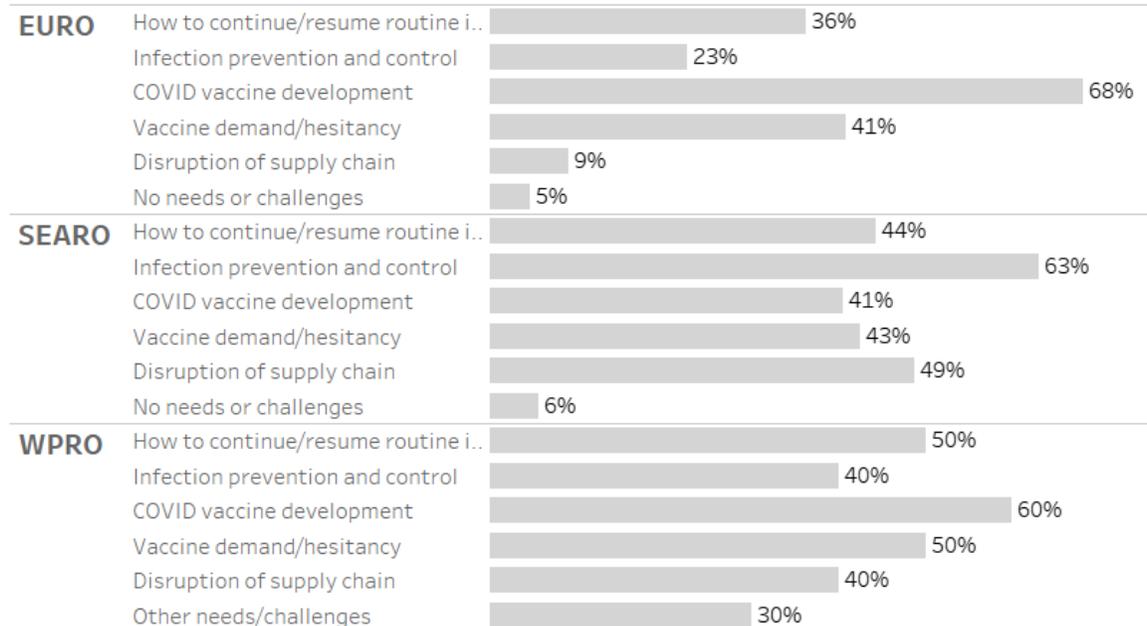
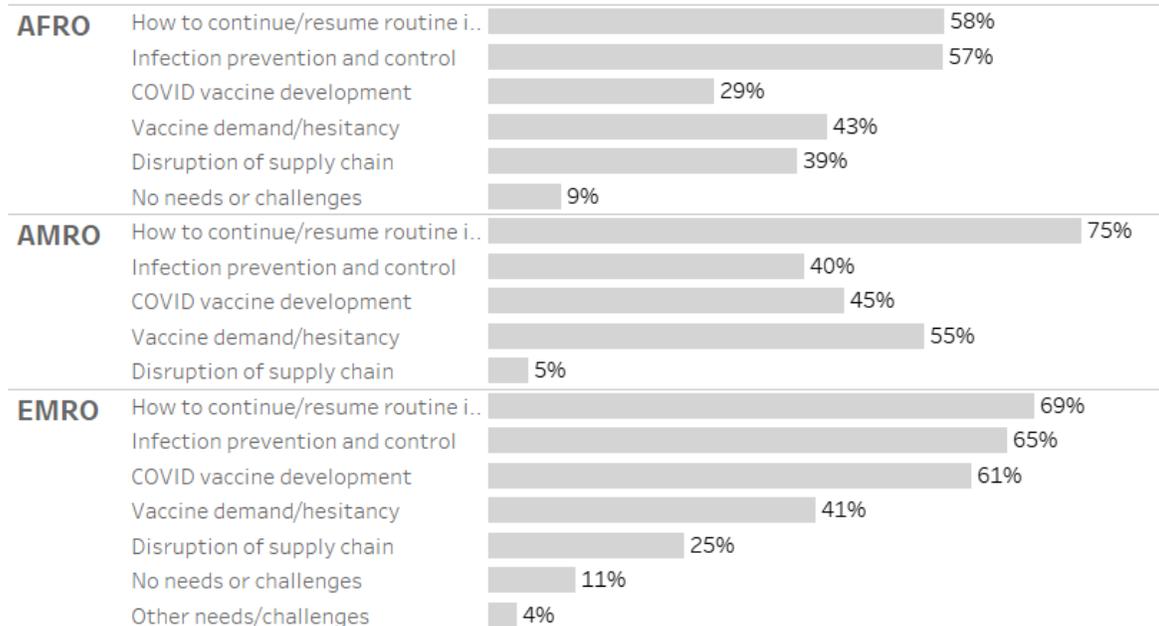
# Needs & challenges

## What are your most urgent information needs or challenges?

### Global



### Regional



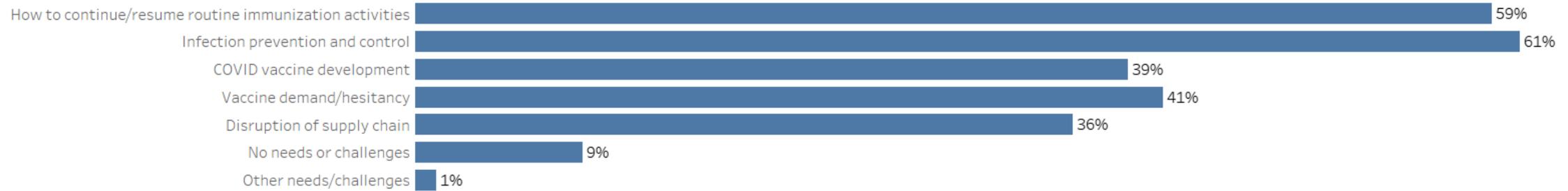
Source: Immunization Pulse Poll 2, Question 22 . Includes both national & sub-national respondents. Results weighted by # respondents per country.

The data collected are subject to limitations inherent to voluntary self-reporting, self-selection bias, not all countries responded, countries with only one response vis-à-vis countries with many, possibility of fraudulent responses and not having a sampling frame to make inferences. Furthermore, the information about each country does not represent official reporting from Member States to WHO or UNICEF. Thus, the results presented here need to be interpreted with caution and do not represent in any way a WHO or UNICEF position regarding any country or territory for which one or more replies were received.

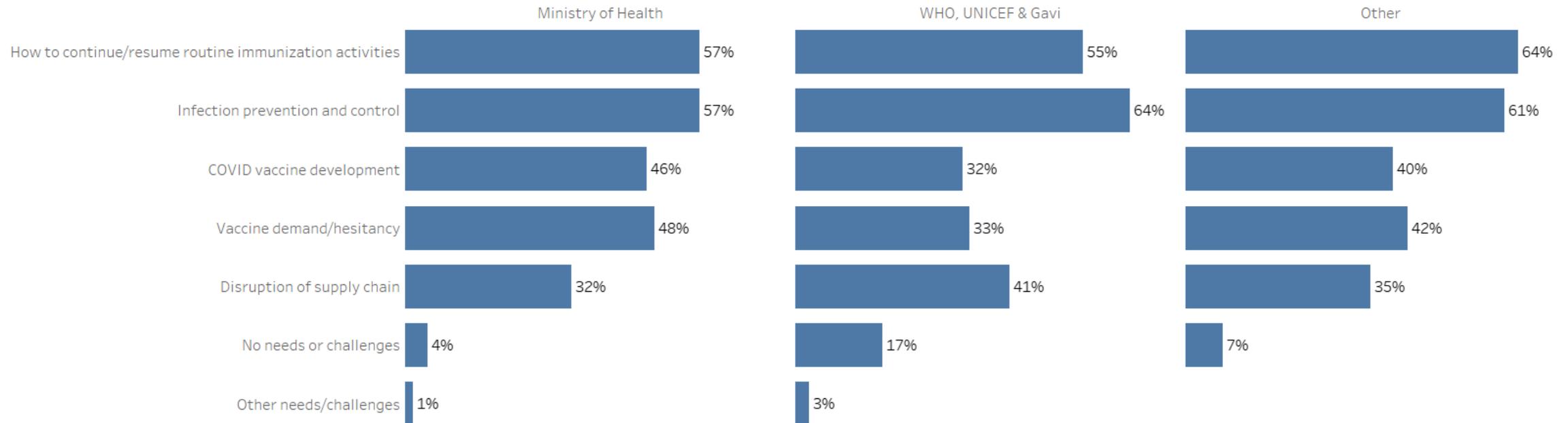
# Needs & challenges

## What are your most urgent information needs or challenges?

### Global



### By organization

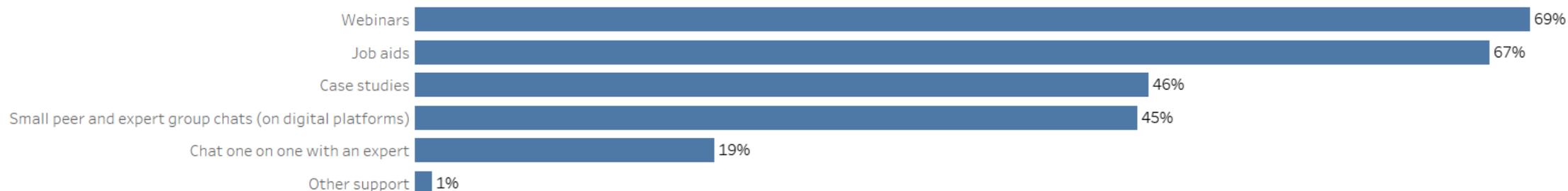


Source: Immunization Pulse Poll 2, Question 22 . Includes both national & sub-national respondents. Results are unweighted and so show percentage of all respondents who selected each option  
 The data collected are subject to limitations inherent to voluntary self-reporting, self-selection bias, not all countries responded, countries with only one response vis-à-vis countries with many, possibility of fraudulent responses and not having a sampling frame to make inferences. Furthermore, the information about each country does not represent official reporting from Member States to WHO or UNICEF. Thus, the results presented here need to be interpreted with caution and do not represent in any way a WHO or UNICEF position regarding any country or territory for which one or more replies were received.

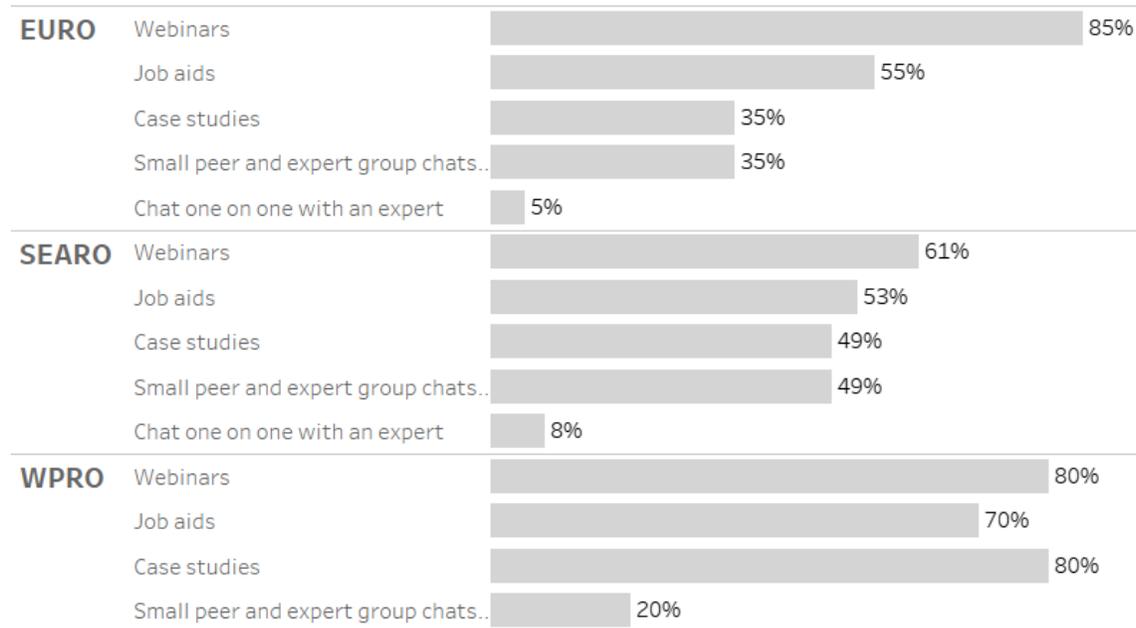
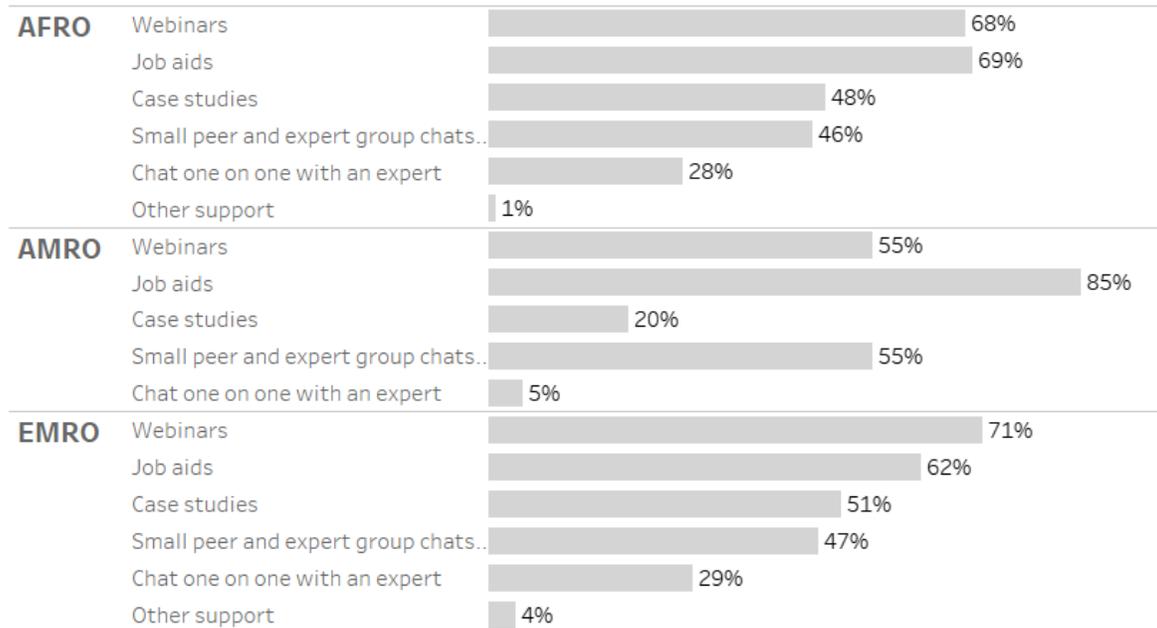
# Support required

## How would you want to receive support for these challenges?

### Global



### Regional



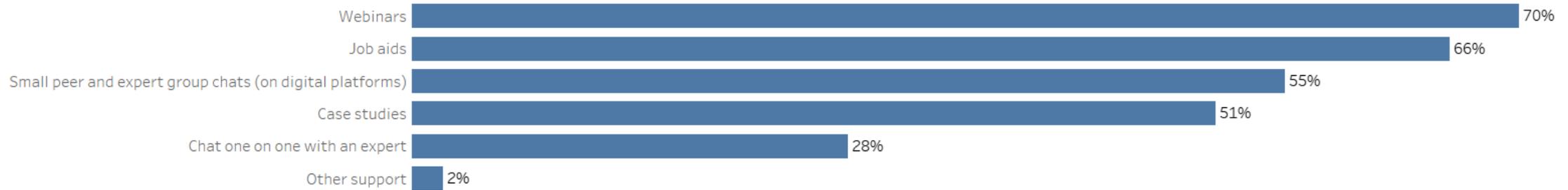
Source: Immunization Pulse Poll 2, Question 23 . Includes both national & sub-national respondents. Results weighted by # respondents per country.

The data collected are subject to limitations inherent to voluntary self-reporting, self-selection bias, not all countries responded, countries with only one response vis-à-vis countries with many, possibility of fraudulent responses and not having a sampling frame to make inferences. Furthermore, the information about each country does not represent official reporting from Member States to WHO or UNICEF. Thus, the results presented here need to be interpreted with caution and do not represent in any way a WHO or UNICEF position regarding any country or territory for which one or more replies were received.

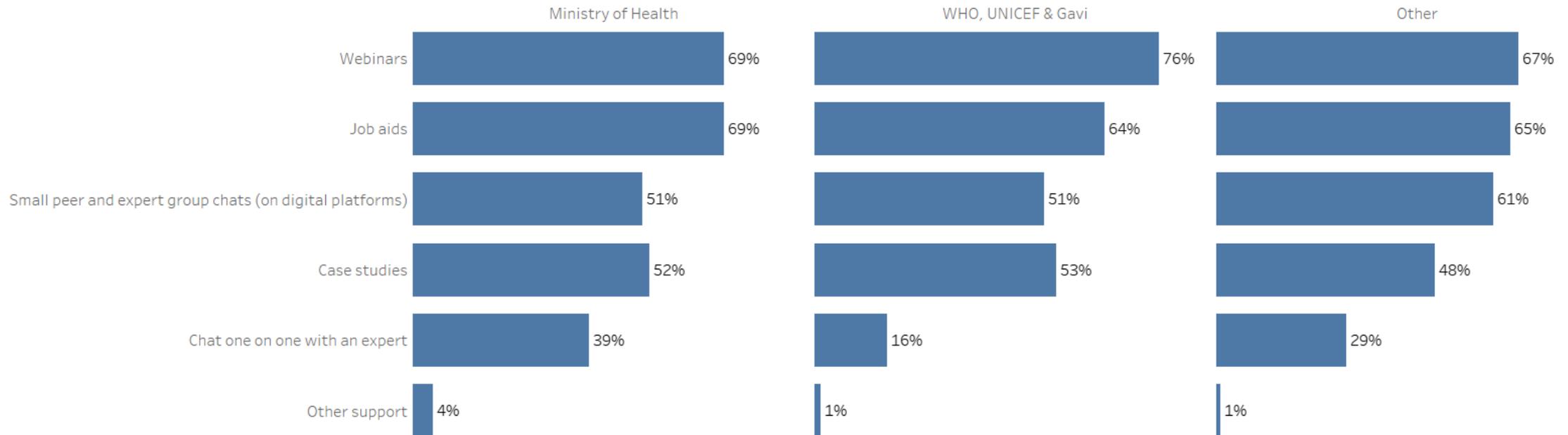
# Support required

How would you want to receive support for these challenges?

## Global



## By organization

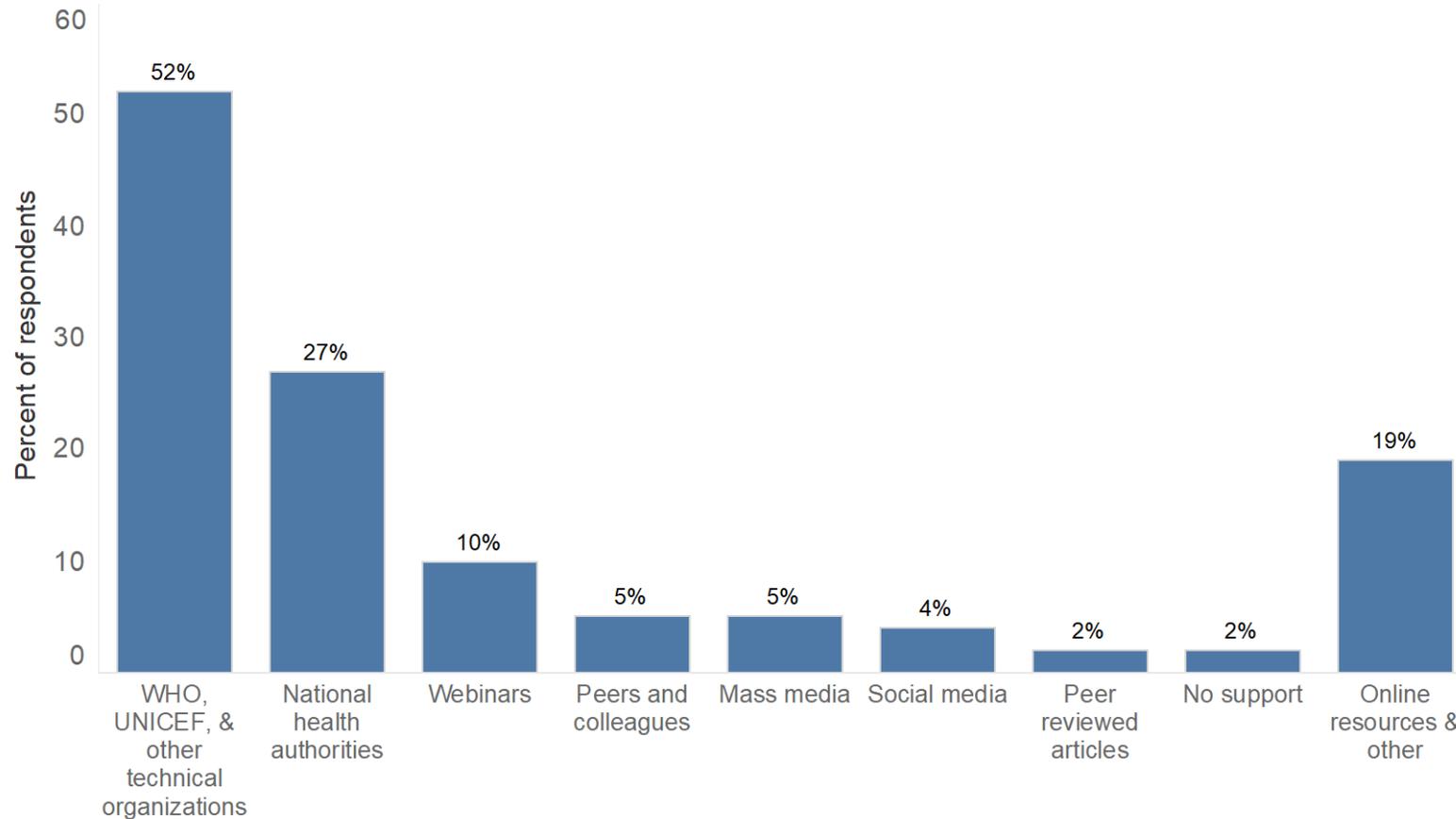


Source: Immunization Pulse Poll 2, Question 23 . Includes both national & sub-national respondents. Results are unweighted and so show percentage of all respondents who selected each option  
 The data collected are subject to limitations inherent to voluntary self-reporting, self-selection bias, not all countries responded, countries with only one response vis-à-vis countries with many, possibility of fraudulent responses and not having a sampling frame to make inferences. Furthermore, the information about each country does not represent official reporting from Member States to WHO or UNICEF. Thus, the results presented here need to be interpreted with caution and do not represent in any way a WHO or UNICEF position regarding any country or territory for which one or more replies were received.

# Current sources of information

## Where are you currently getting information to support your immunization needs during the COVID-19 response?

Free text responses from 238 respondents representing 80 unique countries. 65% of respondents reporting from AFRO.<sup>a</sup>



a. Number of respondents by region: AFRO 154; AMRO 10; EMRO 39; EURO 14; SEARO 16; WPRO 5.

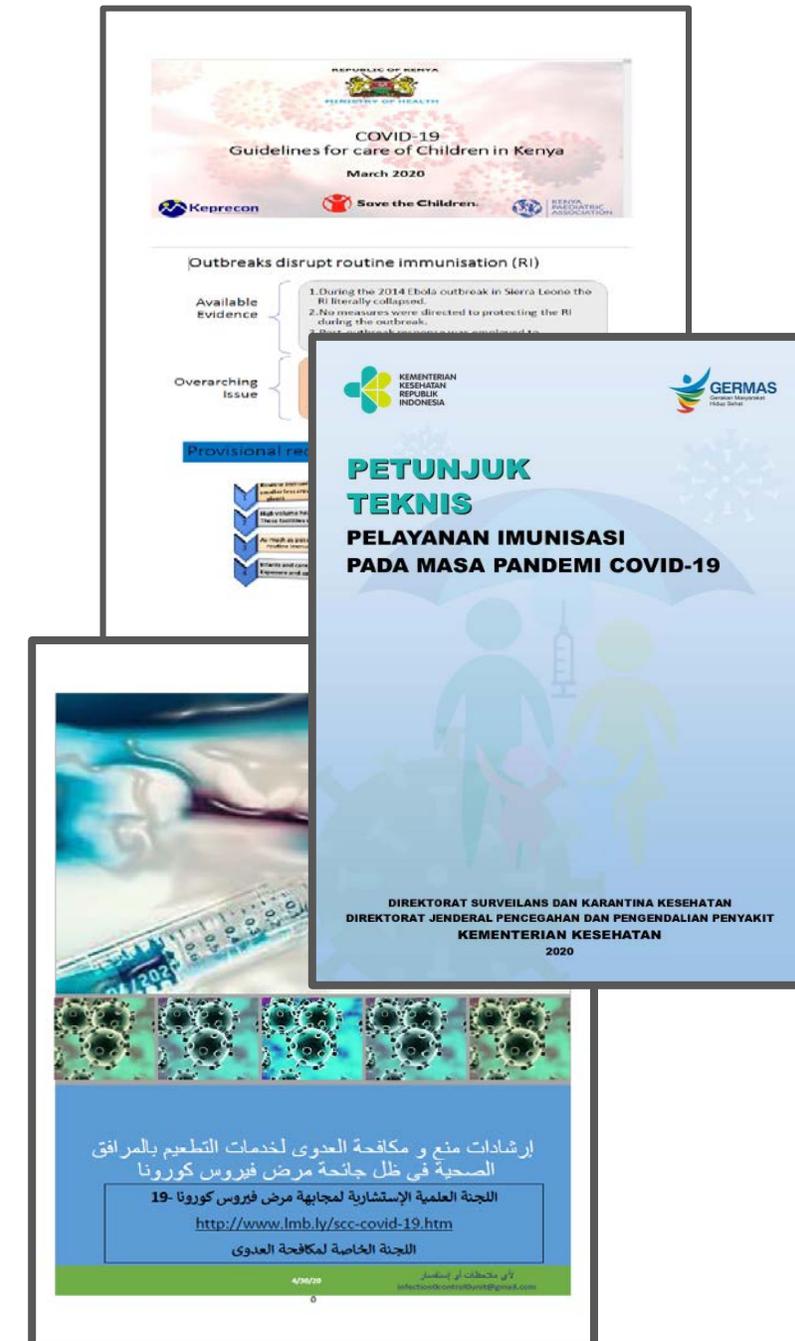
Source: Immunization Pulse Poll 2, Question 24. Free-text field.

*The data collected are subject to limitations inherent to voluntary self-reporting, self-selection bias, not all countries responded, countries with only one response vis-à-vis countries with many, possibility of fraudulent responses and not having a sampling frame to make inferences. Furthermore, the information about each country does not represent official reporting from Member States to WHO or UNICEF. Thus, the results presented here need to be interpreted with caution and do not represent in any way a WHO or UNICEF position regarding any country or territory for which one or more replies were received.*

# Guidance Document Review

- **67 individuals** submitted guidance via web links or document uploads
- Overall, guidance\* was received from 25 countries in 12 languages, ranging from 1 page to 104 pages long, and published between March and June 2020
- Guidance took many forms, including traditional guidance documents, flyers, letters and decision-making matrices
- The main source of information for the guidance was National Ministries of Health (80%), with additional citations within the guidance from WHO, UNICEF, Gavi and NITAGs
- Main topics of guidance included the following: specific safety procedures to carry out routine immunization sessions, decision-making considerations and dissemination of educational messages to the community
- **Note:** It was not possible to compare respondents' information needs (e.g., those who say that they still need IPC guidance) with the guidance documents they submitted (i.e., whether or not this guidance addresses their main issue of concern)

\*Not all links/documents submitted were specific national or sub-national guidance related to immunization. Some resources were general links to national government or partner (i.e., WHO, UNICEF) websites. These submissions (n=23) were not included in the review.



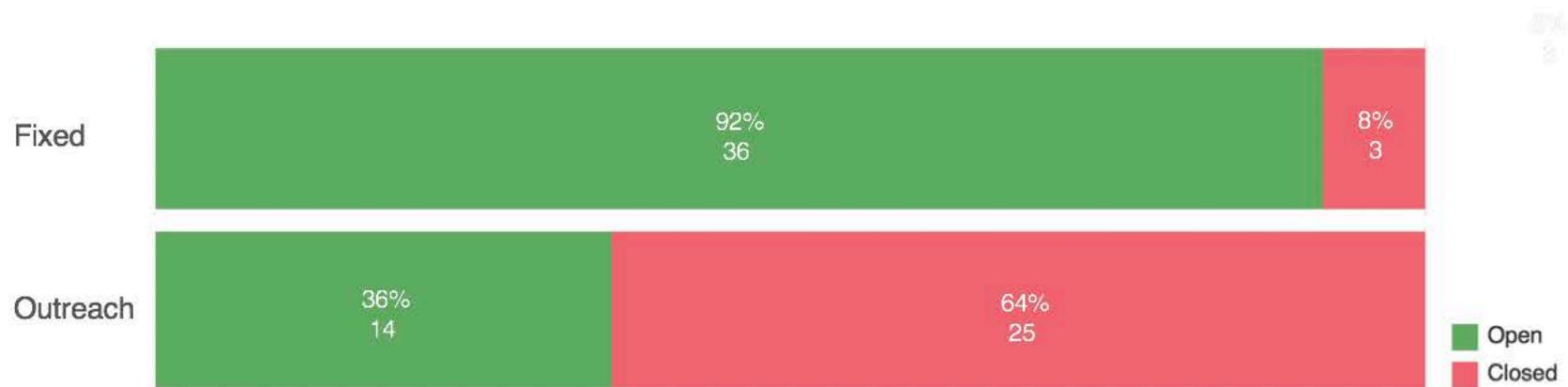
# Appendix: PAHO Regional Survey Data

# PAHO: Status of routine immunization services

Data collected by PAHO via web-based poll, independent of Pulse survey. Reflects status in May 2020.

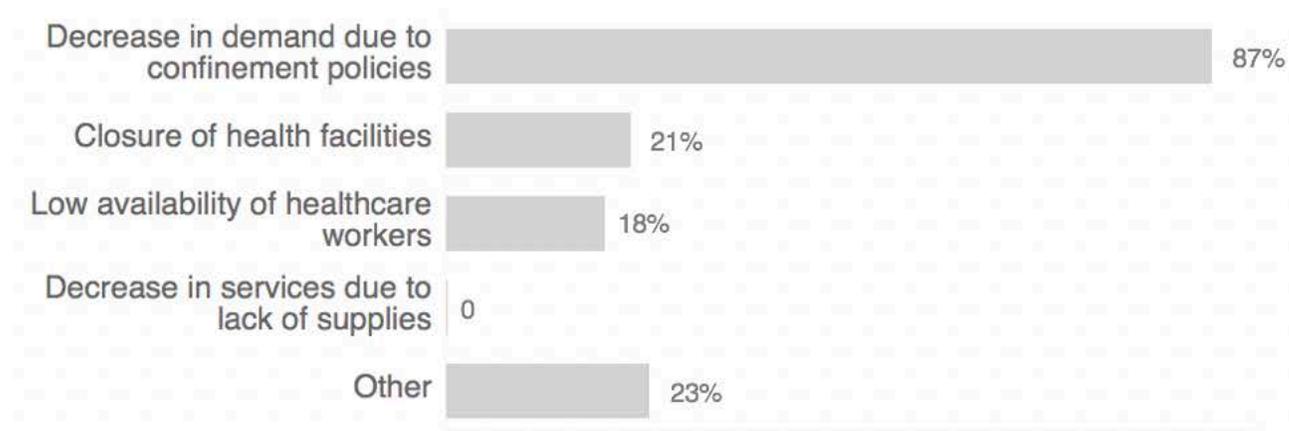
## Status of routine immunization services:

N=39



## Impact of COVID-19 on routine immunization services:

N=39



Source: PAHO. Respondents of web-based poll included PAHO country focal points and country advisors.

Responses reflect the views of poll participants. Information does not represent official reporting from Member States to PAHO/WHO or UNICEF. Thus, the results presented here need to be interpreted with caution and do not represent in any way a PAHO/WHO or UNICEF position.

# PAHO: Difficulties with supplies required for vaccination services

Data collected by PAHO via web-based poll, independent of Pulse survey. Reflects status in May 2020.

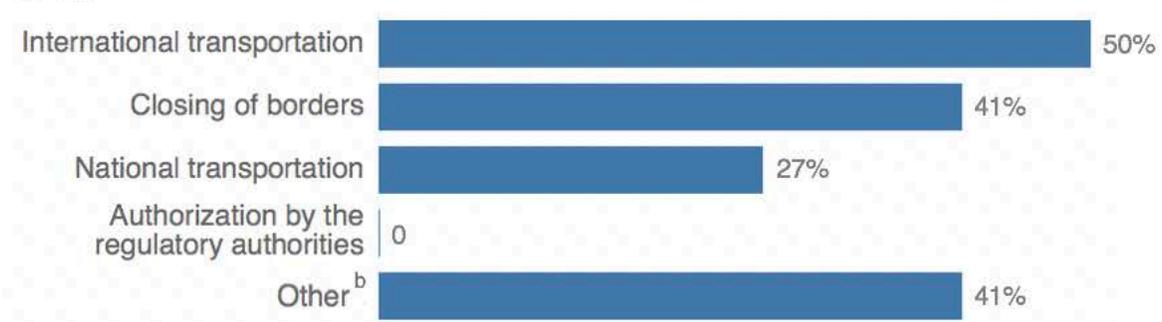
## Difficulties in delivery of supply:

N=39



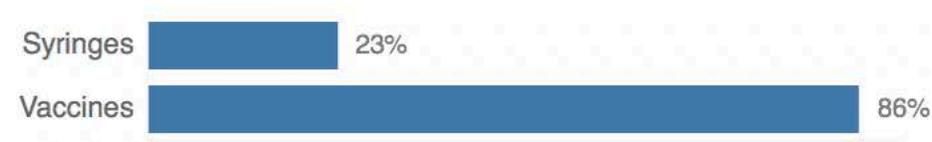
## Reasons for difficulties in delivery of supply:

N=22



## Difficulty by product type:

N=22



a. Island countries included: Barbados, Haiti, Montserrat, British Virgin Islands, Bahamas, Trinidad and Tobago, Turks and Caicos, Dominica, St. Kitts and Nevis, Bermuda, St Lucia, Grenada, St Vincent and the Grenadines, Cayman Islands, Jamaica, Aruba, St Maarten, Anguilla, Curacao, Antigua.

b. Other reasons included: difficulties with international or national transport; budget issues due to re-prioritization of funds to COVID-19; and, increasing costs due to insurance, gasoline, and freight.

Source: PAHO. Respondents of web-based poll included PAHO country focal points and country advisors.

Responses reflect the views of poll participants. Information does not represent official reporting from Member States to PAHO/WHO or UNICEF. Thus, the results presented here need to be interpreted with caution and do not represent in any way a PAHO/WHO or UNICEF position.