

Dear polio eradication supporter,

Today marks one year since the Global Vaccine Summit in Abu Dhabi, where global leaders signaled their support for the new **2013-2018 Polio Eradication and Endgame Strategic Plan** by pledging \$US 4 billion for its implementation.

Since then, the eradication effort has made significant progress in the face of serious challenges: WHO's **South-East Asia Region was certified polio-free**, meaning that transmission of wild poliovirus has been interrupted in this bloc of 11 countries stretching from Indonesia to India. This achievement marks a significant leap forward in global eradication as, for the first time in history, a majority of the world's population (80%) now lives in certified polio-free regions. Vaccinators in Nigeria are making breakthroughs reaching children with vaccines, bringing the country's case counts to a historic low.

However, serious barriers continue to prevent parents living in the final reservoirs of polio in northwest Pakistan from accessing vaccines for their children – putting at risk the health of Pakistani children and children living in other at-risk countries, as well as the investments made by all the countries and the GPEI in the eradication effort during its 25 years.

New outbreak cases, including those [recently reported](#) from Iraq in the Middle East outbreak and those in Equatorial Guinea linked to the Cameroon outbreak, **reinforce the urgency of ending polio transmission in the final reservoirs and of raising immunization rates in countries at high risk for re-infection.**

This final phase of eradication is by far the hardest, but with innovative approaches and the help of new partners, the global effort is keeping on track to achieve a polio-free world by 2018.

Click [here](#) for a fact sheet on the latest state-of-play.

Progress Against the Strategic Plan

Detect and Interrupt Poliovirus

Reaching at-risk children across the Middle East

On 30 March, Iraq reported its first polio case linked to the Middle East outbreak. The following week, partners [launched vaccination campaigns](#) in Syria, Iraq and Egypt, aiming to reach more than 20 million children over five days. Spread outside Syria has always been a major risk given the large-scale population movements across the region, which is why campaigns have targeted seven countries in the Middle East from the beginning of the outbreak.



Since October, vaccinators have made progress reaching the vast majority of children during campaigns, but pockets of children in the hardest-to-reach locations – including conflict zones in Syria and remote areas of Iraq – remain unvaccinated. The programme is working urgently with local partners to help ensure all children can access polio vaccines. Read more [here](#).

Finding a needle in a haystack

As the latest outbreaks prove, strong surveillance systems are crucial to rapidly detect and respond to circulating poliovirus before outbreaks grow.

Finding polio cases, however, presents a serious challenge: a number of diseases can result in the same type of paralysis, and polio often circulates silently if countries lack the systems to detect it. The dangers of surveillance gaps are evident in Cameroon, where prolonged virus transmission went undetected and subsequently spread to Equatorial Guinea.



every last child

Wild poliovirus in 2014

Global Total: 62 (22) ↑
Global WPV1: 62(22) ↑
Global WPV3: 0 (0)

Endemic: 53 (22) ↑

Afghanistan: 3 (2) ↑
Nigeria: 1 (14) ↓
Pakistan: 49 (6) ↑

Importation Countries: 9 (0) ↑

Equatorial Guinea: 3 (0) ↑
Iraq: 1 (0) ↑
Cameroon: 3 (0) ↑
Syria: 1 (0) ↑
Ethiopia: 1 (0) ↑

As of **22 April 2014**. Numbers in brackets represent data this time in 2013.

[Current case map](#)

In response to these challenges, the polio programme has worked to build one of the most extensive disease surveillance networks ever created. Last year alone, the WHO conducted an exhaustive investigation of more than 100,000 acute flaccid paralysis (AFP) cases to identify the 407 cases caused by polio. Environmental surveillance, which involves collecting and testing sewage samples for signs of silently circulating polio, helped detect poliovirus before it caused any cases in Israel and Egypt last year.

In line with the Strategic Plan, environmental surveillance is being expanded. In Africa, two polio laboratories (Nigeria and Kenya) are already performing environmental sampling in their host countries in the framework of the GPEI. Additional laboratories in Senegal, Cameroon and South Africa are being assessed for suitability to carry out testing of environmental samples. New labs are also being assessed in the Eastern Mediterranean Region to support expanded environmental surveillance across Afghanistan, Pakistan, Iraq, Jordan and Sudan.



Read more about how surveillance works [here](#).

Strengthen Immunization Systems & Withdraw OPV

Introducing IPV in the countries that need it most

Eleven countries, including Afghanistan, Ethiopia, Nigeria and Yemen, have now submitted their first round applications to the GAVI Alliance for financial support to introduce inactivated polio vaccine (IPV). This is an important step toward the Endgame Plan's goal of introducing IPV in all oral polio vaccine (OPV)-only using countries by the end of 2015 in advance of the phased removal of OPVs. Read more [here](#).

SAGE reviews progress towards a polio-free world

Convening this month in Geneva, the Strategic Advisory Group of Experts on immunization (SAGE) reviewed the current global epidemiology of polio transmission, and progress toward setting an eventual confirmed date for the global withdrawal of trivalent OPV and change to bivalent OPV in routine immunization. Additionally, SAGE endorsed updates to the existing WHO vaccination recommendations for travelers from polio-infected countries in International Travel and Health (ITH). Read more [here](#).

On the Horizon: May/June

The 67th World Health Assembly will convene 19-24 May, accompanied by a technical briefing side event on IPV introduction on 22 May. The technical briefing will provide an update on progress toward IPV introduction, share information on available support for IPV introduction globally and present the roadmap to the 2015 WHA discussion on the timing of a global withdrawal of type 2 OPV.

This WHA will also mark the 40th birthday of the Expanded Programme on Immunization. Celebrations will include a cocktail reception at the WHA, a video on key moments of 40 years of immunization around the world and publication of an article in The Lancet, among others.

The Independent Monitoring Board (IMB) will gather 6-7 May to review the programme's progress.

Join us this week in celebrating **World Immunization Week**. Support this year's theme "Are you up-to-date?" by [sharing](#) stories about the importance of vaccination with your networks.

Polio-free SEARO:

Check out the archived [webcast](#) and great [stories](#) about WHO's South-East Asia Region's polio-free certification last month.

Funding updates:

Click [here](#) for the updated GPEI financing page, including the latest on the status of Global Vaccine Summit commitments and 2014 budget details.

Canada committed an additional [C\\$ 3 million](#) to eradication efforts in the Horn of Africa as well as signed agreements with WHO and UNICEF for C\$ 61.5 million against their C\$ 250 million Vaccine Summit commitment.

Monaco donated [€ 170,000](#) to polio eradication operations worldwide and in particular in Niger.

Oman (US\$ 3 million), **UK** (£ 800,000) and **Chile** (US\$ 30,000) have provided specified support for the Middle East outbreak response.

Further to their Vaccine Summit commitments, the **European Commission** (€5 million), the **Crown Prince of Abu Dhabi** (US\$ 12 million) and the **Swiss Philanthropy Foundation/Shefa Fund** (US\$ 1.5 million) disbursed funds to support the Horn of Africa outbreak response.

The **Bill & Melinda Gates Foundation** released US\$ 30 million to WHO for global activities.