

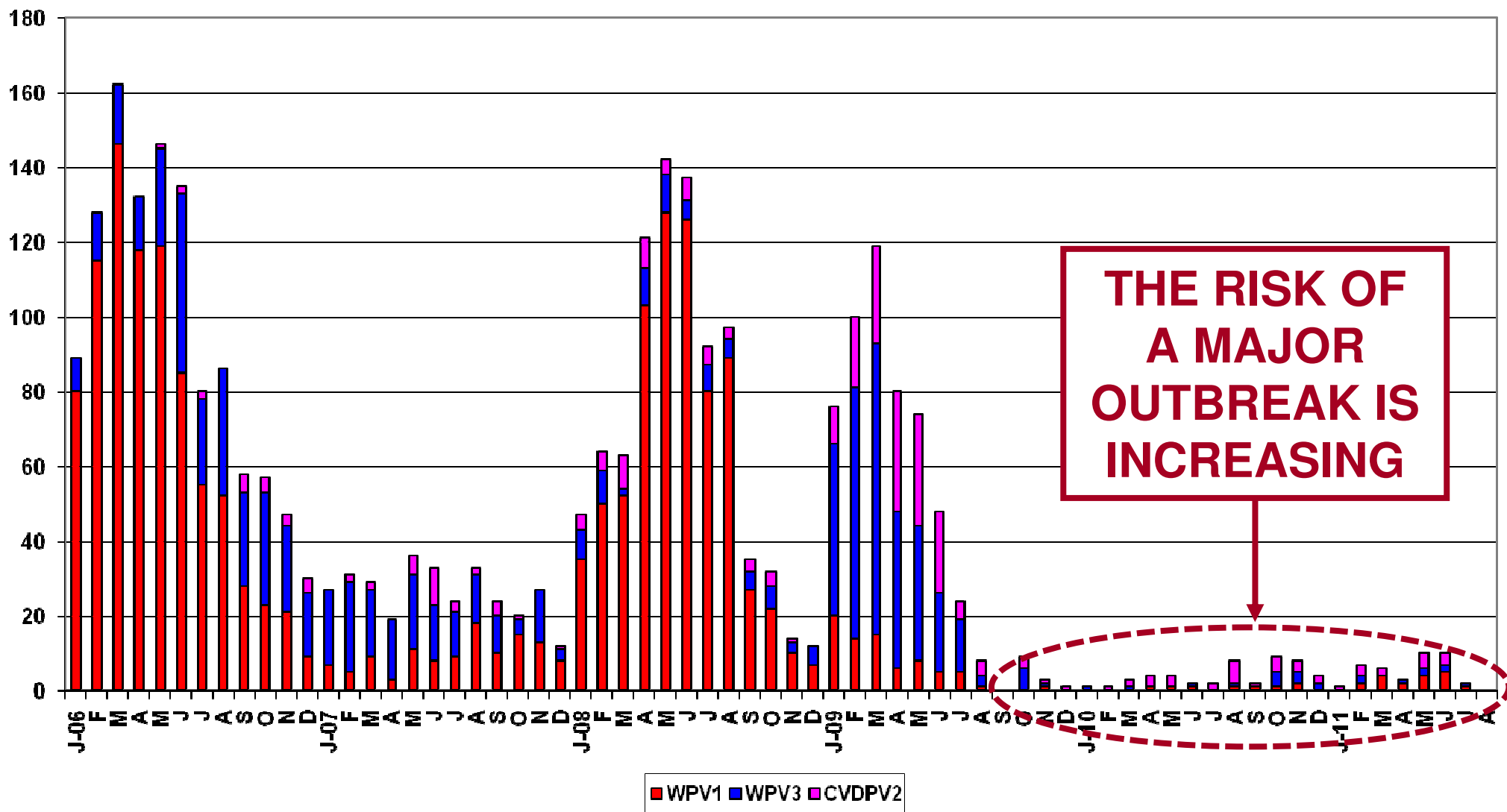
**Deliberations of the 22nd Meeting of
the Expert Review Committee on
Polio Eradication in Nigeria (ERC)**

13-14 October 2011

What's the good news?

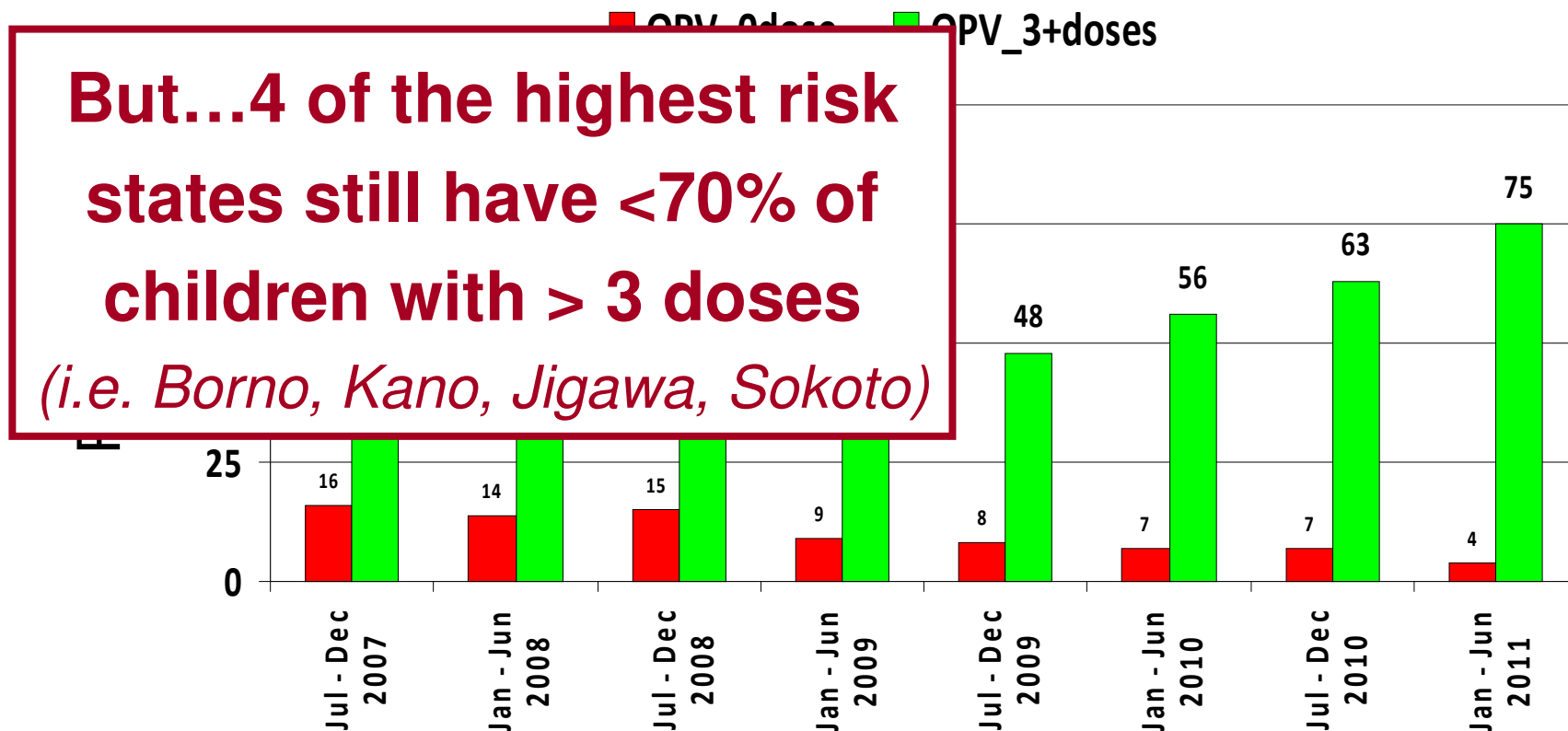
Nigeria avoided a major polio outbreak in 2011

(but only so far....)



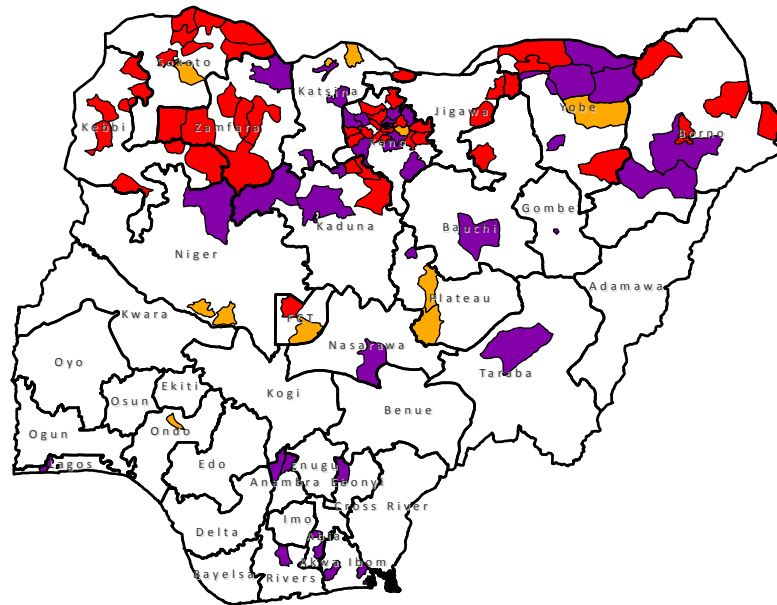
Immunity is improving (slowly) in endemic states

OPV status of NPAFP cases

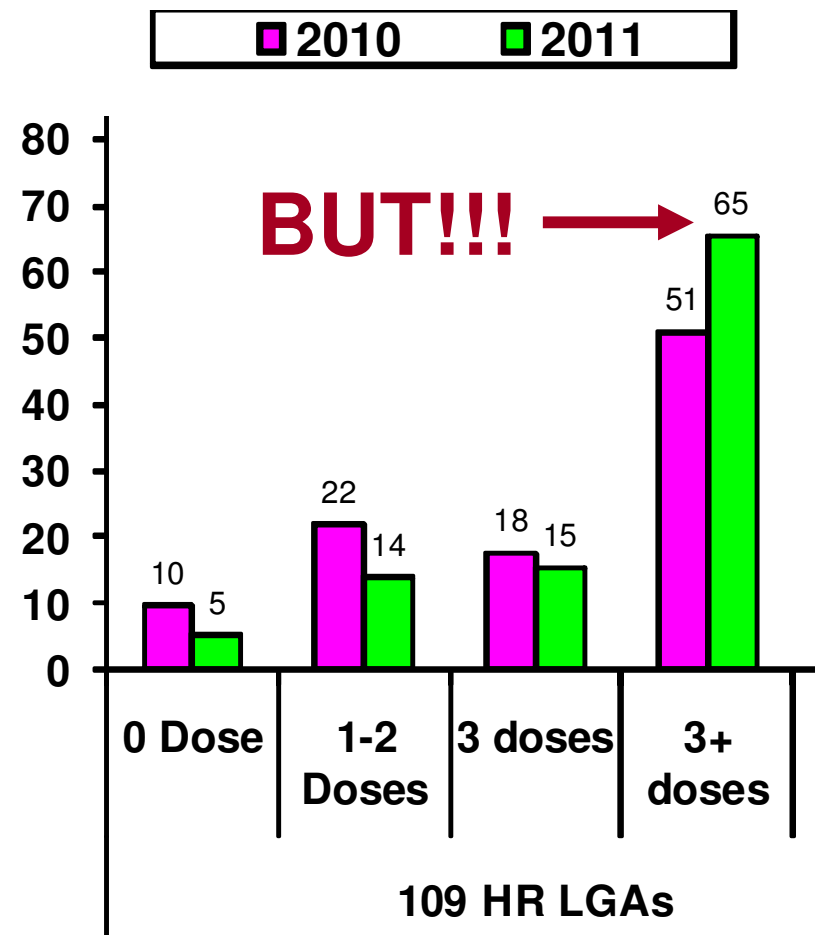


* Kano, Katsina, Jigawa, Zamfara, Yobe, Kaduna, Bauchi, Sokoto, Borno, Kebbi.

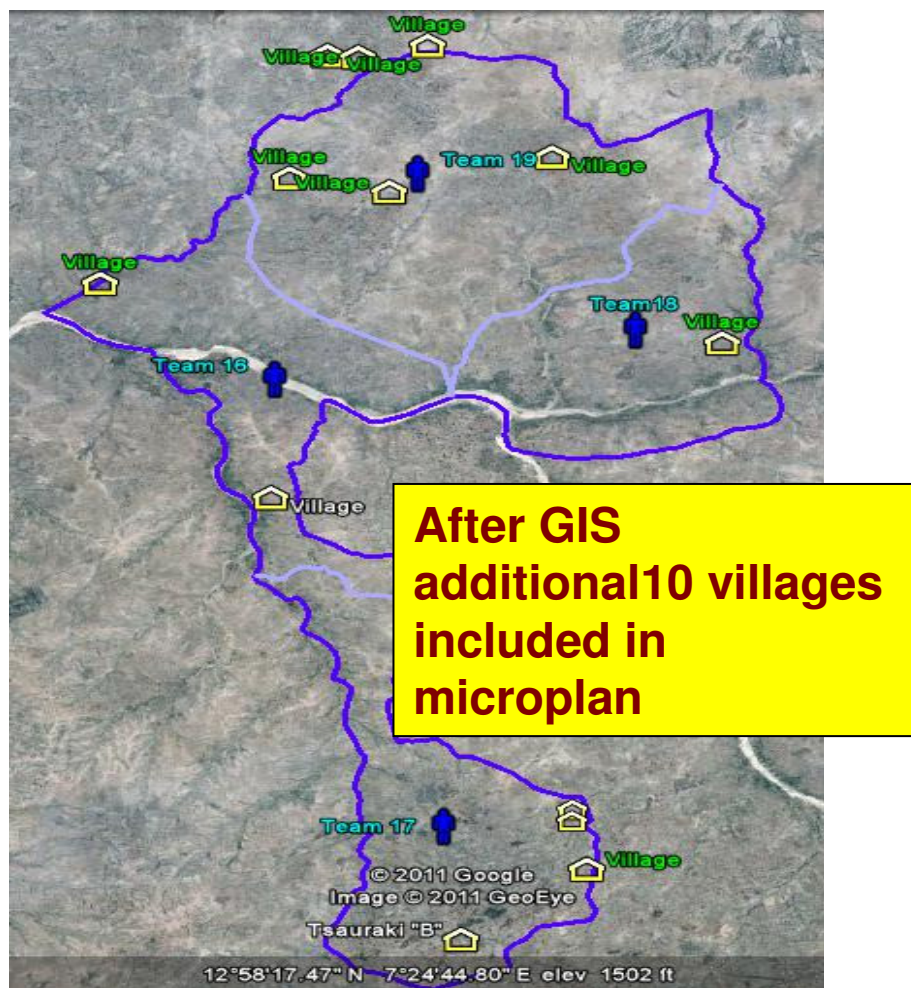
Better identification & targeting of highest risk areas for persistent poliovirus



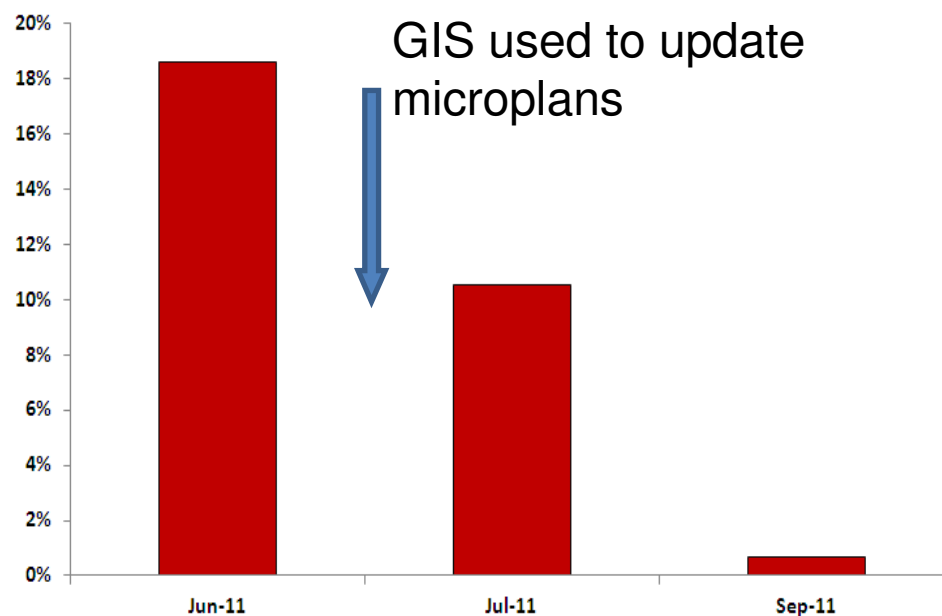
- Infected with WPV/cVDPV (50LGAs)
- Clustering of Compatibles(12 LGAs)
- Low population immunity (47LGAs)



New, innovative approaches to address chronic problems: GIS/GPS



Identifying Settlements Not on Microplan, Gangara Ward, Katsina Jul-11 IPDs



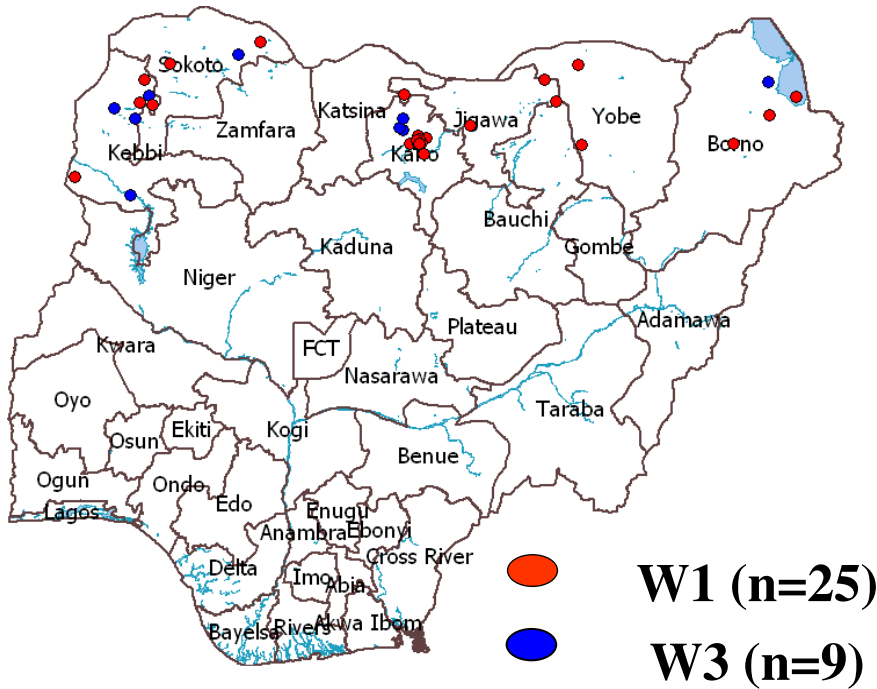
Innovative approaches to address chronic problems: **Community Participation Initiatives**

- Neighbor to Neighbor (N2N) – Sokoto
- Dattawa & Abokai – Zamfara
- Health camps and WASH - Kano
- Household Adoption (HHA) – Kebbi
- NIFAA Door to Door Mobilization – Borno, Jigawa, Kebbi, and Zamfara.

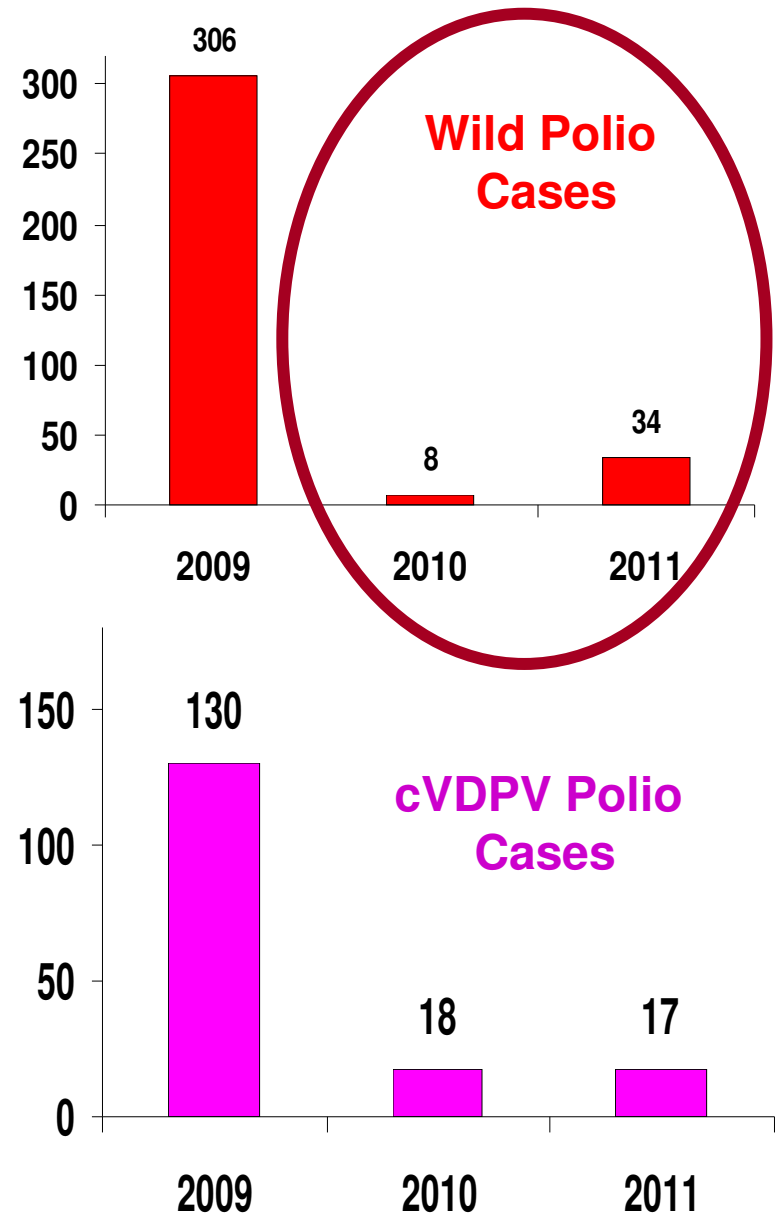


What's the BAD news?

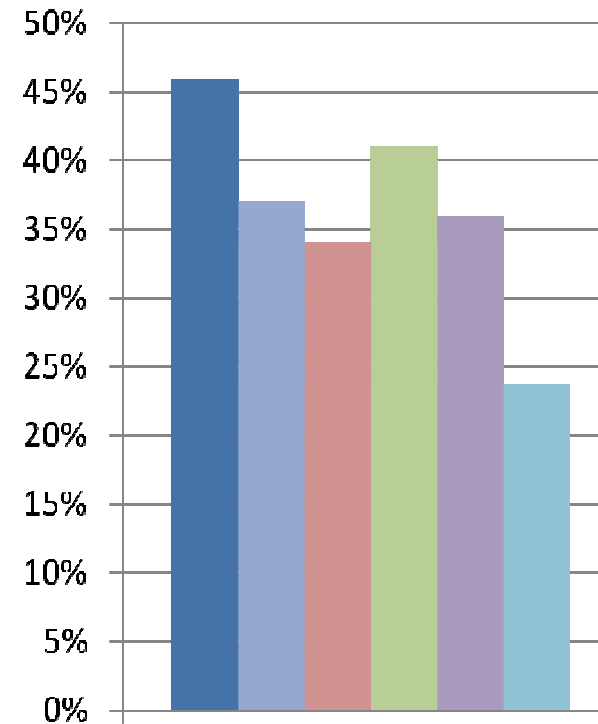
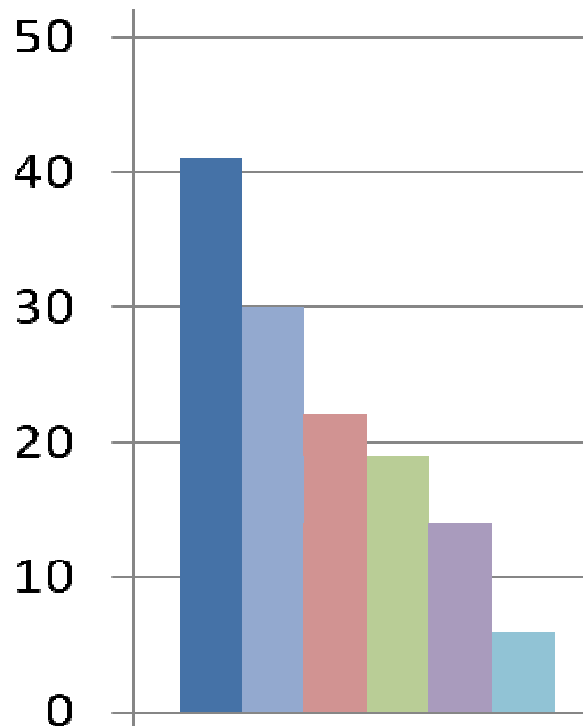
4 x Increase in Polio cases! All 3 serotypes!!



85% WPV cases are localized in Kano/Jigawa, Kebbi & Borno



Declining political oversight at critical juncture!

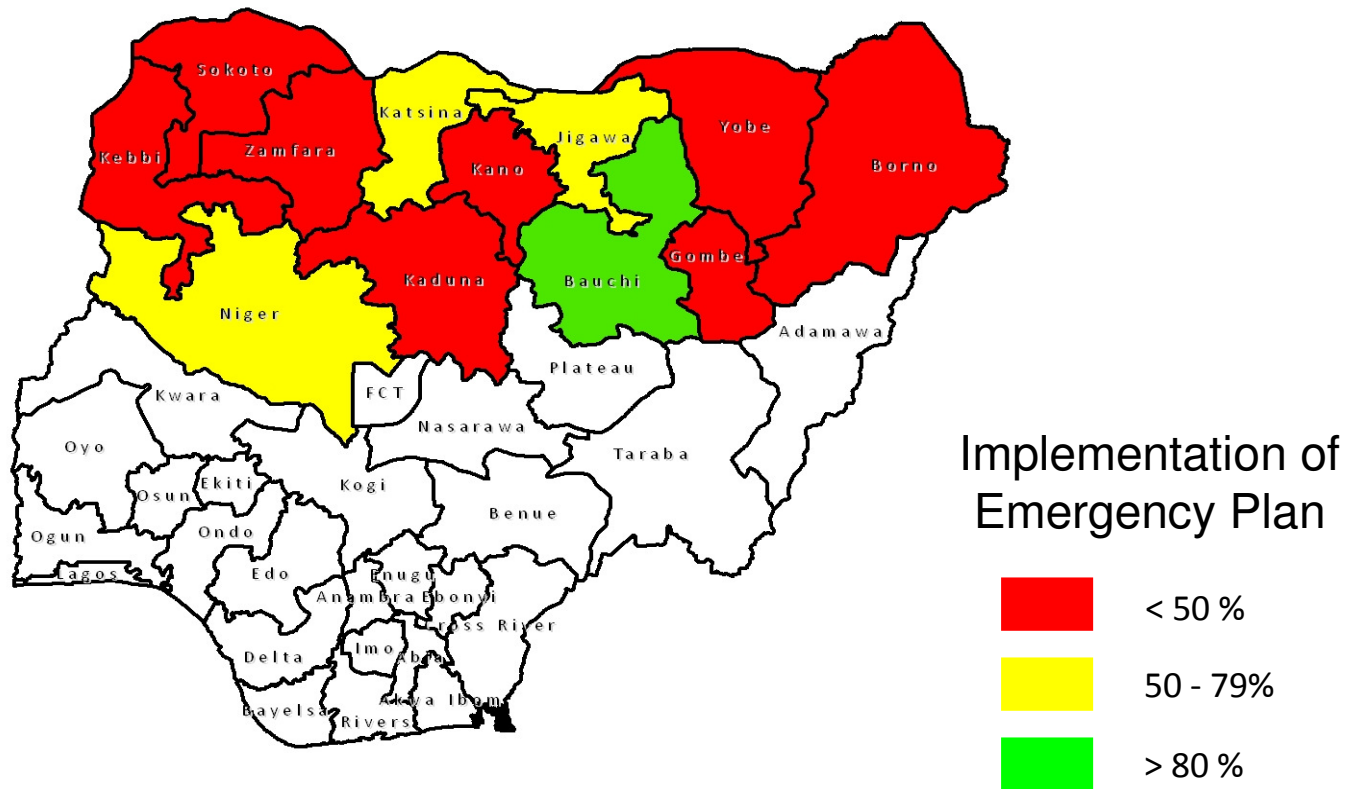


Personal involvement of Governors

Personal involvement of LGA Chairmen

■ Q1 2010 ■ Q2 2010 ■ Q3 2010 ■ Q4 2010 ■ Q1 2011 ■ Q2 2011

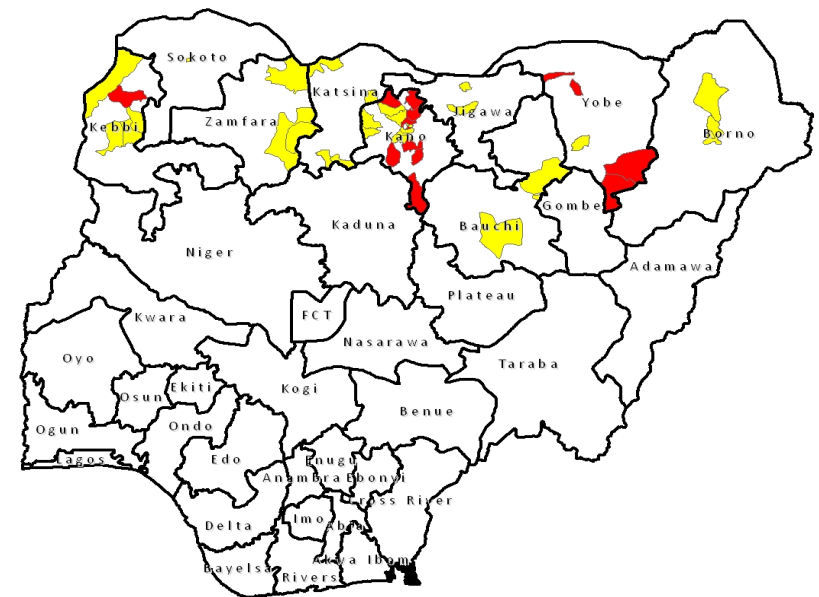
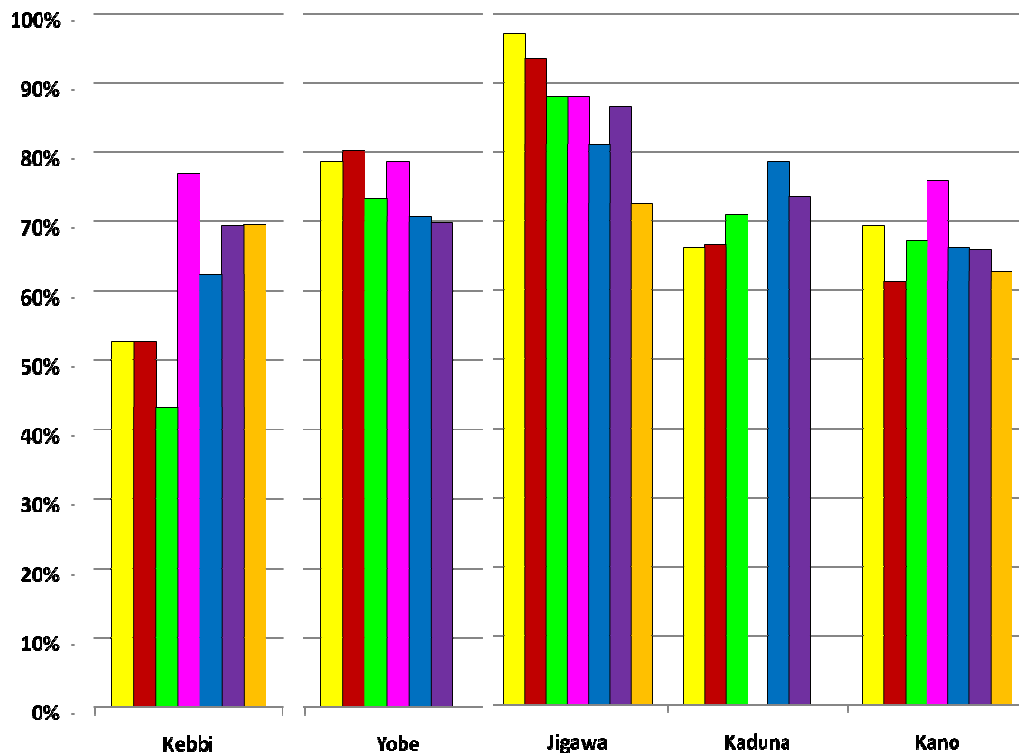
Emergency plans are not being implemented in key infected areas!



Campaign quality improving too slowly or declining(!) in *key areas*

Wards with 90% in key high risk states, Jan-Sep 2011

>30% of wards missing >10% children in 3-4 IPDs, May-Sep '11



3 Rnds (n=29 LGAs)
 4 Rnds (n=13 LGAs)

***How do we get back on track to
complete eradication by mid-2012?***

Immediate Priorities

- Identify, characterize & reach chronically missed children!
- Sustain intensive OPV campaign strategy
- Establish accountability framework for LGA Chairmen & Ward Heads
- Focus on key infected areas: Kano/Jigawa, Kebbi/Sokoto/Zamfara; Borno

ERC Recommendations

Chronically Missed Children

4 key issues in vaccinating the *chronically missed children*

- **Identify:** WHERE are these children?
- **Characterize:** WHO are these children and WHY are they chronically missed?
- **Reach:** HOW to adapt strategy as appropriate?
- **Evaluate:** after each round & revise accordingly.

ERC Recommendations

Understanding Chronically Missed Children

- thorough investigation of **each 0-dose AFP & polio case & their communities** (why?).
- **investigate all wards with >25% missed children** (whether due to 'non-compliant parents', 'absent children' or other) to understand root causes.
- establish **full State & LGA lists of settlements**, esp. 'non-compliant' communities (parents).
- map & track **migrant/mobile populations** in all 12 northern states, based on lessons to date.

ERC Recommendations

Reaching Chronically Missed Children (1)

- by Nov, **GIS-map** polio-infected LGAs & **redo microplans** to cover all settlements;
- by Jan: GIS-map all very high risk LGAs & redo microplans; **scale-up GPS-tracking of teams.**
- scale-up participatory, **community-based communications initiatives.**
- systematic engagement of **religious, as well as traditional leaders**, to resolve non-compliance.

ERC Recommendations

Reaching Chronically Missed Children (2)

- systematically implement the 'REDO' strategy based on line-lists of non-compliant households.
- ensure partner assistance for a 'socmob network' for persistent non-compliant settlements.
- systematically implement 'repeat' strategy in all wards with <80% coverage in high risk LGAs.

ERC Recommendations

Evaluate if You're Reaching Missed Children!

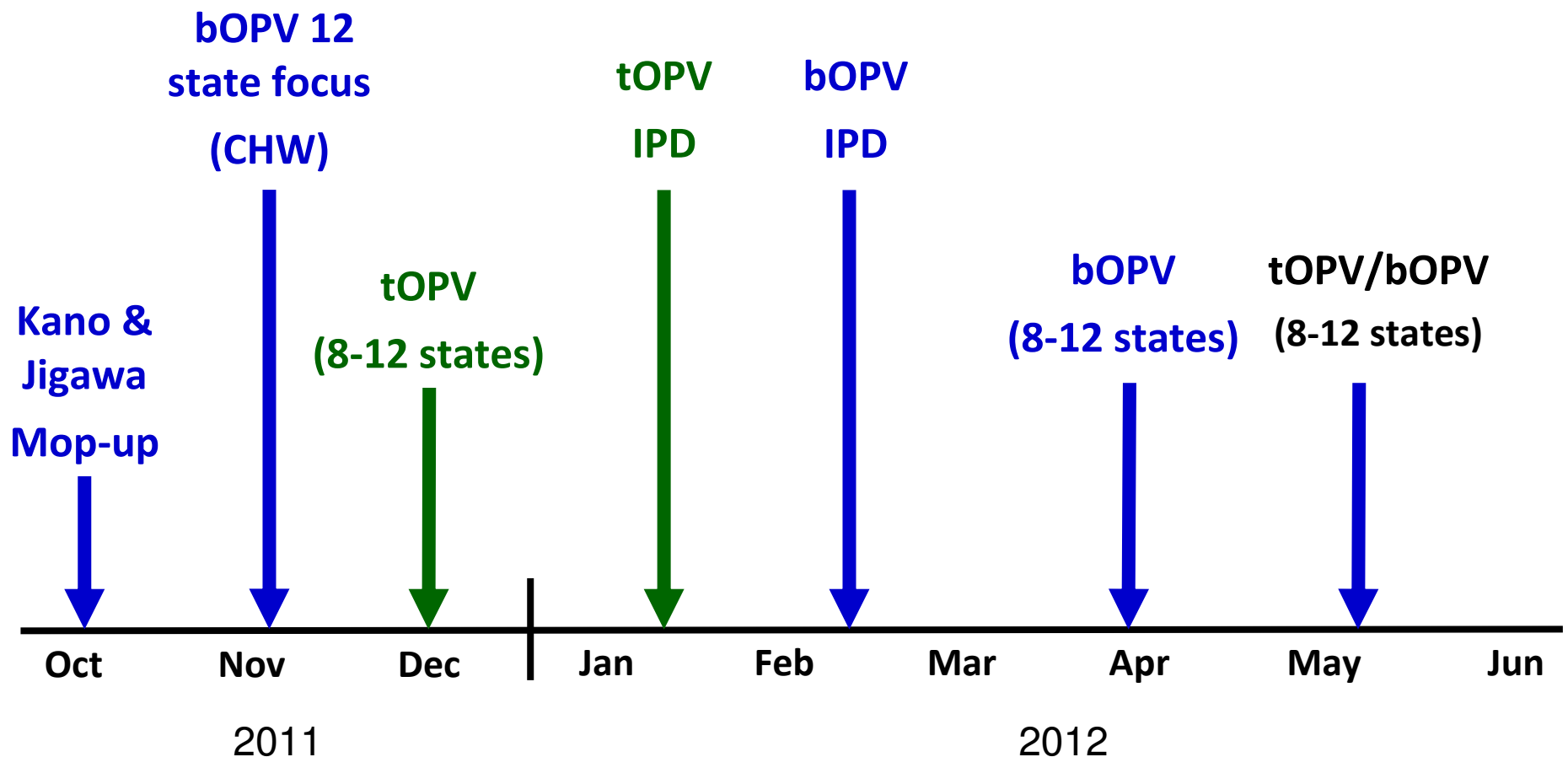
- **LQAs** should be the gold standard for assessing campaign quality & should be targeted at areas of persistent virus & highest risk.
- **independent monitoring:** rapidly assess the impact of replacing current monitors with senior personnel & revise strategy as appropriate.

ERC Recommendations

Intensive OPV Campaign Schedule

ERC Recommendations

IPD/SIA Schedule & Vaccine of Choice



ERC Recommendations

IPD/SIA Strategy 2nd half of 2012

Provision should be made for up to 4 large-scale sub-national OPV campaigns in the 2nd half of 2012 (covering 8-12 states), depending on the evolving epidemiology by April.

ERC Recommendations

Mop-up Strategy

Through end-2011, the mop-up strategy should be reserved for areas that become re-infected outside the key transmission zones.

From Jan 2012, the role of mop-ups in the transmission zones should be revisited based on the evolving epidemiology (esp for March 2012 period).

ERC Recommendations

Accountability Framework for LGA

Chairmen & Ward Heads

ERC Recommendations

**Accountability Framework for LGA
Chairmen & Ward Heads**

The new, Federal Government's 'Special National Task Force' should be focused on establishing & implementing an accountability framework for LGA Chairmen & Ward Heads performance in priority areas.

ERC Recommendations

Accountability Framework for LGA Chairmen & Ward Heads

Key elements of the accountability framework should include:

- (a) complete settlement lists & microplans,
- (b) vaccinator selection,
- (c) supervisor selection,
- (d) LQAs coverage, and
- (e) coverage non-compliant communities,

ERC Recommendations

***Surveillance & Routine
Immunization***

ERC Recommendations

Surveillance & Serosurveys

- fully implement the surveillance action plan, with particular attention to enhancing active surveillance in major hospitals;
- implement National Surveillance Review in Q1 2012.
- conduct another serosurvey in 2012, expanding the scope to include Kano & other infected/priority areas (e.g. Kebbi, Borno).

ERC Recommendations

Routine Immunization

- **National Immunization Strategy:** a national strategy should be established, building on lessons learned, in advance of the Vaccine Summit planned for mid-2012.
- **Targeted LGA Acceleration:** recognizing the int'l implications of the ongoing cVDPV2, a targeted acceleration of routine immunization should be implemented in those LGAs.
- **Vaccine Supply Security:** the Federal Government should establish in 2012 its 'first charge' for vaccines in the capital budget & ensure timely release of that financing.

Summary

***The recent upsurge of polio cases is
an alarming warning.....***

*....reaching the chronically missed
children must now be EVERYONE'S
priority to complete eradication!*

**FIND &
VACCINATE THIS
CHILD!!!!**

