Brunei Darussalam, 2015

Global Vaccine Action Plan (GVAP) and Regional framework indicators

- Polio-free status sustained
- Country achieved MNT elimination
- Sero-prevalence of chronic hepatitis B infection (HBSAg) reduced to < 1% in 5 year olds by 2017
- At least one new or underutilized vaccine introduced since 2010*
- Functional NITAG (legal basis, TORs, ≥ 5 areas of expertise, ≥ 1 meeting per year, agenda and background docs, disclosure of conflict of interest)
- Jaundice and vomiting
- Extraordinary assessment
- Case-based surveillance for invasive bacterial vaccine-preventable disease
- Case-based surveillance for rotavirus disease
- Case-based surveillance for Japanese encephalitis
- Case-based surveillance for polio
- Case-based surveillance for DTP3
- Case-based surveillance for measles
- Case-based surveillance for rubella

Population

<table>
<thead>
<tr>
<th>Year</th>
<th>Total</th>
<th>Births</th>
<th>NIP target &lt; 1 year (surviving infants)</th>
<th>Source of data for NIP target</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>417 200</td>
<td>6699</td>
<td>6455</td>
<td>Registered population</td>
</tr>
</tbody>
</table>

Finance

<table>
<thead>
<tr>
<th>Year</th>
<th>Gross national income per capita* (US $)</th>
<th>Line item in budget for vaccines</th>
<th>% of vaccines in routine immunization funded by government</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>$37 320</td>
<td>Yes</td>
<td>Eligible for GAVI support</td>
</tr>
</tbody>
</table>

Reported cases of selected vaccine preventable diseases

- Acute flaccid paralysis (AFP)
- Measles
- Rubella
- Congenital rubella syndrome (CRS)
- Neonatal tetanus
- Total tetanus
- Diphtheria
- Pertussis

Iinvasive bacterial disease, rotavirus and japanese encephalitis

- Rotavirus diarrhea
- Japanese encephalitis
- Bacterial meningitis
- Bacterial pneumonia

Confirmed measles cases by month of onset 2011–2015

Suspected measles cases by age group and vaccination status, 2015
Immunization schedule

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>B</th>
<th>DTP-Hib-HepB-IPV</th>
<th>M2, M4, M6</th>
<th>MMR</th>
<th>M12, M18</th>
</tr>
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<tbody>
<tr>
<td>BCG</td>
<td>B</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hib</td>
<td>Y1</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DTP</td>
<td>Y5</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>IPV</td>
<td>Y13, Y13, Y13</td>
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</table>

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

Planning

- Multi-year plan (MYP)
- Updated wild poliovirus importation and cVDPV response plan

NIP priority needs

No data

Immunization schedule

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Safe immunization

- % districts using auto-disable syringes: Yes
- Number of AEFI: 26
- Injection safety policy implemented: No
- Disposal methods: Incineration
- Injection safety review

Delivery of immunization services

- % of population served by outreach
  - No. (% of districts with DTP3 coverage < 80%): 0 (0%)
  - No. (% of districts with DTP3 coverage ≥ 90%): 4 (100%)
  - No. (% of districts with MCV1 coverage < 80%): 0 (0%)
  - No. (% of districts with MCV1 coverage ≥ 90%): 4 (100%)

- No. (% of districts with DTP drop-out > 10%): 0 (0%)
- No. (% of districts with DTP1–MCV1 drop-out > 10%): 0 (0%)

Total number of missed children, 2011-2015

<table>
<thead>
<tr>
<th>Year</th>
<th>No. of missed children</th>
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<tbody>
<tr>
<td>2011</td>
<td>0</td>
</tr>
<tr>
<td>2012</td>
<td>100</td>
</tr>
<tr>
<td>2013</td>
<td>200</td>
</tr>
<tr>
<td>2014</td>
<td>300</td>
</tr>
<tr>
<td>2015</td>
<td>400</td>
</tr>
</tbody>
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Surveys

- Coverage survey: Yes (unknown coverage)
- Serosurvey:
  - Most recent (year): MMR - 2008-2009 (School year 1-6)
  - Geographical representativeness
  - Result

School-based immunization

- Is there a school entry requirement? No
  - If no, do schools check immunization status at enrolment? Yes
  - What vaccines are required/checked? Primary and Secondary
  - Is routine vaccination given at school? Yes
    - Which vaccination? HPV
    - If yes, is this part of a comprehensive school-health program that delivers other health interventions? Yes

Measles and rubella elimination

- Confirmed measles case rate* (per 1 million population): 9.0
  - Year of MCV1 introduction: 1974
- Confirmed rubella case rate* (per 1 million population): 0.0
  - Year of MCV2 introduction: 1988
- Discarded as non-measles rate* (Target: ≥ 2 per 100 000 population): 4.5
  - Year of RCV introduction: 1988
- % suspected cases with adequate specimens* (Target: ≥ 80%): 95.8%
- Surveillance conducted for CRS: Yes
  - Antigens, year and target population of last SIA
  - Result
  - Measles cases with unknown source of infection*: 0
    - Number vaccinated (SIA coverage): 27 161 (98%)

Hepatitis B control

- Year HepB3 vaccine introduced nationwide: 1988
  - Systems to deliver HepB vaccine birth dose: Hospitals
- Year HepB birth dose introduced: 1988
  - HBsAg results assessed for blood donors: Yes
- HepB birth dose (within 24 hours) coverage: 99%
  - Policy for screening of pregnant women: Yes
- HepB birth dose (within and after 24 hours) coverage: 99%
  - Policy to vaccinate health care workers: Yes