

Re-Established Transmission Countries

ANGOLA

Immunization					Surveillance					
12-month immunization indicator			National		Immunization Performance	Percent of states / provinces with:		Virology	Surveillance Performance	
District: missed children in SIAs*	%	Province: % missed children in SIAs**	Overall 12-month immunization indicator	POL3		0-dose	NPAFPR >= 2***			Adeq. Stools >= 80%***
Weak		Intermediate	Weak	92	13.7	Weak	100	88.9	Some	Intermediate

* 12-month district immunization indicator: Based upon Angola's 2011 MPI for immunization but using data from SIAs conducted during the previous 12 months (8 Sept 2010 – 7 Sept 2011). Additional details in the 3rd Quarter 2011 Progress Report of the GPEI Process Indicators for 2011 and Methods Supplement.

**12-month provincial immunization indicator: Based upon SIAs conducted in all provinces in Angola except the provinces of Luanda, Benguela, and Kwanza Sul (MPI provinces) during the previous 12 months (8 Sept 2010 – 7 Sept 2011). The provinces of Luanda, Benguela, and Kwanza Sul were omitted given their consideration in the 12-month district immunization indicator. Additional details in Methods Supplement.

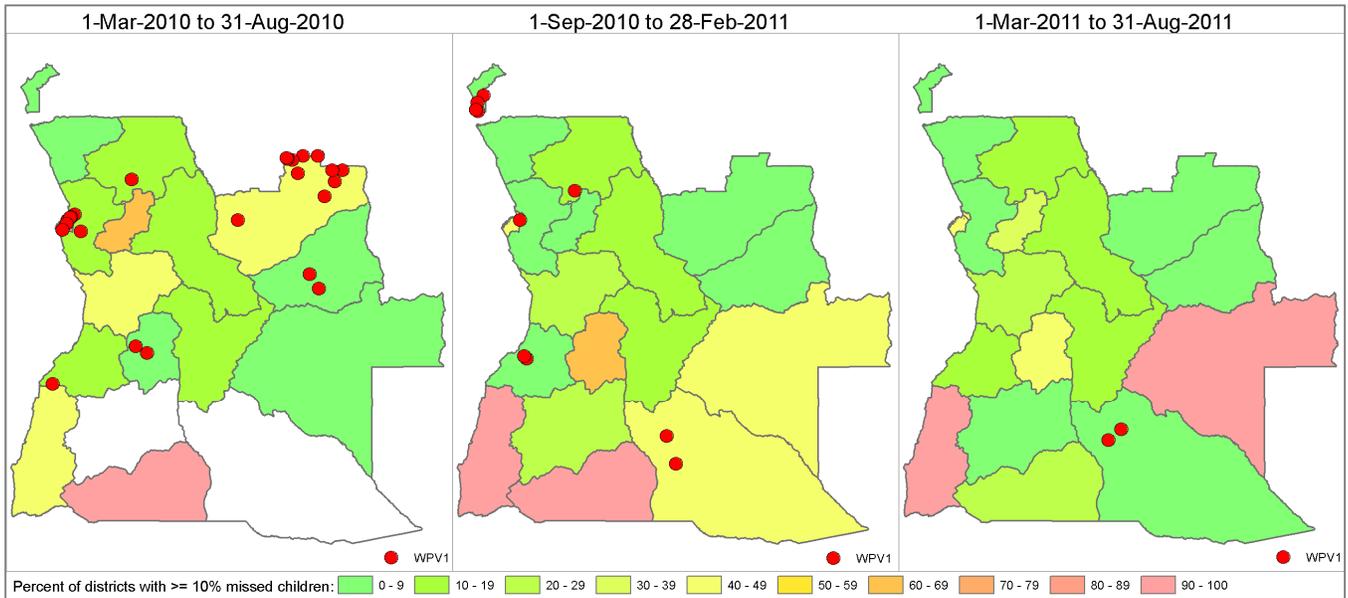
*** based on the upper 90% confidence limit

Angola failed to interrupt re-established transmission before end-2010 and has maintained a high risk of failure to detect and interrupt WPV transmission by the end of 2011. In Angola in 2011 as of the time of this report, there have been 4 confirmed cases of WPV1, all from one district in Kuando Kubango Province; the date of onset of the latest case was 27 March. This is in comparison to 2010 when there were 33 confirmed cases of WPV1 from nine different provinces. The Strategic Plan MPI addresses districts in the provinces of Luanda, Benguela and Kwanza Sul, which were foci of transmission in 2009–2010. In 2010 and 2011 other provinces within the country had WPV circulation; thus, risk assessments in 2011 include analysis of SIA monitoring data from all provinces where available. SIA monitoring data aggregated at the provincial level indicate apparent overall improvement in recent SIA implementation; however, for most monitored districts, the proportion of missed children was above the 10% MPI criterion for some of the SIAs. Overall immunization performance is assessed as weak. Five SIAs (4 on the national level) in the last 12 months used type 3-containing OPV, mitigating the risk of WPV3 transmission if introduced. A high proportion of NPAFP cases (8.9%) are lacking vaccine dose history, limiting the quality of NPAFP dose data. The high 0-dose (13.7%) and low 4+ (30.1%) proportions among children with NPAFP are inconsistent with the reported Pol3 of 92%. Surveillance performance is intermediate; although the sub-national NPAFP rates would suggest strong surveillance, there are some limitations in specimen collection. The virologic data indicate that some surveillance gaps exist which could be due to lapses in AFP detection below the province level or among population subgroups (e.g., migrants), or in case investigation.

Current Quarter	2nd Qrt. Report
Overall risk of failure to detect and interrupt WPV transmission	Overall risk of failure to detect and interrupt WPV transmission
High	High

GPEI	end-2010		<10% missed children in all districts of Luanda, Benguela, and Kwanza Sul during each SIA
MPI	end-2011		<10% missed children in all districts of Luanda, Benguela, and Kwanza Sul during each SIA

Angola: Wild poliovirus type 1 (WPV1) cases with onset 1 March 2010 – 31 August 2011 and results of independent monitoring for Supplemental Immunization Activities (SIAs) conducted during 1 March 2010 – 31 August 2011 by six month periods*



*For each six-month period for each district in the country where data were available, independent monitoring data from all SIAs conducted were pooled, and the total number of missed children was divided by the total number of children observed to obtain an overall percentage of missed children for the district for the period. Then for each province in the country, the percentage of districts with $\geq 10\%$ missed children was calculated. Color coding was assigned to ranges of percentages as indicated in the map above. For the period 1 March – 31 August 2010, data were available from 3 National Immunization Days (NIDs) and 4 Sub-national Immunization Days (SNIDs), for the period 1 September 2010 – 28 February 2011, data were available from 2 NIDs and 1 SNID, and for the period of 1 March – 31 August 2011, data were available for 3 NIDs and 1 SNID. Not all districts were monitored in a given SIA, and different districts could have been monitored in different SIAs. To be included in the analysis, a district had to have monitoring data for at least one SIA during the six-month period. Provinces with white color coding had no monitoring data for analysis. WPV1 cases are mapped at the district level.

For Angola for the previous consecutive 6-month intervals, the national pooled percent of districts with $\geq 10\%$ missed children was 36.2% for the period 1 March – 31 August 2010, 29.5% for the period 1 September 2010 – 28 February 2011, and 24.0% for the period of 1 March – 31 August 2011 suggesting an overall trend towards fewer missed children during SIAs. When analyzed at the provincial-level, there is not a consistent trend.