On 16 December 2021, the Polio Partners Group (PPG) of the Global Polio Eradication Initiative (GPEI) convened for the nineteenth high-level meeting of polio stakeholders over Zoom. The meeting was attended by over 76 representatives from core GPEI partners, including stakeholders from governments at the ambassadorial, senior official, and technical level, and international organizations, foundations, and donors.

Opening Remarks & Election of Member State Co-Chair

Co-chair Linda Venczel of PATH welcomed meeting participants and stressed the importance of this moment in history when the international community is focused on responding to emerging variants of COVID-19 in addition to regaining ground on polio eradication. With recent cases of type two circulating vaccine derived poliovirus (cVDPV) in Nigeria and Senegal, Venczel emphasized that now was the time to commit fully to the eradication efforts. Co-chair Ambassador Sally Mansfield (Australia) echoed these sentiments, noting that despite challenges, eradication was in sight. Ambassador Mansfield reflected on her time as co-chair and welcomed her successor, Ambassador Marc Bichler, Ambassador and Permanent Representative of Luxembourg. Ambassador Bichler highlighted Luxembourg’s decades of support for polio eradication and reflected on the importance of the next four years. He called on member states and the international community to fully support and operationalize pledges made previously towards the eradication of polio.

Ambassador Mansfield concluded her opening remarks by highlighting the incredible contribution of Henrietta Fore, the outgoing Executive Director of UNICEF, to polio eradication. In a farewell message to the PPG, Fore stressed the importance of partnerships and thanked the PPG for their steadfast support and collaboration. In closing, Fore introduced Steven Lauwereier as UNICEF’s new Deputy Director of Polio Eradication. Lauwereier—whose extensive polio career began in Somalia, Cote d’Ivoire, and Madagascar—expressed his excitement at the prospect of working closely with the PPG over the coming years to achieve global polio eradication.

Polio Eradication Situation Update

The Director of Polio Eradication at World Health Organization (WHO), Aidan O’Leary, provided an update on progress towards the two goals in the polio eradication strategy: (1) the interruption of
endemic wild poliovirus (WPV) transmission in Afghanistan and Pakistan and (2) interrupting cVDPV transmission.

O’Leary emphasized the remarkable progress made over the course of 2021 across endemic countries, with WPV cases reducing from 140 to just 5. Amidst political and security challenges, Afghanistan was able to maintain progress in their polio eradication efforts, including through the first nationwide vaccination campaign in more than three years, which reached 2.4 million of the 3.5 million previously inaccessible children. Security remained a concern with threats to workers at the forefront and acknowledgement of these risks and gratitude for front-line health workers was echoed by PPG participants. Recent political changes in Afghanistan have resulted in significant challenges for both its economy and its health system operations and financing. Delivering vaccines—including the integrated delivery of polio, COVID-19, and measles vaccines—will be crucial for the health and safety of Afghan citizens. In Pakistan, O’Leary noted that the last case of WPV1 was confirmed on January 27, 2021 and has been accompanied by a very sharp reduction in the number of positive environmental surveillance isolates. The Government of Pakistan’s was strongly committed to the eradication effort and recognized the need to address gaps in program performance, especially the failure to reach persistently missed children in the core reservoirs and southern Kyber Pakthunkhwa.

In terms of interrupting cVDPV transmission, O’Leary recognized the progress made, including a reduction in cVDPV cases from 1,100 to 500 between 2020 and 2021 to date. While these numbers demonstrate progress, he noted that 300 of these cases had been detected in the last six months across 14 countries. A largescale outbreak response in Nigeria, which accounted for 90% of global cVDPV cases in the past 6 months, delivered 100 million doses of the novel OPV2 (nOVP2) vaccine, halting transmission in 14 of Nigeria’s 21 states with a further 60 million doses to be targeted towards breakthrough transmission. O’Leary emphasized the importance of timeliness of detection and the timeliness and quality of outbreak response.

O’Leary emphasized that 2022 is a “make or break” year for the polio eradication program and that further strengthening of access and the quality of campaigns in WPV1 endemic countries will be needed to meet Goal 1 targets. Effective implementation of the recently endorsed global surveillance action plan and the timely use of the immediately available type-2 vaccine will be necessary to meet Goal 2 targets.

Expressing gratitude for the PPG’s work, O’Leary called on the PPG and others to highlight the story of polio eradication. He emphasized that despite having to navigate a challenging funding environment, a polio free world was still in reach, and now was the time to stay the course.

Several participants expressed appreciation for the PPG as a platform for enabling discussion and fostering collaboration between a variety of stakeholders in the common pursuit of polio eradication. The issue of delays or slow responses, particularly regarding the implementation of outbreak response with nOVP2 vaccines, was raised by one participant who noted that these delays were often due to complex issues of competing priorities and lack of access, and it was crucial to not oversimplify these issues. Others emphasized the significant security risks faced by front line workers, especially in Afghanistan, noting the recent loss of life that had occurred and expressing concerns for the safety of
polio workers. O’Leary agreed that GPEI faced complex challenges and reiterated the importance of aggressive and timely responses whilst taking every measure to address those factors within our control.

**Supporting Polio Eradication and Strengthening Surveillance at the Country Level**

Ellyn Ogden, Worldwide Polio Eradication Coordinator for USAID, and Lee Losey, Deputy Director for the CORE Group Polio Project, offered insights on supporting polio eradication and surveillance at the country and community levels, highlighting the value of their Secretariat Model. They began their presentation with a brief history of the CORE Group Polio Project highlighting the components of this model that facilitate polio eradication efforts: multisectoral collaboration; a strong network of non-governmental organizations (NGOs); and coordination of NGO partners by a central secretariat. These components ultimately worked to aid in polio eradication by enabling effective stakeholder collaboration, integrated programming, and fostering innovation and local problem solving to help reach zero-dose and under-immunized children.

Losey emphasized the significant impact of community-based surveillance and highlighted key reasons for investing in community-based approaches. By tapping into community-based platforms and utilizing key informants, these strategies connected polio programs with communities and fostered meaningful communication while reducing vaccine hesitancy. Losey and Ogden advocated for expanding community-based surveillance strategies within polio eradication efforts and for other priority diseases.

There was discussion on how the PPG can support polio eradication in a changing landscape. Participants emphasized the importance of resource mobilization and joint surveillance for global health security and polio. Expanding programs to incorporate a One Health approach would facilitate a natural transition to integrated responses. Increased community ownership and engagement was stressed as critical to the sustainability of programming and for continuous health improvements.

**Programmatic and Strategic Updates: Transition, Integration, and Key Areas in Need of Attention**

Ebru Ekeman, Lead for the Polio Transition Team at WHO, Kate O’Brien, the Director of Immunization, Vaccines, and Biologicals at WHO, and Sir Liam Donaldson, Chair of the GPEI Independent Monitoring Board (IMB) each contributed to programmatic and strategic updates.

Ekeman and O’Brien provided an update on the critical work being done to support the transition and integration agenda. Multiple countries will completely transition out of GPEI support in 2022, and implementation of country transition plans was underway. Coordination between GPEI, WHO governance structures, and civil society had allowed for increased alignment and awareness for polio transition, including efforts for resource mobilization. Ekeman emphasized the importance of strong monitoring and evaluation frameworks moving forward to ensure high programmatic performance throughout the transition process. O’Brien highlighted that a strong focus on reaching “zero dose” communities in the core polio reservoirs is particularly critical in this final phase of eradication and described seven necessary actions for reaching and sustaining global eradication while strengthening immunization efforts, aligned with the Immunization Agenda 2030. These actions are (1) delivering comprehensive PHC services in targeted geographies; (2) generating demand for vaccines through context-specific community engagement; (3) reaching zero-dose communities with targeted, gender sensitive delivery strategies; (4) expanding integration through unified partnerships; (5) using emergency capacities to stop cVDPVs and prevent future outbreaks; (6) sustainable transition out of GPEI and other donor support; and (7) fostering research and programmatic innovations.
Over the next two years, GPEI would support 11 high-risk countries to lay the groundwork for a sustainable transition. Emphasizing the continued importance of the PPG, Ekeman and O’Brien identified 4 key impacts the PPG could have to move the transition agenda forward: 1) supporting advocacy for action at the country level with a focus on programmatic and financial sustainability; 2) providing bilateral funding to countries and implementing partners and helping to identify funding levers; 3) focusing on country and community voice; and, 4) facilitating targeted and more intentional outreach to civil society organizations.

In his presentation, Sir Liam Donaldson highlighted five key areas in need of attention within the polio eradication movement. First, Sir Donaldson strongly suggested that the international community be cautious of over-stating progress, noting that the IMB has never been as pessimistic as they were currently. Second, echoing sentiments from the other speakers, Sir Donaldson emphasized the importance of focusing on zero-dose children – the polio program is currently failing to vaccinate 2.7 million children. Third, Sir Liam Donaldson emphasized that eradication of polio was not possible without prioritization and progress regarding sanitary infrastructure including quality water supply, sanitation, and waste management. Fourth, Sir Donaldson noted the importance of lessons learned and the need for continued resilience and commitment following interruption of cVDPV. Lastly, Sir Donaldson highlighted the importance of the polio programs partnership base, noting that the GPEI must actively engage with partners that may have been missed in the past.

Ambassador Mansfield opened the discussion by highlighting the points made during Ebru Ekeman and Kate O’Brien’s presentation on the four areas where the PPG could contribute to advancing the transition agenda. Sir Liam Donaldson’s remarks on improving sanitation infrastructure were strongly supported by many members of the PPG with many agreeing that advocacy was still lacking in this area. Sir Donaldson’s remarks sparked discussion around how to actively engage with and receive funding. He noted that the COVID-19 pandemic had opened more opportunities for surveillance, especially when linked to infectious agents of pandemic potential. The discussion also highlighted context-specific demand creation activities for vaccines as a key interest area. Working on transition was critical for sustainability, and the PPG must stay engaged to ensure that backsliding does not occur. Finally, taking advantage of the lessons learned with COVID-19 — especially related to surveillance, laboratory, and vaccine activities — would be invaluable moving forward.

**Meeting Closure**

In closing, Linda Venczel noted the critical phase of polio eradication the international community finds itself in and thanked participants for their continued partnership and commitment. How polio programs are delivered should change in response to lessons learned on the importance of integration, active real-time surveillance, strong engagement with communities and traditional leaders, and reaching zero-dose children. In closing, Ambassador Mansfield thanked the PPG and expressed gratitude for her time as Co-Chair. Ambassador Mansfield stressed that with continued efforts to overcome the considerable challenges discussed, she was optimistic about the eradication of WPV. Ambassador Mansfield and Venczel closed by thanking participants and noting that the next meeting would take place around April 2022.