

Lake Chad Basin Situation Report on Polio Eradication November 2017



STATES/REGIONS IN THE LAKE CHAD BASIN

The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations. Source: Middle Africa, Administrative map, DFS, United Nations 2014.

Summary

The Lake Chad region continues supplementary immunization activities and disease surveillance efforts to guard against the continued threat of poliovirus transmission.

Completed Supplementary Immunization Activities (SIAs)
01/01/17 – 01/12/17:

COUNTRY	SIA: Bivalent Oral Polio Vaccine (bOPV)	SIA: Monovalent Oral Polio Vaccine 2 (mOPV2)	SIA: Inactivated Polio Vaccine (IPV) and mOPV2
CAMEROON	4	1	-
CENTRAL AFRICAN REPUBLIC (CAR)	4	-	-
CHAD	5	1	-
NIGER	4	1	-
NIGERIA	6	1	1

Key highlights

- The detection of wild poliovirus type 1 (WPV1) (Borno, Nigeria in 2016) and circulating vaccine-derived poliovirus type 2 (cVDPV2) (Borno and Sokoto provinces in Nigeria in 2016) continues to pose a risk to the neighbouring countries of the Lake Chad Basin.
- Vaccination campaigns went ahead during early November in all Lake Chad countries, vaccinating a total of over 19 million children with bivalent oral polio vaccine (bOPV).
- The second Outbreak Response Assessment (OBRA) for the Lake Chad countries was completed between 29 October - 10 November in the Central African Republic and in Nigeria, and by 15 November in Chad, Cameroon and Niger. The OBRA teams constructed a detailed picture of the outbreak response, resulting in clear next steps for each country.
- The Technical Advisory Group (TAG) on Polio Eradication was held from 22 - 23 November, assessing the Lake Chad region. The TAG made recommendations to improve the outbreak response, with particular emphasis on reaching islands within Lake Chad with vaccinations.

Immunization and surveillance response

Immunization

- In the Niger bOPV campaign of 4 November onwards, children in 29 health districts were vaccinated, including in Diffa and Zinder provinces, near the border with Nigeria. The campaign in Niger strengthened the immunity of over three million children under 5 years of age against polio.
- Vaccinators additionally used the polio infrastructure to provide Vitamin A and deworming tablets.

- Special attention was given to refugee camps and internally displaced people sites, as well as popular gathering places such as markets and bus stations.
- To facilitate the Niger campaign, vaccinators were provided with 11,000 pen markers to mark the fingers of children who received the polio vaccine, and 1,500 boxes of chalk to mark vaccination figures on the walls of homes. These represent just a small quantity of the wider materials that must be provided for a campaign to successfully go ahead.



A female community mobilizer teaches people in Yorro, Taraba state, Nigeria, about the benefits of vaccination. Photo Credit: UNICEF Nigeria.

- During the October immunization campaign in Cameroon the regional team obtained transport support from a locally-based French Red Cross team, allowing them to reach out further into difficult-to-access communities.
- The November immunization campaign in the Central African Republic was disappointing; with low estimated coverage of children in the country. The programme is looking at why this was the case, and how to improve coverage during the next campaign.
- The International Health Regulations Emergency Committee for poliovirus met on 14 November to review progress made in polio eradication. Whilst praising the commitment of Nigeria and all Lake Chad basin countries to outbreak response, they concluded that ongoing poliovirus transmission in Nigeria cannot yet be ruled out. Amongst other observations, they noted that routine immunization in high risk areas of northern Nigeria needs to improve over the coming months, and expressed concern regarding the inaccessible islands of Lake Chad.
- Through Bill & Melinda Gates Foundation funding, Chad has purchased 133 solar refrigerators for the 11 priority health districts, and in mid-December, will begin training cold chain technicians to use them. The equipment will be in place from the end of December 2017.

Surveillance

- The November OBRA for Cameroon praised surveillance efforts in the country, noting the increase in the detection of acute flaccid paralysis (AFP) cases in the last six months. Recommendations for improvement include continued emphasis on reducing subnational surveillance gaps, and ensuring that surveillance meetings are held regularly at central and regional level.
- The TAG meeting reiterated concerns over the high proportion of AFP samples from Cameroon, Chad and Niger reaching the lab in poor condition, but recognized the efforts of the countries concerned to address this.

Country	Notified AFP Cases	Pending Cases	Number of AFP Cases Pending by Days		
			Less Than 60 Days	60 to 89 Days	More than 90 Days
CAMEROON	762	108	88	7	13
CAR	156	15	13	2	0
CHAD	570	104	69	15	20
NIGERIA	15569	691	534	45	112
NIGER	484	212	100	72	40
Lake Chad Basin Block	17541	1130	804	141	185

2017 AFP Cases by Pending Days (until November 13)

- In the Central African Republic, UNICEF is working alongside WHO to help mitigate the gradual decline in AFP surveillance over recent years, including by increasing the number of community volunteers.
- In Niger, immunization coordinators and data managers were trained in GIS mapping, subsequently using their new skills to collect data on the locations of villages in the priority districts of Diffa, Goudoumaria, Maine Soroa and N’guigmi.
- There are still many populations across the Lake Chad region that are difficult to access, due to widespread security issues and the difficulty of transporting vaccinators across tough terrain. In Cameroon for instance, it is estimated that above 19% of villages in the Extreme Nord and Adamaoua regions may be inaccessible. Country teams continue to work to overcome these challenges where possible.

Communications for Development (C4D) and social mobilization activities

- In addition to providing some of the funding for the November SIA campaign, UNICEF deployed 6 members of staff and 12 consultants to Niger to support communication and social mobilization activities.
- The TAG meeting congratulated country teams for their use of specifically targeted communication strategies for special and high risk populations. To increase success, they recommended that all countries should have a team that is trained in prompting behavioural change, helping to ensure that all children are vaccinated.
- The November OBRA for Nigeria recommended producing communications products in all local languages, to ensure that every literate parent and child is accessed.



UNICEF Nigeria promoted the importance of the polio eradication programme for World Children’s Day on 20 November. Photo Credit: UNICEF Nigeria.

- In Cameroon, the November OBRA praised the use of community participation to promote upcoming vaccination campaigns, including through women’s associations and community radio stations.
- In Chad, the November OBRA recognized the efforts of the 11 priority districts to develop evidence-based communication plans, which will help to guide communication activities to support the polio outbreak response.
- In Nigeria, steps have been taken to correct a rumour circulating in the south of the country which links vaccination to Monkey Pox outbreaks. Media engagement by partners, the military and others, as well as public pronouncements by religious leaders and community dialogues, have helped to reassert parental confidence in vaccination.

Coordination and surge support

- The November OBRA were successfully coordinated by multiple partners including state level personnel and officials, the UN, the government, and in Nigeria, the representatives of the 3 focus states, Sokoto, Borno, and Adamawa. The results of each OBRA will form a report to the government and partners, which will lead to a plan of action to be developed by the countries.

- Cross border meetings recently took place between Chad and Niger, and between Chad and Cameroon, with both countries discussing their respective epidemiological data on either side of their shared border. Significantly, they agreed on a schedule of cross-border activities to be completed in the coming months, reducing the chance of poliovirus spread in either country.



The Outbreak Response Assessment Team for Nigeria inspecting outbreak response activities in Adamawa State. Photo Credit: WHO.

- As part of the efforts to open up strong polio infrastructure to other health and aid programmes, the Nigeria OBRA encouraged further coordination between the polio programme and other humanitarian agencies.

- Phase 3 of the outbreak response for the region is going ahead in January, taking into account many of the recommendations made by the OBRAs and TAG meeting. The objective is to maintain and improve the multi-national and regional outbreak response across the Lake Chad basin.

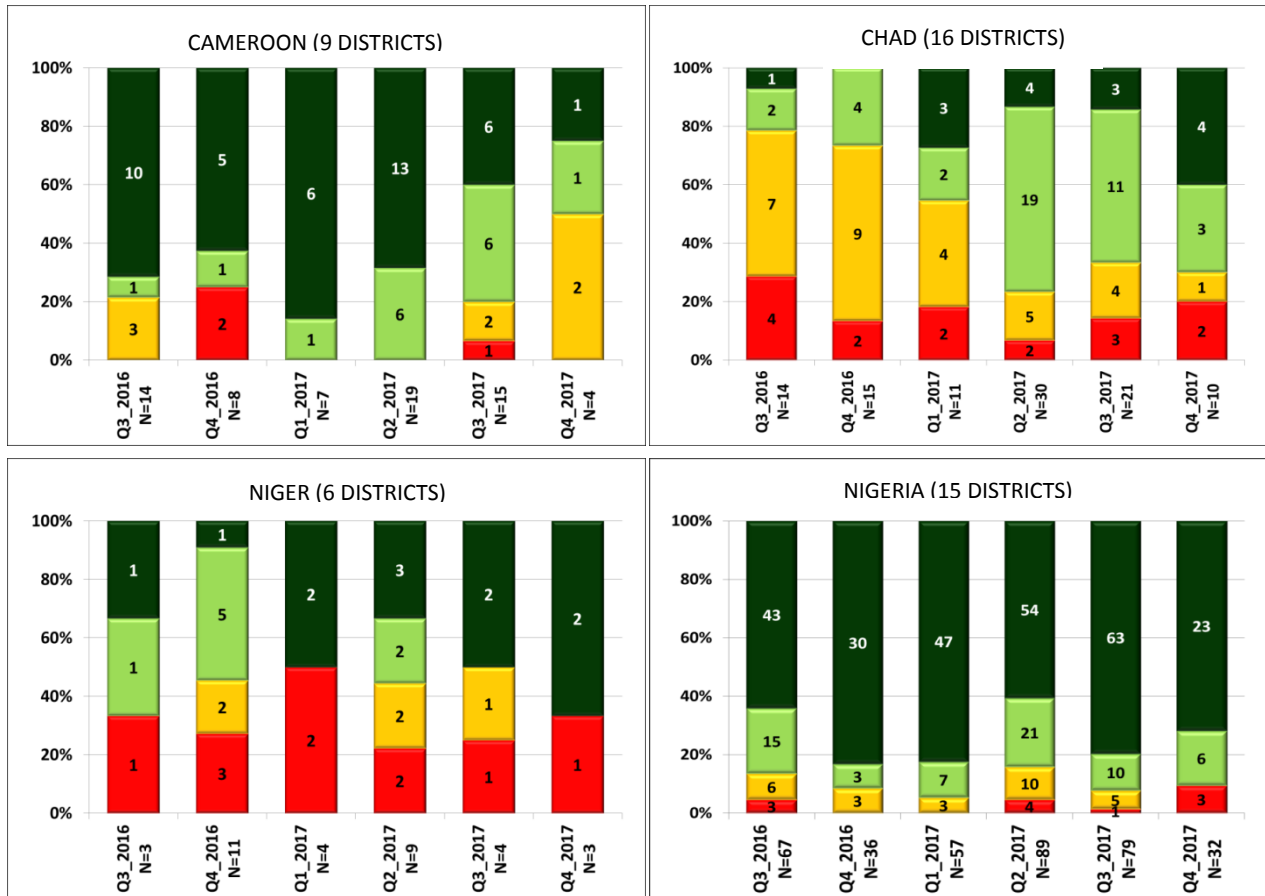


Intensified immunization activities with special populations including nomads in the Extreme Nord region, Cameroon. Photo Credit: WHO/UNICEF Cameroon.



Vaccination of target children and social mobilization at the Ngueli Bridge, which links Kousseri (Cameroon) and Ndjamena (Chad). Photo Credit: UNICEF Cameroon.

46 Priority Districts: OPV status of children aged 6-59 months suffering Non-Polio Acute Flaccid Paralysis, 01/01/2017 – 13/11/2017



■ 0 Dose ■ 1-3 Doses ■ 4-6 Doses ■ 7+ Doses

* All "UNKNOWN" doses assumed as zero.

Relevant Links

- [Global Polio Eradication Initiative \(GPEI\) website](#), updated weekly.