What I would like to cover in the next few minutes

- Progress on Year 1 of the 2013-2018 strategic plan
- GPEI Governance
Strategic Plan - Key objectives & near term targets

- **Stop WPV**
  - Interrupt wild poliovirus transmission

- **Withdraw OPV & Strengthen Immunization Systems**
  - One dose of IPV introduced by 2015, and Type 2 OPV withdrawn globally by 2016

- **Leave a Legacy**
  - Legacy plan developed by end-2015

- **Certify Eradication**
  - Global certification by 2018
Are we getting close to stopping polio?

Wild Poliovirus Cases\(^1\), Previous 12 Months\(^*\)

Data in WHO HQ as of 22 October 2013

\(^1\)Excludes cases caused by vaccine-derived polioviruses and viruses detected from environmental surveillance.

\(^2\)Case counts from Jan 1 – October 29 for both 2012 and 2013

- No type 3 virus globally since Nov 2012
- 45% decline in endemic virus
- No endemic transmission in AFG since Nov 2012
- EGY, ISR, WB, GZA Strip +ve sewage
- Horn of Africa re-infected
- New cases in Syria

Cases Year to Date
- 2013: 322
- 2012: 177
Horn of Africa WPV and cVDPV, previous 6 months*

Total WPV cases:
- South Sudan: 3 (24 Aug 2013)
- Ethiopia: 6 (19 Sep 2013)
- Kenya: 14 (14 Jul 2013)
- Somalia: 172 (14 Sep 2013)

*by calendar week
Data in WHO/HQ as of 22 Oct 2013
Other Recent Outbreaks in Africa

- Niger
  - Niger case last year remained an isolated event due to rapid immunization response

- Cameroon
  - Case identified in Cameroon October, 2013
  - Historically, the program has been successful in responding to cases in Cameroon and limiting spread
    - 14 outbreaks in the last decade
    - the most common number of cases in each outbreak = 1
    - However, genetic sequencing suggests strain has been circulating undetected since 2011 – most closely linked to a case in Chad
Israel

- WPV found in environmental samples across Israel
- No cases of paralytic polio have occurred, likely due to high IPV coverage.
- The government is conducting a series of OPV campaigns to interrupt transmission
- Early reports suggest impact of first campaign, but additional data is needed.
### Response planned for Syria Outbreak

#### OPV supplementary immunization activities (SIA)

Tentative dates and OPV requirements (in millions)

<table>
<thead>
<tr>
<th>COUNTRY</th>
<th>AREAS</th>
<th>DATES (TO BE CONFIRMED)</th>
<th>27 Oct-02 Nov</th>
<th>03-09 Nov</th>
<th>10-16 Nov</th>
<th>17-23 Nov</th>
<th>24-30 Nov</th>
<th>1-7 Dec</th>
<th>8-14 Dec</th>
<th>15-21 Dec</th>
</tr>
</thead>
<tbody>
<tr>
<td>Syria</td>
<td>Deir-al-zour all provinces</td>
<td>27/10, 25/11, 15/12</td>
<td>0.1M</td>
<td>3M</td>
<td>3M</td>
<td>3M</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Iraq</td>
<td></td>
<td>27/10, 25/11</td>
<td>7.2M</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>7.2M</td>
<td>0.4M</td>
<td>0.4M</td>
</tr>
<tr>
<td>Lebanon</td>
<td></td>
<td>15/11, 15/12</td>
<td>0.4M</td>
<td>0.4M</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Turkey</td>
<td>12 SE province</td>
<td>3/11, 15/12</td>
<td>1M</td>
<td></td>
<td></td>
<td></td>
<td>1M</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Palestine</td>
<td></td>
<td>3/11, 15/12</td>
<td>0.48M</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0.48M</td>
<td>0.48M</td>
<td></td>
</tr>
<tr>
<td>Jordan</td>
<td></td>
<td>3/11, 15/12</td>
<td>1.1M</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1.1M</td>
<td></td>
<td>2.8M</td>
</tr>
<tr>
<td>Egypt</td>
<td>To be confirmed</td>
<td></td>
<td>13M</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* Underlined numbers indicate that OPV supply has already arrived in country

#### Map

- **SUSPECTED POLIO CASES**
- **REFUGEE CAMPS**
- **IDP CAMPS**
- **Proposed area for Bivalent OPV (bOPV)**
- **Proposed area for Trivalent OPV (tOPV)**
- **Suspected outbreak area**
Afghanistan & Pakistan

Wild and Circulating Vaccine-derived Poliovirus\(^1\) in Asia, previous 4 months*

**Newly reported cases**
- **Pakistan** (3 WPV1 cases)
  - 26 Sep FATA WAZIR-N
  - 26 Sep FATA FR BANNU
  - 01 Oct FATA FR BANNU
- **Afghanistan** (1 WPV1 case)
  - 19 Sep KUNAR NARGAN

*23 Jun–22 Oct 2013

<table>
<thead>
<tr>
<th>Previous 4 months - Asia</th>
<th># Polioviruses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>53</td>
</tr>
<tr>
<td>WPV1</td>
<td>32</td>
</tr>
<tr>
<td>cVDPV2</td>
<td>21</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th># Infected</th>
<th>Provinces</th>
<th>Districts</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>6</td>
<td>12</td>
</tr>
<tr>
<td>WPV1</td>
<td>5</td>
<td>10</td>
</tr>
<tr>
<td>cVDPV2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

\(^1\)Excludes viruses detected from environmental.

New cases reported this week.
Underline: newly infected area in 2013 (serotype / intra-type specific)

- Infected country
- Wild virus type 1
- Infected province
- cVDPV2
- Wild virus type 1 (Advance notification)

Data in WHO/HQ as of 22 Oct 2013
Afghanistan

Poliovirus cases, SIA results and OPV status (6-35 months npAFP cases)
Afghanistan - 11 low performing districts – Southern Region, Rolling 12 months*

WPV + cVDPV cases, previous 12 months*

Kandahar & Helmand - Poliovirus + SIAs, previous 12 months*

Afghanistan - 11 LPDs - LQAS results, 2013

11 LPDs - OPV status of np AFP cases, 6-35 months

Nigeria – Classification of AFP cases by priority zone, previous 6 months*

North West (Kebbi, Sokoto, Zamfara)

North East (Borno, Yobe)

North Central (Kano, Jigawa, Katsina)

Bauchi & Gombe

*by calendar week (week of onset)
Data in WHO/HQ as of 22 Oct 2013
Wild Poliovirus Paralyzed Children, last 6 months

All outbreaks can be linked to Nigeria and Pakistan – we need to strike the right balance between getting the job done in those countries and tackling vulnerability in countries that are polio-free but have huge immunity gaps.

1 Excludes viruses detected from environmental surveillance and vaccine derived polioviruses.
IPV Introduction: One joint-work plan guides activities across organisations
## Prioritization of IPV Introductions

<table>
<thead>
<tr>
<th>Tier</th>
<th>Description</th>
<th># of countries</th>
<th>% of OPV birth cohort</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tier 1</td>
<td>WPV endemic countries OR countries that have reported a cVDPV2 since 2000¹</td>
<td>14</td>
<td>61% (38% attributable to India and China)</td>
</tr>
<tr>
<td>Tier 2</td>
<td>Countries who have reported a cVDPV1/cVDPV3 since 2000¹ OR large/medium² sized countries with DTP3 coverage &lt;80% in 2009, 2010, 2011 as per WUNIC</td>
<td>19</td>
<td>11%</td>
</tr>
<tr>
<td>Tier 3</td>
<td>Large/medium² countries adjacent to Tier 1 countries that reported WPV since 2003 OR countries that have experienced a WPV Importation since 2011</td>
<td>14</td>
<td>11%</td>
</tr>
<tr>
<td>Tier 4</td>
<td>All other OPV only using countries</td>
<td>77</td>
<td>17%</td>
</tr>
</tbody>
</table>

¹ Source: WUNIC

² Medium refers to countries with populations between 10 and 100 million people.
Legacy Planning: Activities Timeline

**Milestones:**
- Regional Committee Meetings
- WHO EB January
- WHA May
- Regional Committee Meetings
- WHO EB January
- WHA May

**Activities:**

- **Developing the evidence base:**
  - Map Assets, Lessons, Knowledge
  - Gather feedback on assets, lessons, knowledge and refine
  - Establish Minimum Essential Functions for Mainstreaming
    - To establish what MUST be maintained post-2018 to protect a polio-free world (surveillance, containment, etc.)
  - Planning Process Consultations
  - Asset Mapping & Lessons Learned Consultations
  - Framework & Country Plan Consultations
  - To inform framework and plan development

- **Stakeholder Consultations:**
  - Formative interviews
  - Global Legacy Framework Development
  - For WHA approval

- **Communicate with Key Stakeholders**

**Today:**
- Report to GPEI & EB
- To understand how polio program resources/knowledge can benefit other health priorities
So – my scorecard

- Stopping polio. We are not as far along as I hoped we would be heading into 2014 – but I think GPEI has the right strategies to interrupt transmission in the endemic countries, and stop outbreaks when they happen.

- We are building the right kind of coalition and consensus around IPV introduction, but we need to do more to leverage the polio infrastructure to strengthen immunization systems.

- Work on Objectives 3 and 4 (legacy planning and containment) has begun.

- The program is in better financial state than ever before, but the generous pledges made in Abu Dhabi at the Global Vaccine Summit need to be converted to cash flowing to the FRR.

- GPEI is committed to a more transparent, responsive governance structure.
POB Governance

- **Improve performance accountability and effectively assess risk**
  - Track progress against the Strategic Plan scorecard
  - Review monthly reports from the Polio Steering Committee, including updates on security framework, budget, resource mobilization, program strategy, and management effectiveness

- **Strong, active leadership at the highest levels of our respective organizations**
  - In-person meetings once or twice a year
  - Bimonthly conference calls to track progress
  - Increased communication with donor governments and at-risk countries

- **Greater transparency**
  - Publically available meeting notes
  - Inclusion of representatives from key stakeholders at in-person POB meetings
September 26 POB Meeting Action Points

- POB members acknowledged that creating a heavy governance structure for GPEI would not add value to the initiative at this time, however, would like to support increased donor engagement
  - POB will develop and review options for increased donor engagement at its next call
  - POB Chair will communicate quarterly communications to donors and present to PPG

- Update and review a scorecard and risk registry at all upcoming meetings to identify key areas for program adjustment

- Advocate for continued strong leadership for the Nigeria program and work with their technical teams to develop a single recommendation to the Nigerian Government

- Continue monitoring of the functioning of Pakistan’s Prime Minister’s Polio Monitoring Cell and provide government support as required

- Continue to engage GAVI board members around the importance of IPV introduction
  - Align next in-person meeting with the GAVI Board meeting in June
  - Ensure Pakistan receives support for creating an IPV introduction plan

- Continue to support and track the strengthening of routine immunization