

## Meeting of the Polio Oversight Board (POB)

6 March 2023 | 6:00 – 7:30 PST/ 9:00 – 10:30 EST/ 15:00 – 16:30 CET

### Meeting Minutes

**POB Member Attendees:** Chris Elias (POB Chair, BMGF); Aidan O’Leary, representing Tedros Adhanom Ghebreyesus (WHO); Steven Lauwerier, representing Catherine Russell (UNICEF); Mike McGovern (Rotary); Rochelle Walensky (CDC); Aurelia Nguyen, representing Seth Berkley (Gavi); Peter MacDougall (Donor Representative - Global Affairs Canada)

#### Summary of Action Items

<i>Action Point</i>	<i>Owner</i>	<i>Timeframe</i>
<b>In response to cVDPV transmission and drops in routine immunization, set up joint discussions between Gavi Secretariat, Alliance core partners, and GPEI to build linkages and facilitate coordination and planning, including a deeper engagement between senior leadership.</b>	Aidan O’Leary, SC Chair/ Aurelia Nguyen, Gavi	Q2 2023
<b>Prioritize POB engagement asks and notify partners as early as possible for any political or senior official engagement requests.</b>	PAG/ RMG/ GCG Co-Chairs	Ongoing

#### Opening Remarks

Dr. Elias welcomed attendees to the first Polio Oversight Board meeting of the year. He gave a brief overview of the recent GPEI partners visit to Mozambique, noting the opportunity to meet with political leadership, technical leadership, and an important visit to Tete province, which has been at the center of the polio outbreak with all eight cases of WPV1 occurring there. He highlighted the need to strengthen surveillance and support efforts to strengthen routine immunization.

#### Polio Situation Update

**Presenter: Aidan O’Leary (WHO)**

The following update was presented to the POB:

- The primary focus of the presentation was the endemic countries and progress against Goal 1, interrupting WPV1 transmission by the end of 2023. Good progress has been made against Goal 1, with no cases of WPV1 detected since September 2022 and a significant reduction in genetic clusters and geographic localization throughout 2022, leaving essentially two remaining chains of transmission in Afghanistan and Pakistan.

- There continue to be political, economic, and security impacts to progress in Afghanistan. The December 2022 decree prohibits women from working for local and international NGOs, though the UN and health programs are currently exempted. Female polio vaccinators have continued to work in the East Region campaign, however new restrictions around dress codes, offices, and transport are in place. Additionally, there continues to be significant security risks, with a lack of harmony among different factions, resistance movements, and recent attacks. Lastly, the program continues to face the impact of the deteriorating humanitarian and political situation, including the ongoing risk of famine, the disruption of program activities amid UN cash transfer challenges, and the risk of the collapse of the healthcare system, which is the backbone for delivery of all health activities, including polio.
- In Pakistan, the polio eradication efforts have benefited from high level political commitment to date, however there is an uncertain political environment moving forward with an election year throughout Pakistan in 2023. This is accompanied by increasing instability in the security situation, and a deteriorating economy. Lastly, there is continued impact from last year's historic floods, which displaced eight million people.
- Modeling has reaffirmed the concentration of risk in two endemic zones, East Afghanistan and South Khyber Pakhtunkhwa (KP), and has highlighted continued risk in Southern Afghanistan, where importation can occur. In South KP, there has been a significant increase in overall coverage due to the program's intensifying efforts and the use of campaign pluses, including soap, vitamin A, and a range of nutrition products. It will be important to close the remaining gaps in the coming months. In the Eastern Region of Afghanistan, there has been a roll out of house-to-house campaigns with reportedly high coverage, but it will be important to focus on quality campaigns going forward.
- There are more than 120 environmental surveillance sites across Afghanistan and Pakistan. Although environmental positive isolates have been detected, these detections have triggered a very aggressive outbreak response. The program is not seeing re-established circulation outside of the endemic zones.
- There has been a multi-county WPV1 outbreak response in southeastern Africa, with the last detection in August 2022. Intensified surveillance is critical, as well as strengthening essential immunization.
- Notwithstanding challenging operating contexts, interruption of WPV1 endemic transmission and closure of the WPV1 outbreak in southeastern Africa remains on track and feasible.

Requests of the POB:

- Advice and guidance on what the program should be doing more or less of, or differently, to achieve the Goal 1 outcomes and timeline.
- Advice and guidance on the nature and type of advocacy to be undertaken to best preserve the space to effectively operate through 2023.

The POB thanked the presenter, and the following observations and questions were raised:

- Chris Elias noted the optimistic progress in Pakistan and asked if the program is confident that there is not ongoing transmission in Lahore, given that some of the more recent environmental

samples are there. He also asked for more detail on how the program can potentially expand access and improve the quality of campaigns in Afghanistan.

- Aidan O’Leary highlighted a recent visit to Pakistan for a program review with the Punjab team, noting there is robust, proactive surveillance with a strong focus on the high-risk mobile populations to find any evidence of transmission.
- Ahmed Al-Mandhari (WHO) underscored the risks to operations on the ground in Afghanistan due to the security situation. He also noted the issue of cross-border transmission and the need for house-to-house campaigns in the East region. These topics will be discussed in planned meetings with the de facto authorities later this month.
- Hamid Jafari (WHO) noted that given it is an election year in Pakistan, and the timing of a POB visit will be very important.
- Peter MacDougall expressed that donors are pleased with the program’s progress, though there are significant risks remaining. Given the difficult economic conditions in Afghanistan and Pakistan, he asked if the program is considering integrating more pluses, such as health services or nutrition supplements. Additionally, he asked to better understand how the program is working to increase the coverage of mosque-to-mosque campaigns in areas where house-to-house campaigns are not possible. Lastly, he asked for more detail on how the program is working to improve the quality of campaigns in Yemen and Somalia, as well as the next steps for GPEI in Northern Yemen where the Houthis continue to block vaccination campaigns.
- Mike McGovern noted the recent reporting on the drop in routine immunization, particularly across the AFRO region. He expressed concern that, as countries transition away from GPEI support, this will leave the program more exposed to outbreaks of vaccine derived poliovirus (VDPV).
- Aurelia Nguyen shared appreciation for the work, noting good progress in the face of adversity and more innovative strategies being used to reach chronically missed children. She highlighted cVDPV transmission outside of Afghanistan and Pakistan and stressed the importance of the integration of campaigns and other routine immunization strengthening efforts to reach unvaccinated and under vaccinated children, noting Gavi is committed to targeting resources in the consequential geographies. She also highlighted the need to not only look at integration as the co-delivery of interventions, but also from an end-to-end perspective, looking at increased coordination and communication across activities.
- Steven Lauwerier said that a sharp focus on South KP is the right approach in Pakistan, noting the program is looking at integrated service delivery in this region, which could be a way forward to build trust with communities and increase the number of vaccinated children. He also noted that the focus in East Afghanistan will need to be on quality and increasing the number of house-to-house campaigns, as well as reinforcing the activities between campaigns. Regarding advocacy, he stressed the importance of POB missions at the right time with the right messaging this year, particularly around the elections in Pakistan. Lastly, he noted the need in Afghanistan to keep pushing for women to continue as vaccinators as this is a key success factor for the program.
- Rochelle Walensky echoed appreciation for the great work of those on the ground and the terrific progress made. She asked, given the security challenges outlined, how will the program

know that the chains of transmission have been effectively disrupted, and how concerned is the program about the unknowns.

- Aidan O’Leary responded with the following:
  - Much of the progress that has been made in South KP is due to the range of integration activities over the last six to nine months, including pluses. He noted the program will continue to integrate activities in a way that is fit for purpose.
  - In Afghanistan, the program is working with a range of partners to integrate activities and boost coverage in areas where mosque-to-mosque campaigns are happening, while ultimately pressing for moving to the house-to-house modality.
  - GPEI will prioritize integration activities in the most consequential geographies, focusing on where the program is doing sustained activities. There will be a joint measles and OPV campaign this month in Mozambique and parts of Malawi, and greater engagement in terms of support for the cholera outbreak.
  - The program is continuing to make progress in Somalia, with each campaign reaching additional children. In Northern Yemen, there is an intensified level of outreach to gain access and the program is using every channel available to make inroads.
  - Building on progress to date, there is an incredible window of opportunity to meet the goals of the program and it will be important to not only focus on immunization activities, but also on the continuity of the surveillance activities. There are political, economic, and security risks, but the program should draw confidence from the way the risks have been handled over the last few quarters and continue this path forward.
- Sir Liam Donaldson (IMB) flagged two risks to the polio program around the Pakistan election, the risk of losing continuity if another government comes in, as well as the risk of polio becoming a toxic campaigning issue. He urged the POB to work to ensure agreement on continuity, and also to encourage all parties to take the polio vaccine out of the political arena. Additionally, he underscored the unstable situation and safety concerns in Afghanistan for female vaccinators, noting it is crucial that there is continuity of these female workers.
- Chris Elias noted there will be a POB visit to Pakistan in 2023, and the team is working with NEOC colleagues to determine the optimal timing around the election. He also highlighted that there is a good deal of attention in Africa on the losses that COVID-19 caused in routine immunization, and all members of the African Union recently signed a declaration recommitting to improving routine immunization coverage. As a next step, he suggested joint discussions and planning between Gavi and GPEI to facilitate coordination, including a deep dive between the senior leadership given the upcoming leadership transition at Gavi.

**Action Item:**

- Set up joint discussions between Gavi and GPEI to facilitate coordination and planning, including a deeper engagement between senior leadership.

**2023 GPEI Budget**

**Presenter: Michiyo Shima (UNICEF)**

The following update was presented to the POB:

- 2023 is a crucial year for the program and the focus will be doing everything possible to implement all critical activities. GPEI is currently estimating \$651M in total contributions for the year, though this does not include some innovative financing that is still under discussion. Together with the estimated net carry forward of \$247M (+/- ~20%), projected resources for 2023 total \$845M - \$950M. The overall financial outlook is positive, with ~ 86% of the \$1.05B 2023 budget funded, assuming the midpoint of projected resources. Unfunded activities will be reviewed at the end of Q2 for implementation in the second half of the year.
- The assumptions behind the positive outlook include: all pledges will be monetized as planned; flexibility of funds will be maximized; outbreak response requirements remain within budget; and strong leadership and coordination will ensure hard prioritization and strengthened implementation of critical activities. To maintain these assumptions and mitigate associated risks, the program will continue to: strengthen efficiencies while focused on prioritized actions critical to the path to eradication; align budget with resources via quarterly shifts towards priority needs; allocate funds based on capacity to implement and to areas of greatest risk and need; and utilize KPIs and financial analysis to track program progress and use analytics to guide prioritization.
- The overall takeaway from the cash gap analysis is that the first half of 2023 is adequately financed. The program will continue to focus on the consequential geographies with a hard prioritization of activities within these seven countries, dynamic budgeting to remain nimble and flexible, and will look at course corrections and/ or budget adjustments as part of the 2023 strategic program review.

Mike McGovern, Chair of the Financial Accountability Committee (FAC), shared reflections from the February FAC meeting:

- He noted the FAC is pleased with the financial report and positive funding outlook. The FAC meeting also focused on a discussion of the program’s key performance indicators, and while the KPI reporting identified key issues, there was frustration at the lack of solutions presented. With the Independent Monitoring Board (IMB) now only meeting once a year, he expressed the need for a group to aggressively look at program risks outside of the Strategy Committee and in that regard, a FAC sub-committee has formed to take an active look at the FAC Terms of Reference. He shared appreciation for the input of donors in this process. Additionally, he underscored the tremendous progress the program has made and looked forward to the continued discussion on key issues.

The POB thanked the presenters, and the following observations and questions were raised:

- Chris Elias noted the positive fiscal outlook for 2023 but highlighted the longer-term gap over the 5-year strategy period. He emphasized the need to sustain resource mobilization efforts in order to fund the full strategy through certification in 2026.
- Aurelia Nguyen shared appreciation for the clear and transparent presentation. She highlighted that co-delivered campaigns are a big opportunity to maximize collective funding and asked how to best make linkages with Gavi’s full portfolio planning process to increase coordination with GPEI.
- Aidan O’Leary responded that it is important to build these linkages at the country level to ensure the country programs are aligned, and it is in our collective interest to increase this

coordination and planning. On the financing, he noted the program is working to have a stronger link between milestones, risks, resources, and KPIs.

### **2023 POB Engagement & Advocacy**

**Presenter: Gena Hill (CDC)**

The following update was presented to the POB:

- The presentation was made on behalf of the Political Advocacy Group (PAG), the Resource Mobilization Group (RMG), and the Global Communications Group (GCG). Thanks to the engagement of the POB members, WHO & UNICEF Regional Directors, and donors, the program has been able to secure global, financial, and political commitment to polio eradication, raising over \$2.6B during the GPEI Pledging Moment in Berlin. The engagement, through outreach to governments and high-level visits, has been key in maintaining political commitments as well as increasing timely response to outbreaks.
- The top priorities for POB engagement in 2023 are maintaining the highest level of political commitment for oversight of polio eradication activities through outreach, bilateral meetings, and visits to high priority countries, using leadership voice and presence to support polio eradication goals, and continuing to help secure financial commitments to close the funding gap.
- Requests for engagement include: encouraging newly elected political leaders to maintain momentum for eradication through personal outreach; engaging through humanitarian channels to ensure polio vaccination is included in humanitarian response and to facilitate access negotiations; engaging key regional groups to secure commitment to the year of immunization recovery; direct engagement with donors; encouraging outbreak countries to provide domestic resources where possible; and participating in ad hoc and opportunistic communication requests throughout the year, including key moments for donor announcements. The POB Engagement Plan will continue to be shared quarterly in advance of POB meetings, including specific asks tailored to the needs of the countries and the program.

### **POB Feedback Requested:**

- Do you have any feedback on the priorities presented? What support and inputs are needed from GPEI groups to implement the outreach and engagement requests?
- The PAG would be interested to hear any issues raised from political leaders in polio-affected countries when asked to prioritize the response to polio outbreaks.
- The GCG and RMG are interested in hearing feedback on your conversations with donors related to advocacy requests. What would be the most appropriate way?

The POB thanked the presenter, and the following observations and questions were raised:

- Chris Elias stressed the need to engage at the country level, noting that on the recent GPEI partners visit to Mozambique, there was as much discussion on cholera as there was on polio, which was a priority from the country perspective given the serious cholera outbreak. He thanked the Regional Directors for their extensive engagement and support.
- Peter MacDougall agreed with the priorities and encouraged engaging as early as possible for any political or in-country senior official engagement requests. He noted the coordination on outreach will help maximize impact. In response to the question on advocacy and

communication with donors, he noted it will be helpful to articulate the strong evidence of success in the program, highlight the impacts on other areas, including pandemic preparedness and universal healthcare, demonstrate the work on gender equality and human rights as cross-cutting themes, better integration of polio and other sectors to maximize funds and reach, and helping donors understand the downside risks if eradication fails. He also noted that sovereign donors are coordinating on proposing language in support of polio eradication at the G7 and G20, and donors are interested to understand how implementing partners are doing the same.

- Hamid Jafari (WHO) also highlighted the extensive engagement and support from the Regional Directors, noting they have joined the POB Chair on all five high level visits to Pakistan over the last two years.
- Steven Lauwerier emphasized the competing priorities countries face, including cholera, COVID-19, cyclones, and humanitarian crises. He noted that UNICEF will be focusing this year on the large drop in routine immunization, and this will be a big opportunity for advocacy, including the 2023 State of the World's Children.
- Aurelia Nguyen suggested that prioritization across the asks would be helpful to understand how they best fit with each organization. She noted political leaders are concerned with the threat of cVDPV outbreaks, as well as a number of outbreak prone diseases that are on the rise due to the backsliding of routine immunization. She also highlighted that advocacy and support to political leaders around the anti-vaccine sentiment is important, as well as communication around vaccine supply.
- Mike McGovern noted the recent visit to Mozambique, acknowledging that the success of the trip was largely due to the impact of the partners working together to support the country. He flagged that there is a real issue with the availability of the cholera vaccine in Mozambique, and any help from organizations on this call would not only help the polio program but support a dire need in the country. Lastly, he noted the potential risk of budget cuts to CDC and USAID appropriations and flagged the importance of continued advocacy and support to maintain or increase current levels.
- George Laryea-Adjei (UNICEF) noted that increased engagement has created opportunities to overcome constraints that teams face on the ground and stressed more of this will be needed, highlighting the importance of additional approaches at all levels of the partnership.

#### **Action Item:**

- Prioritize engagement asks and notify partners as early as possible for any political or senior official engagement requests.

#### **Closing Remarks**

The Chair thanked the attendees for their time and engagement. The meeting was followed by a 30-minute closed executive session.