### Population

<table>
<thead>
<tr>
<th>Total population*</th>
<th>103,903</th>
</tr>
</thead>
<tbody>
<tr>
<td>Births</td>
<td>1,948</td>
</tr>
<tr>
<td>National Immunization Programme (NIP) target</td>
<td>6,782</td>
</tr>
</tbody>
</table>


### Finance

- Gross national income per capita* (US $): $3,840
- Line item in budget for vaccines: Yes
- % of vaccines in routine immunization funded by government: Yes
- Eligible for GAVI support: No

* World Health Statistics 2015

### Immunization schedule

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>B</th>
<th>DTP</th>
<th>DTP-HepB-IPV</th>
<th>Td</th>
<th>Tdap</th>
<th>HepB</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>B</td>
<td>M12, +Y4</td>
<td>M2, M4, M6</td>
<td>+Y11</td>
<td>+Y11</td>
<td>B</td>
</tr>
<tr>
<td></td>
<td>Hib</td>
<td>IPV</td>
<td>MMR</td>
<td>Pneumo_conj</td>
<td>Rotavirus</td>
<td>HPV</td>
</tr>
<tr>
<td></td>
<td>M2, M4, M12</td>
<td>+Y4</td>
<td>M12, M13</td>
<td>M2, M4, M6, M13</td>
<td>M2, M4, M6</td>
<td>+Y9, +M2, +M6</td>
</tr>
</tbody>
</table>

B=birth, W=week, M=month, Y=year

### GVAP and WPRO framework indicators, 2014

- Polio-free status sustained*: Yes
- At least one dose of IPV introduced by end of 2015*: Yes
- Country validated as having achieved MNT elimination*: Yes
- Country verified for measles elimination by 2015*: No
- Seroprevalence of chronic hepatitis B infection (HBsAg) reduced to <1% in 5 year olds by 2017*: 2.5% (2005)
- Rubella-containing vaccine introduced*: Yes
- Rubella case-based data submitted to WPRO*: Yes
- At least one new or underutilized vaccine introduced since 2010*: Yes
- DTP3 national immunization coverage >95% by 2020: 78.3%
- DTP3 >90% coverage in all districts (proportion of districts with >90% coverage): 50%
- DTP dropout rate <5%: 17.1%
- Increasing trend in domestic expenditure since 2010: No data
- NITAG established: No

* 2015 data

### NIP priority needs

1. 2 vehicles (4WD) to mobilize EPI team in the states and 2 back-up incinerators
2. Develop comprehensive EPI policies and multi-year plan that will include all development partners/donors
3. Human resource expert in FSM and do consultations to all four states in EPI programs

### Reported immunization coverage, 2005-2014

- **BCG**
- **DTP3**
- **MCV1**
- **TT2**

### Reported cases

- **AFP**
- **Measles**
- **Rubella**
- **Neonatal tetanus**
- **Total tetanus**
- **Diphtheria**
- **Pertussis**

<table>
<thead>
<tr>
<th>Year</th>
<th>Non-polio AFP rate</th>
<th>% adequate specimens</th>
<th>AFP</th>
<th>Measles</th>
<th>Rubella</th>
<th>Neonatal tetanus</th>
<th>Total tetanus</th>
<th>Diphtheria</th>
<th>Pertussis</th>
</tr>
</thead>
<tbody>
<tr>
<td>2005</td>
<td>0.0</td>
<td></td>
<td>0</td>
<td>0.0</td>
<td>0.0</td>
<td>0.0</td>
<td>0.0</td>
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<tr>
<td>2006</td>
<td>1.0</td>
<td>0%</td>
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<td>0.0</td>
<td>0.0</td>
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<tr>
<td>2007</td>
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</tr>
<tr>
<td>2008</td>
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<td>0.0</td>
<td>0.0</td>
<td>0.0</td>
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<tr>
<td>2009</td>
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<td></td>
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<td>0.0</td>
<td>0.0</td>
<td>0.0</td>
<td>0.0</td>
</tr>
<tr>
<td>2010</td>
<td>0.0</td>
<td></td>
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<td>0.0</td>
<td>0.0</td>
<td>0.0</td>
<td>0.0</td>
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<tr>
<td>2011</td>
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<td></td>
<td>0</td>
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<td>0.0</td>
<td>0.0</td>
<td>0.0</td>
<td>0.0</td>
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<tr>
<td>2012</td>
<td>0.0</td>
<td></td>
<td>0</td>
<td>0.0</td>
<td>0.0</td>
<td>0.0</td>
<td>0.0</td>
<td>0.0</td>
<td>0.0</td>
</tr>
<tr>
<td>2013</td>
<td>0.0</td>
<td></td>
<td>0</td>
<td>0.0</td>
<td>0.0</td>
<td>0.0</td>
<td>0.0</td>
<td>0.0</td>
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</tr>
<tr>
<td>2014</td>
<td>0.0</td>
<td>140</td>
<td>1347.4</td>
<td>0.0</td>
<td>0.0</td>
<td>0.0</td>
<td>0.0</td>
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<td>0.0</td>
</tr>
</tbody>
</table>

Non-polio AFP rate = incidence per 100,000 under 15 years; % adequate specimens = % of AFP cases with 2 specimens within 14 days of paralysis onset.

AFP = incidence rate; for measles and rubella, per 100,000 population; for neonatal tetanus, per 1000 live births; for all others, per 100,000 population. Total tetanus includes neonatal tetanus cases.

**Population source:** United Nations, Department of Economic and Social Affairs, Population Division: World Population Prospects
**Federated States of Micronesia, 2014**

### Planning

<table>
<thead>
<tr>
<th>Planning</th>
<th>Safe Immunization</th>
</tr>
</thead>
<tbody>
<tr>
<td>Multi-year plan (MYP)</td>
<td>% districts using auto-disable syringes</td>
</tr>
<tr>
<td>Annual workplan for immunization activities</td>
<td>System to monitor AEFI</td>
</tr>
<tr>
<td>Includes measles elimination activities</td>
<td>Number of AEFI</td>
</tr>
<tr>
<td>Includes hepatitis B control activities</td>
<td>Disposal methods</td>
</tr>
<tr>
<td>Updated wild poliovirus importation and cVDPV</td>
<td>Vaccine AEFI review committee</td>
</tr>
<tr>
<td>response plan</td>
<td>Incineration</td>
</tr>
</tbody>
</table>

### Measles elimination

- **Confirmed measles case rate** (per 1 million population): 2226.58
- **Year of MCV1 introduction**: 1982
- **Discarded as non-measles rate** (Target: ≥ 2 per 100 000 population): 0.88
- **Year of MCV2 introduction**: 1995
- **% suspected cases with adequate specimens** (Target: ≥ 80%): 11%
- **Year and target population of last SIA**: 2014 (6 mos to 49 yrs)
- **Does surv system assess measles importation? (No. of imported cases)**: Yes (1)
- **Number vaccinated (coverage achieved)**: 28 562 (93%)

### Rubella

- **Rubella-containing vaccine in NIP**: Yes
- **Number of rubella cases (IgM positive)**: 0
- **Is rubella notifiable?**: No

### Measles immunity profile, 2014

- **Infection Protection**: 100% (protected by maternal antibodies), 90% (protected by routine vaccination with 1st dose), 80% (protected by routine vaccination with 2nd dose), 70% (protected by immunity due to past infection), 60% (Susceptible)

### Measles cases and immunization coverage, 1980–2014

- **Is there a school entry requirement?**: Yes
- **If no, do schools check immunization status at enrolment?**: Yes
- **What vaccines are required/checked?**: DTP, Polio, HepB, MMR (Pre-school/Primary); Td (every 10 yrs)
- **At what school level/year?**: Yes
- **Is routine vaccination given at school?**: Yes
- **If yes, is this part of a comprehensive school-health program that delivers other health interventions?**: Yes

### Surveillance for Invasive Bacterial Vaccine-preventable Disease and Rotavirus

- **Rotavirus diarrhea**: Type of surveillance system - Coverage results
- **Bacterial meningitis**: Year surveillance started - Number of facilities under surveillance
- **Bacterial pneumonia**: Disease - Number of cases with positive tests

**Note**: Unless otherwise specified, data are from the WHO/UNICEF Joint Reporting Forms (JRF) for Immunization