The Broader Health Benefits of Investing in Polio Eradication

Overview

Integration refers to all efforts to improve coverage of polio and other vaccines in targeted geographies through collaboration with essential immunisation and other priority health services to meet the health needs of high-risk communities.

GPEI enshrined its commitment to integration in its 2019-2023 Strategy and has a well-established history of leveraging its staff, infrastructure, and expertise to help improve health more broadly. Polio staff on the ground spend approximately 50% of their time working on other disease intervention areas, such as surveillance for other diseases, monitoring of essential immunization activities and supporting response to other disease outbreaks, including the COVID-19 pandemic. GPEI also works closely with national Expanded Programmes on Immunization (EPI) in endemic countries to better integrate polio assets, staff, and knowledge with other immunization activities.

Countries in a substantial part of the world—particularly the Africa, Eastern Mediterranean and South-East Asia Regions—rely heavily on GPEI infrastructure to sustain broader public health functions and the programme has cross-subsidised operations support for other health initiatives, with logistics, data, finance, human resources, and administration being shared beyond eradication efforts.

Integration as a Path to Eradication

Expanding integration efforts with a broader range of partners in immunization—including civil society—primary healthcare, and community services is a lynchpin for the GPEI’s 2022-2026 Strategy.

To achieve the Strategy’s two goals—interrupting wild poliovirus transmission and ending outbreaks of circulating vaccine-derived polio (cVDPV), which are present in under-immunized communities across different geographies—chronically low immunization coverage and refusal of polio vaccines in high-risk populations must be addressed. Integration provides targeted solutions to these challenges through utilizing GPEI assets and expertise to reach ‘zero dose’ children who have never been immunized before and to continue to contribute to the health priorities of high-risk communities to ultimately help improve polio vaccine uptake.

The programme ensured that all strategic priorities for the 2022-26 phase are aligned with the Immunization Agenda 2030 (IA2030). GPEI’s focus on reaching zero dose children and those persistently missed by immunization will ultimately contribute to IA2030’s goals of improving immunization coverage and strengthening health systems.

A history of reaching high-risk communities

In addition to working to integrate with other health programmes, the polio programme has long collaborated with governments to deliver a range of essential ‘integrated’ services to vulnerable communities at high risk for polio in an effort to help strengthen relations and build trust. In recent years as a result of joint GPEI-EPI programming, 82 million doses of vitamin A, 64 million doses of measles vaccine, 34 million deworming tablets, 7 million doses of yellow fever vaccine, 5 million doses of tetanus toxoid vaccine and 4 million insecticide-treated bed-nets have been delivered on average alongside oral polio vaccine.
Endemic countries

The GPEI is taking a broader, unified, cross-sectoral approach to integrated health service delivery with a special focus on underserved communities in polio high-risk areas. This includes work to:

- Strengthen immunization programmes, consistent with IA2030 and Gavi, the Vaccine Alliance’s 2021-25 Strategy, to reach zero dose children with all vaccines, including for polio.
- Provide operational assistance and funding for the co-delivery of bivalent oral polio vaccine (bOPV) in other immunization campaigns.
- Increase access to and utilization of essential immunization services by integrating operational micro plans, harmonizing social mobilization and health promotion efforts, and where necessary using new technology (such as mobile money) to support operations.
- Support the M&E framework for all immunization activities and unifying data analytic and review processes.
- Advocate for and support the delivery of an integrated package of essential health, WASH (Water, Sanitation & Hygiene) and child nutrition services that enhances polio vaccine acceptance and creates an enabling environment to improve the wellbeing and health of children and families in high-risk areas.

Outbreak countries

In the event of a cVDPV outbreak, the GPEI will look for ways to leverage its assets to contribute to improving immunization rates and health more broadly of communities. The programme will:

- Use the outbreak event as an opportunity to flag systemic EPI weaknesses and work with local authorities and immunization partners to mobilize support to strengthen essential immunization and primary healthcare (PHC).
- During the latter stages of outbreak response, consider delivery of multi-antigen or additional health intervention activities.
- Contribute to mobilizing support to boost essential immunization performance and outreach vaccination, including inactivated poliovirus vaccine (IPV) alongside Gavi and other immunization partners.
- Share updated micro plan information with governments, civil society and PHC-EPI partners to improve essential immunization targeting and coverage and integrate polio communication and messaging with these efforts.
- Engage within partner operational frameworks and review mechanisms, such as the World Bank annual review, IA2030 ownership and accountability mechanisms and structures, and Gavi 5.0 operationalization and review mechanisms, to ensure investments mutually support polio eradication and broader health benefits.

Gavi and GPEI

Gavi became a core member of GPEI in 2019, the same year that the organization successfully collaborated with GPEI to help all Gavi-supported countries confirm the introduction of IPV into their national immunization programmes. Gavi will use its core resources to support IPV in all Gavi-supported countries during its 2021-25 strategy.

GPEI, Gavi and EPI partners are collaborating closely to strengthen immunization systems and ensure that all children, in particular those who have not received any vaccination, receive polio and other vaccines, including through leveraging the GPEI’s expertise in reaching zero-dose communities. In Pakistan, for example, GPEI collaborated with the immunization programme and Gavi on a digital technology project, using KoBo Toolbox and WhatsApp, for real-time monitoring of the roll-out of a new typhoid vaccine supported by Gavi. GPEI is also supporting and monitoring the refurbishment of primary healthcare facilities in the newly merged districts of Khyber Pakhtunkhwa province.