Dear Colleagues,

Getting the world over the finish line for polio eradication requires innovative strategies. High-quality, door-to-door immunization campaigns and continuous community-protected vaccination to reach missed children, combined with strong surveillance, have helped reduce polio in Afghanistan and Pakistan. Barriers to immunizing missed children persist, and health camps help address these challenges, build community trust of health care workers, deliver life-saving vaccines, and provide other needed health services to high-need populations. UNICEF, Rotary International’s PolioPlus program, and the Bill and Melinda Gates Foundation work with governments and other partners to sponsor health camps.

In areas at high risk for polio transmission, Pakistan holds health camps to provide vaccines to children and health care and information to women from the most remote communities. Camps are located in polio reservoir areas in the northwest, west, and south, based upon local transmission trends and geographic distribution of high-risk communities. Pakistan has conducted more than 1,800 health camps and has provided health services to nearly 400,000 people, including 120,000 children who had previously missed vaccination. This service, complemented with other effective strategies conducted by Pakistan’s national program, has resulted in only 11 cases reported this year to date, a decline from 75 cases in the same period of 2014.

Reaching chronically missed children and delivering health services remain challenging in Afghanistan. The country’s 2015 Demographic and Health Survey indicates that over one quarter of children age 12 months to 23 months have not received their first dose of pentavalent vaccine, and 13 percent of children have never received any vaccinations. PolioPlus supports mobile outreach in areas with limited accessibility and provides hygiene kits to encourage mothers to attend health care facilities in areas of high polio risk. To reduce the number of missed children, local communities conduct house visits to vaccinate against polio in poorly performing districts, immunize children at transit points close to inaccessible areas, and vaccinate children who were not at home during an initial house visit.

Children living in hard-to-reach areas in northern Nigeria were often missed by vaccination services. Additionally, parental refusals of vaccines posed significant challenges. Nigeria held health camps to share vaccine information with parents and caregivers and offer other health services such as blood pressure screening, malaria treatment, and vaccination. Despite the insecurity in Nigeria’s Borno and Yobe states, close to 200,000 children received vitamin A supplements and de-worming tablets in the first six months after health camps began. Since health camps were first initiated in Nigeria, millions of children have been immunized, and the number of high-risk districts for polio transmission declined 60 percent in 2015 through this approach.

Health camps have helped to engage communities, build trust and acceptance of health services, and increase immunity. We need to reach more missed children faster to get over the finish line of polio eradication.

Thank you for all you do to protect the health of children.

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