



Population	
Total population*	103 903
Births	1948
National Immunization Programme (NIP) target	6782

* United Nations, Department of Economic and Social Affairs, Population Division (2013). World Population Prospects: The 2012 Revision, CD-ROM Edition. (Medium Fertility Variant)

Finance	
Gross national income per capita* (US \$)	\$3840
Line item in budget for vaccines	Yes
% of vaccines in routine immunization funded by government	
% of routine immunization - funded by government	
Eligible for GAVI support	No

* World Health Statistics 2015

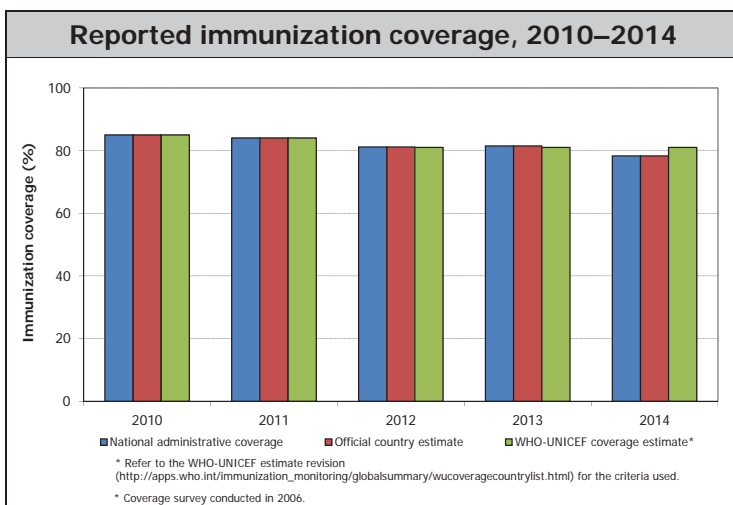
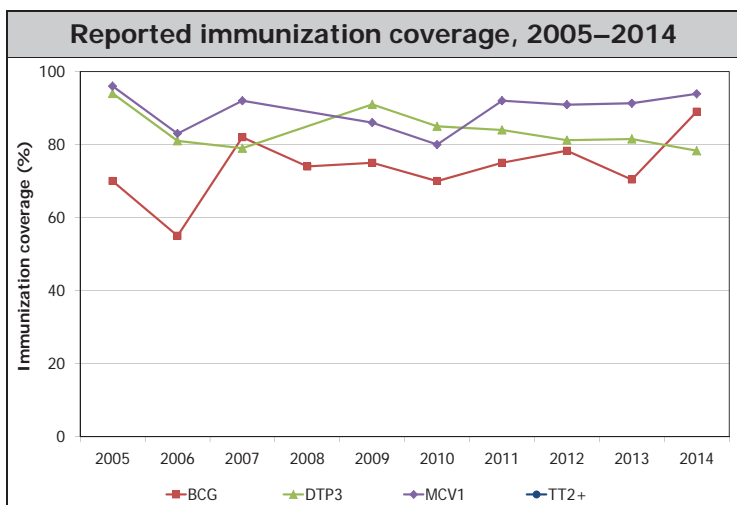
Immunization schedule			
BCG	B	Hib	M2, M4, M12
DTP	M12, +Y4	IPV	+Y4
DTP-HepB-IPV	M2, M4, M6	MMR	M12, M13
Td	+Y11	Pneumo_conj	M2, M4, M6, M13
Tdap	+Y11	Rotavirus	M2, M4, M6
HepB	B	HPV	+Y9, +M2, +M6

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 cases														
Year	AFP		Measles		Rubella		Neonatal tetanus		Total tetanus		Diphtheria		Pertussis	
	Non-polio AFP rate	% adequate specimens	Cases	IR	Cases	IR	Cases	IR	Cases	IR	Cases	IR	Cases	IR
2005	0.0		0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
2006	1.0	0%	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
2007	0.0		0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	47	42.3
2008	0.0													
2009	0.0		0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
2010	0.0													
2011	0.0		0	0.0										
2012	0.0		0	0.0										
2013	0.0		0	0.0										
2014	0.0		140	1347.4	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0

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
 IR = incidence rate: for measles and rubella, per 1 000 000 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

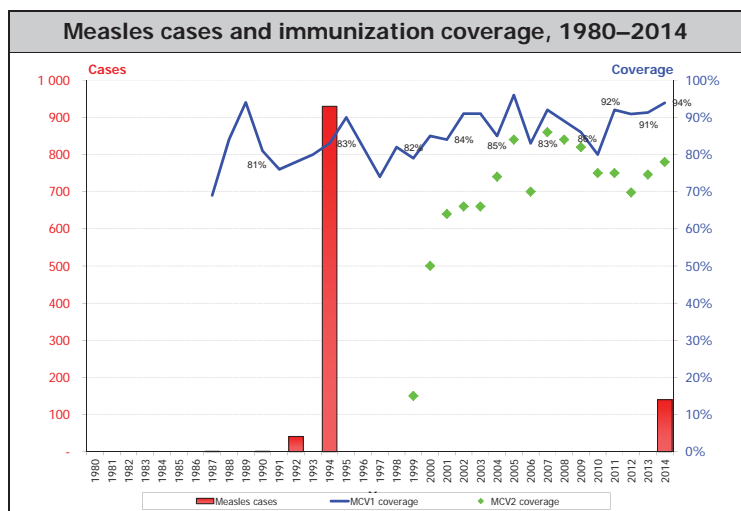
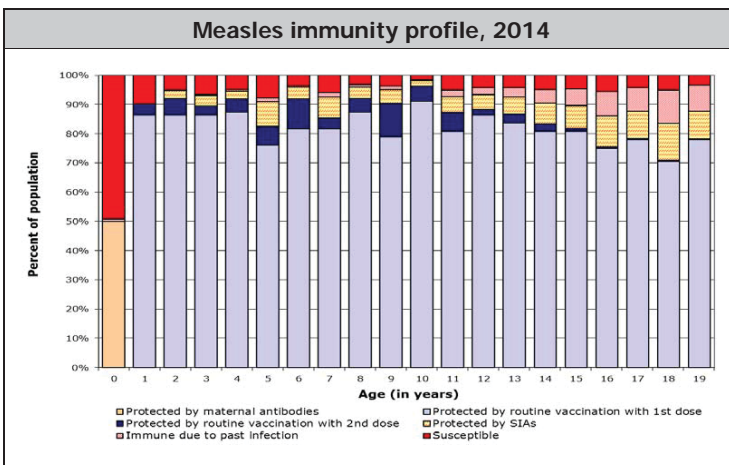
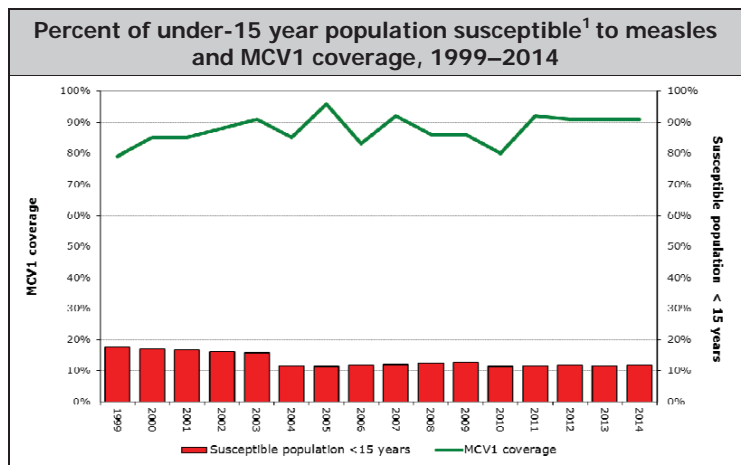
Planning	
Multi-year plan (MYP)	Yes (2013-2017)
Annual workplan for immunization activities	Yes
Includes measles elimination activities	No
Includes hepatitis B control activities	Yes, with line item budget
Updated wild poliovirus importation and cVDPV response plan	No

Safe immunization	
% districts using auto-disable syringes	
System to monitor AEFI	No
Number of AEFI	
Disposal methods	Incineration
Vaccine AEFI review committee	No
Injection safety review	

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: $\geq 80\%$)	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%)

* Data from measles monthly country reports to WHO

Rubella			
Rubella-containing vaccine in NIP	Yes	Number of rubella cases (IgM positive)	0
Is rubella notifiable?	No	Surveillance system for congenital rubella syndrome	No



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

Coverage surveys	
Year of most recent survey	2013
Type of survey	Assessment survey utilizing immunization registry
Coverage results	

Operational indicators for hepatitis B control program			
Year HepB vaccine first used in NIP	1989	Systems to monitor HepB vaccine birth dose	
Year HepB3 introduced nationwide		Systems to deliver HepB vaccine birth dose	
Year HepB birth dose introduced		No. of districts with >10% difference between DTP3-HepB3	
HepB vaccine birth dose coverage within 24 hours	86%	HepB vaccine third dose coverage	81%

Surveillance for Invasive Bacterial Vaccine-preventable Disease and Rotavirus				
Disease	Type of surveillance system	Year surveillance started	Number of facilities under surveillance	Number of cases with positive tests
Rotavirus diarrhea				
Bacterial meningitis				
Bacterial pneumonia				

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