# **Global Polio Partners Group**



#### **CHAIRS' STATEMENT**

## High Level Meeting of the Global Polio Partners Group (PPG)

### Monday, 5 December 2016

Please note that the meeting presentations are available on the PPG website.

On 5 December 2016, the semi-annual high-level meeting of the Polio Partners Group of the Global Polio Eradication Initiative (GPEI) was convened in Geneva at the World Health Organization headquarters. The meeting was attended by ca. 60 participants, including: representatives of core GPEI partners, stakeholders from governments at the ambassadorial, senior-officials, and expert level from capitals and the Permanent Missions in Geneva; international organizations, foundations, donors and other stakeholders.

The main objective of the meeting was to provide an overview of the latest developments of the polio programme, especially regarding the status of polio eradication efforts in endemic countries and the Lake Chad Basin, the current funding status of the GPEI budget 2016-2019, the post-certification strategy and the transition planning process at country and global levels, including the recently established Transition Independent Monitoring Board (TIMB).

Mr. Michel Zaffran, Director of Polio eradication at WHO, and Mr. Reza Hossaini, Director of Polio eradication at UNICEF, provided stakeholders with an overview of the status of polio eradication efforts. They celebrated that the epidemiological block formed by Pakistan and Afghanistan has the lowest number of wild poliovirus (WPV) cases to date. However, access in some areas remains difficult and surveillance needs to be further strengthened.

Moreover, they briefed participants on the regional emergency outbreak response across Nigeria and the Lake Chad Basin (Central African Republic, Cameroon, Chad and Niger) launched following the recent detection of four cases of WPV in Borno State in Nigeria. The response had a strong focus on communication that entailed a rapid scale up of the volunteer community mobilization network. As part of the lessons learned from this outbreak, the GPEI is undertaking detailed risk assessments in countries with access limitations to ensure that there are no more undetected reservoirs. Another lesson learned from the outbreak in Borno, where populations were trapped in areas where WPV was still circulating, the GPEI is developing strategies to address immunity gaps and additional surveillance initiatives for areas where populations are inaccessible.

Regarding the Inactivated Polio Vaccine (IPV), it was noted that the supply continues to decline and the situation will remain constrained into 2018. The shortage is now affecting some tier 1 and 2 countries. IPV introduction will still be delayed in several tier 3 and 4 countries. Finally, GPEI will lead the inclusive process to develop a post-certification strategy that will last approximately one year.

Mr. Chris Maher, WHO Manager for Polio Eradication for the Eastern Mediterranean Region, provided participants with a detailed presentation of the polio programme in Pakistan and Afghanistan. Despite some remaining risks, mainly compromised access due to insecurity and quality of the immunization campaigns, he noted that the programme has never been better positioned to interrupt transmission due to the very low number of WPV cases in the core reservoirs and their declining genetic diversity. He further commended the countries' sound National Emergency Action Plans, which serve as the blueprint for improving quality surveillance and reaching more children, and the excellent oversight by the Emergency Operations Centres.

Mr. André Doren, Senior Strategist, GPEI External Relations, updated participants on the current funding status of the GPEI budget 2016-2019, the cash forecast, the resource mobilization strategies, and the priorities of the past and forthcoming months. In this regard, he put forward a proposal to provide donors and partners with an opportunity to pledge financial support to the GPEI in two events in 2017.

Dr. Paul Rutter, Chair of the Transition Management Group, briefed the PPG on the post-certification strategy development process, the country and global level efforts on polio transition planning, including engagement by other programmes, and the composition and functions of the newly established <a href="Transition Independent Monitoring Board">Transition Independent Monitoring Board</a>.

Finally, Mr. Anthony Lake, Executive Director of UNICEF (remote participation), closed the meeting with very inspiring remarks on the joint work carried out by the GPEI for decades. Acknowledging that challenges still persist, he stated that "We have no other choice but to succeed. The threat is diminishing but not destroyed. We owe it to the children of the world." He highlighted the key role played by community groups, vaccinators and polio workers, whom he defined as heroes.

## PPG stakeholders:

- Took note of the statements delivered by several Ambassadors and senior representatives which shows sustained political commitment to the polio programme and to the GPEI.
- Welcomed the financial contributions recalled by several donors, which reaffirms their sustained financial commitment to the polio programme.
- Welcomed the statements delivered by the Ambassadors of Afghanistan and Pakistan and commended both countries for the high-level political commitment to polio eradication of their respective governments. Stakeholders also appreciated the strong coordination between both national programmes, particularly in terms of joint planning and response to evolving epidemiology and in better reaching high risk populations.

- Welcomed the statement made by Nigeria and the rapid response launched in coordination with the Lake Chad countries following the recent outbreak in Borno. The PPG expressed concern over the possibility of detecting additional WPV cases in the region as the virus has been circulating undetected for four years, and recommended setting up more transit vaccination points and vaccinating an expanded age group to protect the population who may have never been immunized in previously inaccessible areas.
- Underscored the critical importance of interrupting WPV transmission in endemic countries in 2017 and emphasized once again the key role international and regional coordination plays in ensuring high vaccination coverage in complex environments with an increasing number of protracted crises to avoid re-importation of WPV or further outbreaks, including in Syria.
- Underscored the need for GPEI contingency plans should new outbreaks occur in conflict-prone areas.
- Regretted the continuing global IPV shortage, now affecting more countries than previously foreseen. The GPEI noted that if populations have high immunity, the risk of outbreaks in countries affected by the IPV shortage remains low. Stakeholders also requested more information on the GPEI conversations with the pharmaceutical industry to address this issue and on the future plans to rapidly increase coverage once IPV supply is available.
- Expressed appreciation for the commendable work of civil society organizations and community engagement, who have been game changers in the progress of the polio programme. The PPG strongly condemned attacks on health workers and paid tribute to all the volunteers on the occasion of the International Volunteer Day
- Acknowledged the slow pace of implementing the third objective of the Polio Endgame Strategic
  Plan containment and certification and noted that the recently established Containment
  Advisory Group would provide technical guidance on specific issues from GAP III that may need
  to be readjusted without reopening the document.
- Welcomed the financial update on the GPEI budget 2016-2019 and the absence of a cash gap for 2016 and for the first half of 2017. The PPG noted the reduction of more than \$200 million in the funding gap (from \$1.3 billion to \$1.1 billion) and welcomed the \$539 million of funding confirmed since the last PPG meeting in June 2016, from new bilateral and private sector donors. Stakeholders look forward to receiving the new Financial Resource Requirements to be published in early 2017. Stakeholders requested further information on the flexibility of the current budget 2016-2019.
- Took note of the two pledging moments proposed by the GPEI for 2017: the World Bank Spring Meetings in Washington D.C. (21-23 April) and the Rotary International Convention in Atlanta

(10-14 June), and requested information on: the funding needs for the GPEI post-2019 (including costs for IPV coverage, certification, containment, etc.) and for the post-certification strategy currently being developed, if possible, prior to the above-mentioned pledging events.

- Requested clarity on the post-certification timeline and on the possibility of shifting the eradication target date again. The GPEI noted that information on the post-certification timeline and costs will be available in due time, once the strategy is agreed upon next year through a highly inclusive process led by the GPEI and in close collaboration with the Transition Management Group. Regarding a possible shift of the eradication date, the GPEI stated that this will be determined by the ability or inability to interrupt WPV transmission in the coming months and flagged that a new target date has not been discussed by the Polio Strategy Committee or the Polio Oversight Board. This will also determine if there is an impact on the current GPEI budget 2016-2019.
- Welcomed the latest developments at all levels on transition planning, one of the key challenges ahead. The PPG underscored the importance of the GPEI global coordination capacity and stressed the need to help concerned countries strengthen their health systems and become more people-centered.
- Welcomed the establishment of the TIMB, the WHO Polio Steering Committee and the activities initiated by UNICEF on transition. Stakeholders requested an update on the forthcoming activities of the TIMB. The PPG agreed to hold a workshop on transition planning in Geneva in April, which will pave the way for the discussions at the next World Health Assembly in May 2017. The co-Chairs will confirm the date to participants at a later stage.
- Discussed that a main prerequisite for a successful transition at country level would be to engage and involve the different actors in the transition process to ensure capacity building and country ownership. Stakeholders suggested that there might be a need for additional WHO guidance provided to countries, with a view to strengthening health systems and integrating health security matters. The main focus should be the 16 priority countries that heavily rely on GPEI resources or GPEI funded staff.
- Welcomed the report of the WHO Secretariat on polio human resources (EB140/46) that will be discussed at the 140<sup>th</sup> session of the WHO Executive Board (23 Jan 1 Feb 2017) and expressed interest in learning more on the relationship between the polio programme and the new WHO Health Emergencies Programme. Stakeholders stressed the need to keep momentum on this important issue moving forward following the upcoming change in WHO leadership.
- Stressed the need to identify the essential polio functions to be maintained once the GPEI phases out, including by other health programmes. Polio pogrammes are embedded into wider national health systems. The international community needs to look at the impact of the polio

programmes beyond polio and may need to readjust other health programmes for long-term sustainability of key core functions: routine immunization, laboratory networks, outbreak response capacities, etc.

- Agreed on the selection process to appoint the next PPG co-Chair from a Member State to replace H.E. Mrs. Carole Lanteri, Ambassador and Permanent Representative of the Principality of Monaco to the UN in Geneva, at the completion of her term at the Spring 2017 meeting. The co-Chairs asked for expressions of interest by the end of January 2017.
- Requested the GPEI to circulate the presentations or detailed outlines of the presentations in advance of every PPG meeting, to enable all stakeholders to better prepare for the meetings and facilitate a well-informed discussion.
- Invited Mr. Anthony Lake and Mr. Chris Maher to participate in person at the next high-level meeting of the PPG. The co-Chairs will propose the date for the next high-level meeting of the PPG at a later stage.

The PPG asked the two co-Chairs to send the Chairs' Statement summarizing results of the meeting to the GPEI Polio Oversight Board, the Strategy Committee and the Independent Monitoring Board for their consideration and action as appropriate and asked the co-Chairs to represent their views at the next POB in-person meeting.