SUPPLEMENTARY TABLE. Characteristics of rubella supplementary immunization activities,\* by country and year -- World Health

Organization South-East Asia Region, 2013–2021

| Country           | Year   | Rubella-<br>containing<br>vaccine<br>used | SIA type              | SIA extent            | Target age<br>group | Population<br>reached in<br>targeted age<br>group | Administrative coverage, % |
|-------------------|--------|---|-----------------------|-----------------------|---------------------|---|----------------------------|
| Bangladesh        | 2014   | MR  | Catch-up⁺             | National              | 9 m–15 y            | 53,644,603  | >100§                      |
|                   | 2016   | MR  | Mop up¶               | Subnational           | 9 m–5 y             | 100,863   | >100§                      |
|                   | 2017   | MR  | Follow-up**           | Subnational           | 9 m–5 y             | 1,553,791   | >100§                      |
|                   | 2017   | MR  | Mop up¶               | Subnational           | 6 m-<15 y           | 136,114   | >100§                      |
|                   | 2017   | MR  | Mop up¶               | Subnational           | 6 m-<15 y           | 353,790   | >100§                      |
|                   | 2020   | MR  | ORI <sup>††</sup>     | Subnational           | 6 m–10 y            | 293,017   | >100§                      |
|                   | 2020   | MR  | Follow-up**           | National              | 9 m–10 y            | 36,751,022  | >100§                      |
| Bhutan            | 2016   | MR  | High Risk             | Subnational           | Not<br>Specified    | 418   | 100                        |
|                   | 2017   | MR  | Follow-up**           | National              | 9 m–40 y            | 263,337   | 99                         |
|                   | 2018   | MR  | Catch-up <sup>†</sup> | National              | 9 m–40 y            | 14,698  | 15                         |
|                   | 2019   | MR  | Selective             | High risk             | 9 m–45 y            | 658   | 100                        |
| Burma             | 2015   | MR  | Catch-up <sup>†</sup> | National              | 9 m–15 y            | 13,202,239  | 94                         |
| (Myanmar) ¶¶      | 2019   | MR  | Follow-up**           | Subnational           | 9 m–15 y            | 4,067,642   | 96                         |
| DPR Korea         | 2019   | MR  | Catch-up <sup>†</sup> | National              | 9 m–14 y            | 5,855,545   | 100                        |
|                   | 2019   | MR  | Catch-up⁺             | National              | 15–18 y F           | 533,115   | 99                         |
| India             | 2015   | MR  | Mop up¶               | Sub<br>national       | 9 m–15 y            | 890,070   | 97                         |
|                   | 2017   | MR  | Catch-up <sup>†</sup> | Roll over national*** | 9 m–15 y            | 65,644,000  | 97                         |
|                   | 2018   | MR  | Catch-up <sup>†</sup> | Roll over             | 9 m–15 y            | 176,146,000                                       | 97                         |
|                   | 2019   | MR  | Catch-up <sup>†</sup> | Roll over             | 9 m–15 y            | 61,237,000  | 100                        |
| Indonesia         | 2017   | MR  | Catch-up <sup>†</sup> | Roll over             | 9 m–15 y            | 35,307,150  | 101§                       |
|                   | 2017   | MR  | Catch-up <sup>†</sup> | Roll over             | 9 m–15 y            | 23,453,880  | 101§                       |
|                   | 2021   | MR  | Catch-up <sup>†</sup> | National              | 9 m-10y             | 16,555,756  | 61.2                       |
|                   | 2021   | MR  | Catch-up <sup>†</sup> | National              | 9 m–5 y             | 8,593,133   | 91.1                       |
| Maldives          | 2017   | MR  | Catch-up <sup>†</sup> | National              | 8 y-14 y            | 1,639   | 77                         |
|                   | 2017   | MR  | Catch-up <sup>†</sup> | National              | 15 y-25 y           | 46,613  | 76                         |
| Nepal             | 2015   | MR  | Follow-up**           | Subnational           | 6 m–5 y             | 455,313   | 91                         |
|                   | 2016   | MR  | Follow-up**           | National              | 9 m–59 m            | 2,526,938   | >100§                      |
|                   | 2020   | MR  | Follow-up**           | National              | 9 m–59 m            | 3,039,420   | >100§                      |
| Thailand          | 2015   | MR  | Follow-up**           | National              | 2.5 y-7 y           | 2,236,559   | 88                         |
|                   | 2018   | MR/MMR                                    | Selective             | National              | 9 m–12 y            | 130,137   | 66                         |
|                   | 2019   | MR/MMR                                    | Selective             | National              | 1–12 y              | 460,490   | 74                         |
|                   | 2020   | MR  | High risk             | National              | 20 y-40 y           | 198,769   | 44                         |
|                   | 2021   | MR  | High risk             | Subnational           | 20 y-40 y           | 57,602  | 15                         |
| Timor-Leste       | 2015   | MR  | Catch-up <sup>†</sup> | National              | 6 m–15 y            | 486,777   | 97                         |
|                   | 2018   | MR  | Follow-up**           | National              | 9 m–59 m            | 135,788   | 95                         |
| South-East Asia F | Region |   |                       |                       |                     | 514,373,886                                       | 91                         |

**Abbreviations**: MR = measles and rubella vaccine; MMR = measles, mumps, and rubella vaccine; m = month; y = year; F = Female. Data available at <a href="https://immunizationdata.who.int/">https://immunizationdata.who.int/</a>

<sup>\*</sup> Rubella SIAs use MR or MMR vaccine.

- <sup>†</sup> A catch-up SIA targets all children aged 9 months–14 years to eliminate susceptibility to rubella virus in the general population and is followed by introduction of rubella vaccine.
- § Values >100% indicate that the intervention reached more persons than the estimated target population. The numerator was the total children vaccinated, and the denominator was the estimated target calculated for vaccination.
- ¶Mop up SIAs are periodic intensification of routine immunization where a subset of population in a given year that has missed vaccine during routine immunization are given rubella vaccine to close the immunity gap.
- \*\* A follow-up SIA is a periodic SIA that targets all children born since the last SIA. Generally, follow-up SIAs are conducted nationwide every 2–4 years and target children aged 9–59 months; the goal of follow-up SIAs is to eliminate any rubella or measles virus susceptibility that has developed in recent birth cohorts and to protect children who did not respond to the first rubella vaccination.
- <sup>††</sup> ORI is outbreak response immunization conducted in response to a laboratory confirmed outbreak of rubella with an aim to prevent further transmission of the virus and stop the outbreak at the earliest.
- §§ A high-risk approach of SIA was conducted in Bhutan, targeting elderly population who might have missed previous vaccination of rubella in childhood and could remain susceptible; this was an intensified effort to accelerate rubella elimination in the country.
- ¶¶ MMWR uses the U.S. Department of State's short-form name "Burma"; WHO uses "Myanmar."
- \*\*\* Roll over national indicates that the SIA was conducted at national level but took multiple years to complete.