The COVID-19 pandemic has triggered a deep global health and economic crisis. The Polio Oversight Board (POB) remains steadfast in its resolve to secure a polio-free world, while reaffirming its commitment that polio-funded assets are at the service of countries to respond to this public health emergency, especially in the critical next phase of COVID-19 vaccine introduction and delivery.

When the pandemic was declared, the POB issued a Call to Action for polio-funded assets to support the response, and for a pause in polio immunization campaigns to reduce the risk of COVID-19 transmission. The Call also emphasized the importance of maintaining essential polio eradication functions, including surveillance for poliovirus. Since then, the value of polio-funded staff and assets contributed to the COVID-19 response in more than 50 countries is estimated at USD $104 million. In June 2020, faced with a concerning rise in polio cases and disruption to essential immunization, GPEI issued guidelines for safe implementation of house to house vaccination campaigns, developed with immunization partners. With the support of donors, polio campaigns have restarted in nearly 20 countries since August, while polio staff continue to simultaneously support the COVID-19 response. In November, UNICEF and WHO issued a joint Call to Action to respond to polio and measles outbreaks and prioritize funding immunization in national budgets. Polio vaccination campaigns have served as an opportunity to educate communities about essential public health measures to protect against COVID-19 and to deliver other needed health interventions. The POB would like to express their appreciation to all polio-funded staff who have taken on these dual roles with unwavering commitment.

GPEI’s core competencies for the next phase of COVID-19 response – vaccine introduction and delivery.

The POB emphasizes the importance of maintaining GPEI’s focus on urgently eradicating all forms of poliovirus. In view of the overwhelming public health imperative to end the COVID-19 pandemic, the POB commits to the polio programme’s continued support for the next phase of COVID-19 response, COVID-19 vaccine introduction and delivery, through existing assets, infrastructure and expertise in key geographies.

More than thirty years of eradicating polio has taught us that for vaccines to be effective, their delivery must be rooted in rapid and equitable access for everyone, everywhere, and that no one is safe until we are all safe.
The polio programme has core expertise in important areas of collaboration in vaccine introduction that can help in this phase of the pandemic, including campaign planning and monitoring; data collection; programme advocacy and resource mobilization; community engagement; microplanning; frontline worker training and cold chain management. These are areas in which polio-funded staff at country level can add value, under the leadership of national governments.

In November 2020 the type 2 novel oral polio vaccine (nOPV2) was the first vaccine to receive a WHO Emergency Use Listing (EUL) recommendation, and will be used to respond to circulating vaccine-derived poliovirus type 2 outbreaks. The rollout of nOPV2 under the EUL recommendation can provide lessons and experiences for countries introducing COVID-19 vaccine, if emergency regulatory pathways such as WHO EUL are used, including in the areas of monitoring readiness-verification, safety surveillance, and regulatory considerations. Levels of support will vary by country and will be determined based on discussions with host national governments, ACT-A and COVAX partners, and availability of sufficient financial resources to ensure simultaneous support for COVID-19 vaccine delivery without significant delays to the urgent polio eradication effort.

The POB is conscious that this decision may impact polio eradication, including programmatic and financial risks. However, the overwhelming need to end the COVID-19 pandemic and its ongoing impact on immunization coverage including polio, underlines the urgency of this action. The POB also believes that this will be mutually beneficial, as the polio programme can support COVID-19 response while also learning from the collaboration, including how best to integrate coordination, planning and service delivery.

To best support this decision the POB encourages countries, donors and polio stakeholders to:

- Maintain certification-level disease surveillance as required for polio eradication.
- Conduct, as feasible and required, high quality polio immunization campaigns in endemic and outbreak countries.
- Seek opportunities actively to fund polio programme assets that can contribute to COVID-19 activities and future emergency response and continue to report to GPEI on the work of polio-funded staff in the COVID-19 response to ensure transparency and accountability for GPEI donors.
- Protect children from polio, measles and other vaccine-preventable diseases by continuing to ensure the recovery of immunization services from the disruption caused by the pandemic, and by including bOPV in preventive, multi-antigen, mass vaccination campaigns.