CHAIRS’ STATEMENT
High Level Meeting of the Global Polio Partners Group (PPG)
Friday, 12 June 2015

On 12 June 2015, the semi-annual high-level meeting of the Polio Partners Group of the Global Polio Eradication Initiative (GPEI) was convened in Geneva at the World Health Organization headquarters. The meeting was attended by ca. 75 participants, including representatives of GPEI stakeholders from governments at both the ambassadorial and expert level from capitals and the Permanent Missions in Geneva; international organizations; core GPEI partners; NGOs and foundations; and other stakeholders. Some stakeholders participated via teleconference.

The main objective of the meeting was to provide an overview to the PPG of the status of the polio eradication effort and summarise the results and programmatic and financial implications of the GPEI Mid-term Review (MTR).

The meeting started with the election by acclamation of H.E. Ms. Carole Lanteri, Ambassador and Permanent Representative of the Principality of Monaco to the United Nations in Geneva, as Co-Chair of the PPG representing a Member State. She succeeds H.E. Ms. Elissa Golberg, former Ambassador and Permanent Representative of Canada to the United Nations in Geneva. The incoming and outgoing Co-Chairs both emphasized the importance and unique role of the PPG in terms of oversight and accountability of the polio eradication programme. PPG stakeholders praised the leadership of Ambassador Golberg during her tenure as Co-Chair and welcomed Ambassador Lanteri as the new Co-Chair working with retired Ambassador John Lange of the United Nations Foundation.

Dr. Thomas Frieden, Director of the U.S. Centers for Disease Control and Prevention, in his capacity as Chair of the Polio Oversight Board (POB), addressed the audience through a recorded video message. Dr. Frieden underscored the importance of the invaluable input, strategies and ideas the PPG provides to the POB. He further expressed a commitment to budget transparency, increased outreach to key stakeholders and the promotion of political commitment. He stressed the need for ensuring adequate certification levels for poliovirus surveillance, improving supplemental immunization activities, keeping immunity levels high and reaching chronically missed children. He encouraged all stakeholders to get ready to introduce inactivated poliovirus vaccine (IPV) and to switch from tOPV to bOPV within the expected timeline (April 2016), as well as to keep working on the plans for containment of virus samples and vaccines and on the GPEI legacy plan, as a basis for building public health infrastructure and capacity. He described polio eradication as the ultimate in health equity and sustainability.
In assessing the latest developments on the polio programme, as reflected by the Mid Term Review, Dr. Hamid Jafari, Chair of the GPEI Strategy Committee, described the strategic implications and Dr. Chris Elias, Chair of the GPEI Finance and Accountability Committee, provided an update on the financial situation. The trajectory toward polio eradication is positive in Afghanistan and Pakistan, as well as in Nigeria, which has been polio free for the last 10 months.

The four scenarios prepared by the Finance and Accountability Committee have been modelled taking into account different timelines on the interruption date of wild poliovirus transmission in endemic countries and assumptions of cost ranges affected primarily by post-interruption and post-certification. This important discussion will continue in the next four months. The POB in-person September meeting will make a decision on the most likely financial scenario, which will ultimately depend primarily on the status of progress in stopping wild poliovirus transmission in endemic countries. Once the GPEI knows precisely which financial scenario it faces, the financial scheme proposed in the Mid Term Review will have to be updated and a resource mobilization strategy will be tailored accordingly, taking into account the main cost drivers: campaign scheduling and social mobilization, technical assistance to countries, quality improvement, IPV introduction and the switch from tOPV to bOPV. There is an opportunity to succeed in eradicating polio by the end of this year but much work still remains to be done.

During the high level meeting, PPG stakeholders:

- Expressed appreciation for the MTR Project Team’s engagement with the PPG during the drafting process and for the precise, detailed information received on progress towards GPEI objectives and the high degree of oversight devoted to strategic objectives 2 and 3, routine immunization and OPV withdrawal, and containment and certification, respectively. Stakeholders expressed a desire for engagement with SAGE and the Global Certification Commission to evaluate progress towards meeting objectives 2 and 3 of the Endgame Plan.

- Strongly supported IPV introduction and the switch from tOPV to bOPV.

- Stressed the need for overall coordination and cooperation among all stakeholders involved in containment and certification, while requesting updated and accurate information on the current implementation of this objective, its potential delay and financial gaps.

- Underscored the importance of the role played by countries in achieving and maintaining the polio endgame as a strategic priority at the national level and the need to reinforce a sense of national ownership.

- Thanked the Finance and Accountability Committee for its work showing four financial scenarios, presenting a clear view and a great level of precision of the challenges ahead. Stakeholders looked forward to learning of the POB’s September 2015 decision on which financial scenario is most likely and to reviewing GPEI’s new resource mobilization strategy in the fall.

- Expressed a sense of urgency with regard to legacy planning. Moreover, the PPG suggested countries need a detailed inventory of polio assets aimed at facilitating the process of legacy
planning as well as a clear roadmap to assist during the transition process. It was reiterated that GPEI legacy should be fully rolled-out in all areas to ensure GPEI infrastructure continues to benefit broader public health. The PPG further enquired on the kind of contribution it could make to the Legacy process, and asked for concrete examples of legacy in action by direct impact (e.g., in Sierra Leone, Nigeria and Nepal). The PPG decided that legacy planning and implementation are so important that the PPG should hold a workshop on legacy in the fall.

- Took note of the statements delivered by the representatives of the three polio endemic countries and commended the progress made, the efforts undertaken and their commitment, which has been translated into the adoption of innovative approaches to immunization activities as well as access improvements in hard to reach populations and persistently missed children. The PPG encouraged them not to be complacent and to continue pursuing polio eradication as a national priority accompanied by sound high level political engagement.

- Reiterated the importance of surveillance activities, even in polio free countries. The PPG flagged the need for constant and precise epidemiological information as one of the keys to succeed.

- Welcomed the broad support for the polio resolution (WHA 68.3) adopted at the 68th World Health Assembly and acknowledged the importance of achieving the timely and coordinated global switch from tOPV to bOPV, which will be a significant challenge for the international community. It also suggested having more inclusive conversations on this last matter.

- Discussed recommendation No. 6 in the 11th report of the GPEI Independent Monitoring Board calling on the PPG to endorse programmatic planning and budgeting based on what is needed to achieve eradication, not limited by what funds are available. The PPG took note of this recommendation but felt it was premature to formally endorse the recommendation. The PPG will discuss this further once the POB at its September meeting decides on the most likely financial scenario and stakeholders are informed accordingly.

- Welcomed the update on implementation of the Oversight and Management Review commissioned by the POB, in particular the establishment of the Finance and Accountability Committee and the Strategy Committee. It further welcomed the changes made within the GPEI structure aiming at improving its efficiency and effectiveness. Stakeholders took note of the recommendation made to the PPG and the POB to develop a revised Terms of Reference aligned with stakeholder needs and synchronized with the engagement of major donors in the POB or other governance structures. The PPG agreed to defer the discussion to the next meeting. In the meantime, the PPG will be open for discussion on this matter among PPG members and with the POB.

- Decided to hold an inclusive workshop at the programmatic and technical level on legacy planning and implementation in Geneva during the week of 19-23 October 2015, back to back with the SAGE meeting. PPG stakeholders as well as a broader list of those working in global health will be invited. The tentative date for the next high-level meeting of the PPG is
Friday, 23 October 2015. The PPG suggested that the Co-Chairs consider inviting WHO Regional Directors from AFRO and EMRO regions to participate in the meeting.

The PPG asked the two Co-Chairs to send Chairs’ Statement summarizing results of the meeting to the GPEI Polio Oversight Board, the GPEI Strategy Committee and the Independent Monitoring Board for their consideration and action as appropriate and asked the Co-Chairs to represent their views at the next POB meeting, to be held in New York in September 2015.