

Meeting of the Polio Oversight Board (POB)

23 June 2025 | 5:00 – 7:00 PST/ 8:00 – 10:00 EST/ 14:00 – 16:00 CET

Meeting Minutes

POB Member Attendees: Chris Elias (POB Chair, GF); An Vermeersch (Gavi); Mike McGovern (Rotary); Matthew Buzzelli (CDC); Omar Abdi (UNICEF); Ziad Memish (KSA); Cecile Billaux (EC)

Summary of Action Items

<i>Action Point</i>	<i>Owner</i>	<i>Timeframe</i>
Share feedback on near- and long-term governance review recommendations directly with the governance review consultants	POB Members	By 10 August
Present GPEI governance review recommendations at the September POB meeting	Governance review consultants	21 September
Present detailed GPEI action plan and 2026 GPEI budget at the September POB meeting	SC Chair	21 September

Opening Remarks

The Chair opened the meeting, welcoming Matthew Buzzelli, representing CDC, to his first board meeting. He highlighted several recent milestones for GPEI, including the successful closure of the Madagascar outbreak, key meetings at the World Health Assembly, as well as the first joint Gavi – GPEI Board meeting.

State of the Program

Presenter: Jamal Ahmed (WHO)

The following update was presented to the POB:

- GPEI is adapting to shifting financial and geopolitical realities while maintaining focus on eradication goals. A detailed action plan and the 2026 budget will be presented at the September in person POB meeting.
- Wild poliovirus case numbers have peaked in the endemic countries, and the next low season presents the opportunity to stop transmission. While progress has been made in the Northern corridor, there is continued transmission in the core reservoirs. Access and security constraints in the South region in Afghanistan and Southern KP in Pakistan continue to challenge program reach.

- To address cVDPV2 outbreaks, synchronized campaigns began in April across the Lake Chad Basin and the Horn of Africa, as well as bOPV/nOPV2 co-administered campaigns in Guinea and Nigeria. Challenges include a new outbreak in PNG, delays in Gaza's second vaccination round, and an increase in cases in Ethiopia. Weak routine immunization in many geographies remains a key vulnerability. The program is working to end transmission in the Southern Africa bloc by the end of the year and has adopted a phased approach to ensure resources are prioritized in the most at-risk areas.
- Resource mobilization will require a strategic pivot to rebuild donor confidence, attract new partners, and align with a rapidly changing global health order. POB leadership and engagement is critical to unlocking new funding. The latest projections indicate that future contributions will necessitate a reduced GPEI budget, requiring a strategic reassessment of how resources are allocated across GPEI priorities.
- In the context of limited financial resources, the Strategy Committee remains fully committed to ending all forms of polio. There is a window of opportunity to finish WPV1 in the next 6- 12 months, and ending WPV1 in Afghanistan and Pakistan is the most cost-efficient way to protect all countries against wild poliovirus. Under current circumstances, the most efficient use of resources for the type 2 polio variant will be to aim for a phased elimination.

Requests of the POB:

1. Continued advocacy for prioritization of Polio within each of the partner agencies, given new global financial realities to be able to meet the eradication goal.
2. During the upcoming POB mission to Afghanistan and Pakistan, consider emphasizing the need to enhance programmatic efficiencies and enhance quality in areas with persistent transmission, as well as highlight the need to make progress over the next six months given decreasing GPEI budget.

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

- Cecile Billaux emphasized the importance of maintaining a strategic balance of funding for both goal 1 and goal 2 next year, noting that while it is vital to protect the gains in the endemic countries, it is also critical to build population immunity and continue to invest in controlling cVDPV2 outbreaks. She noted concern over potential considerable cuts for outbreaks funding and asked for additional clarity on the budget approach for 2026, emphasizing the importance of incorporating insights from key stakeholders at the country level.
- Mike McGovern underscored Rotary's commitment to polio eradication, noting that Rotary and the Gates Foundation announced the renewal of a joint commitment of up to US\$450 million to GPEI over three years at the annual Rotary International Convention. He acknowledged challenges but shared optimism on behalf of Rotarians, and thanked partners for their support at the convention in Calgary.
- Omar Abdi emphasized UNICEF's commitment to strengthening operational efficiencies and addressing financial shortfalls. He noted the challenge on reaching missed children in Afghanistan and highlighted the need for innovation, particularly in high-risk provinces. In Pakistan, he flagged the importance of accelerating complementary campaign activities, including routine immunization and nutrition efforts. He also stressed sustained political

advocacy and engagement by the POB and Regional Directors and inquired about next steps for addressing the situation in Northern Yemen.

- Hamid Jafari (WHO) shared an update on Northern Yemen, noting an agreement has been reached on an operational design to vaccinate children against polio, measles, and diphtheria. He highlighted that while high level political support is essential, an aligned approach across partners will be critical. He noted Oman is convening negotiations and the program is in a preparatory phase for these discussions.
- An Vermeersch reaffirmed Gavi's commitment to supporting polio eradication through support for IPV and hexavalent vaccines and efforts to strengthen immunization delivery in polio high-risk areas. She emphasized the importance of exploring new ways of working and operational efficiencies, and the need for Gavi and GPEI to align on one country plan to integrate immunization and polio eradication activities. She also highlighted the current collaboration on the Big Catch-Up campaigns, noting that continued joint efforts in the second half of the year will be crucial to reach hard to access children.
- Matthew Buzzelli noted CDC's commitment to GPEI and support for the proposed action plan and upcoming next steps to accelerate progress. He emphasized the importance of improving efficiency amid financial constraints, encouraged greater country ownership and accountability for high-quality campaigns, and noted that CDC will continue to support both bilateral and collective efforts toward a polio-free world.
- Chris Elias noted the critical timing of the upcoming POB visit to Afghanistan and Pakistan, highlighting progress and the strong political commitment in Pakistan while underscoring continued transmission and the need for a clear roadmap detailing the strategies to achieve zero polio. He expressed concern around the southern region of Afghanistan and stressed the importance of replicating successful strategies from the eastern region, including the increased participation of female frontline health workers. He also noted the downward trend in variant type 2 poliovirus, but the detections in Europe highlight the global risk that remains as long as the virus is circulating. On the budget, he emphasized that reductions need to be informed by a careful, risk-based assessment, so they remain feasible without jeopardizing eradication efforts. While difficult tradeoffs will be required, it is essential for the program to preserve what matters most for success, especially in the highest risk settings. Lastly, he highlighted the need for improved cost efficiencies and a continued push for resource mobilization.
- Ziad Memish expressed appreciation for the collective efforts of GPEI. He noted he will join the POB mission to Pakistan and looks forward to meeting the teams on the ground and supporting their efforts to get the job done.
- Jamal Ahmed emphasized the importance of the budget process for 2026 to conduct a comprehensive program review of needs and risks and identify a clear roadmap to zero polio. He stressed that the program cannot neglect any component but acknowledged the budget reduction cannot rely solely on efficiencies; trade-offs will be necessary and must be accompanied by a detailed risk assessment and mitigation strategy.

Action Item:

- Present detailed GPEI action plan and 2026 GPEI budget at the September POB meeting.

GPEI Governance Review Update

Presenters: Carole Presern & Lucy Phillips, governance review consultants

The following update was presented to the POB:

- The GPEI governance review objectives include: 1) assessing the current governance structure and examining the accountability mechanisms and decision-making processes; 2) providing actionable recommendations for a governance model that improves accountability, agility, and operational efficiencies; 3) proposing a future-oriented governance framework that identifies and addresses evolving roles and responsibilities for the polio certification strategic period. To date, over 30 interviews have been completed, and a preliminary “current state” report has been shared. In July, focus will shift to developing near-term, pragmatic recommendations while weighing longer-term post-certification governance changes amid ongoing uncertainties given the shifting global context.
- The GPEI is a unique partnership, a “coalition of the willing” without a typical secretariat seen in other global health initiatives. Strength lies in the deep commitment of longstanding individuals, though this reliance also highlights the uniqueness and vulnerability of the structure.
- The presentation focused on the roles of the POB and the Strategy Committee (SC). Noted strengths of the POB include the senior level commitment and influence, the addition of donor seats, and energetic and dedicated leadership. Feedback suggests meeting formats could be optimized with fewer, longer sessions, and there is concern around delegation of representation and impact on decision making. The size of meetings may push complex discussions into executive sessions, and questions remain around accountability structures, civil society representation, and the Chair rotation. The SC has deep technical strength, and is shouldering significant operational, strategic, and financial responsibilities. There are questions around the altitude of discussion and if the scope of responsibilities should be streamlined, the accountability chain, and the Chair rotation.
- Areas of examination include structure and participation for maximum efficiency and formalizing decision making, highlighting concerns that some decisions feel pre-determined. Additional areas of improvement include information management and communication. Feedback was requested on feasible near-term and post-certification changes.

Action Items:

- Share feedback on near- and long-term recommendations directly with the governance review consultants.
- Present GPEI governance review recommendations at the September POB meeting.

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

- Sir Liam Donaldson (IMB) stressed that the value of the governance review depends on whether it enhances the likelihood of polio eradication. He emphasized two critical factors for success of the program: establishing strong country-level accountability and ensuring consistent, high-quality leadership at global, regional, and national levels. He cautioned against making major governance

changes during a period of instability and stressed the role of the Independent Monitoring Board (IMB) in providing assurance to sovereign donors.

- Cecile Billaux emphasized that GPEI's governance model is unique and flagged the importance of not adding additional complexity but incorporating lighter touch recommendations. She encouraged exploring ways to leverage Gavi's existing country engagement structures to enhance GPEI's work, rather than creating new mechanisms. She also highlighted the need for timely materials ahead of the September meeting and tracking the implementation of the governance review recommendations.
- Omar Abdi noted that as an emergency program, GPEI requires a small, agile governance body capable of rapid decision-making. He supported enhancing accountability by including country representation—specifically from endemic and major outbreak countries like Pakistan and Nigeria—on the board to ensure ownership and accountability at the country level.
- An Vermeersch emphasized the GPEI structure as a “coalition of the willing”, unique from other global health institutions, and noted the need for rapid response capacity. She underscored the importance of including regional implementer voices in POB meetings and reiterated Gavi's commitment to partnership with GPEI.
- Mike McGovern highlighted the progress since the last governance review in 2020 and emphasized the importance of rotating the POB Chair and increasing representation from endemic countries. He noted the need to strengthen accountability and to ensure that governance reforms remain focused on driving eradication results amid resource constraints.
- Jamal Ahmed conveyed Dr. Tedros' perspective that every recommendation must be directly linked to accelerating eradication efforts. He stressed the importance of maintaining lean structures in a resource-constrained environment and highlighted the need to invite key countries, such as Pakistan, Afghanistan, and Nigeria, to board meetings to ensure their direct input and engagement on program progress.
- Chris Elias provided a brief history of the POB Chair rotation and emphasized the importance of rotating the chair position while acknowledging the resource demands of the role. He highlighted the need for more robust country participation and input from civil society and evaluating if this is best served through direct representation or more frequent engagement with the board. He also stressed the importance of maintaining lean structures in a resource-constrained environment and considering the broader context of global health architecture in final recommendations.

Joint Gavi-GPEI Board Meeting Debrief

The following observations were shared on the joint Gavi-GPEI board meeting that took place on 19 June:

- Chris Elias summarized the recent joint Gavi-GPEI Board meeting, which aimed to enhance collaboration and accelerate joint goals. The initial focus will be on scaling collaboration in up to four key countries, including Afghanistan and Pakistan. He noted the intent to develop a joint action plan with clear accountability and monitoring and confirmed plans for another joint Board engagement in the fall—either during the September POB meeting or at the World Health Summit in October—to go deeper into implementation details.

- An Vermeersch expressed gratitude for the historic joint board meeting, highlighting its importance and the constructive exchange, particularly the country reflections from Nigeria and Pakistan. She emphasized the need for integrated planning and joint implementation between Gavi and GPEI, aligning with Gavi's 6.0 strategy, particularly in a resource constrained environment. She also underscored Gavi's commitment to working together on high-quality, impactful campaigns and expanded routine immunization, particularly in hard-to-reach areas, to maintain a polio-free world.
- Sir Liam Donaldson (IMB) commended the joint board meeting as both symbolically and technically strong and emphasized the need to focus on the operational level and to ensure cooperation between polio and essential immunization teams. He highlighted the importance of leadership from the top to foster a culture of cooperation.
- Cecile Billaux shared appreciation for the joint board meeting and emphasized the need for operational follow-through and an in-person follow-up meeting to maintain momentum.
- Mike McGovern noted the value of the joint board meeting and took a moment to recognize the frontline workers killed while serving the polio program, honoring their contributions and acknowledging the risks faced by frontline workers.

Closing Remarks

The Chair thanked the attendees for their time, noting the next meeting of the Polio Oversight Board will be a full day in person meeting on September 21st in New York. This will be an important meeting for discussion and decisions on strategic program shifts, the 2026 GPEI budget, GPEI dissolution, and the GPEI governance review recommendations. The meeting was followed by a 30-minute closed executive session.