

## CHAIRS' STATEMENT

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

**Monday, 26 June 2017**

Please note that the meeting presentations are available on the [PPG website](#).

On 26 June 2017, 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 representatives of core GPEI partners, stakeholders from governments at the ambassadorial, senior-official, and expert level from capitols 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, an update on the polio transition processes, including the recent discussion of the Transition Independent Monitoring Board (TIMB) and the outcome of the 70<sup>th</sup> session of the World Health Assembly. A round table discussion by non-polio stakeholders was also held.

The meeting started with the election by acclamation of H.E. Ms. Mitsuko Shino, Ambassador and Deputy Permanent Representative of the Permanent Mission of Japan to the International Organizations in Geneva, as co-chair of the PPG from a Member State-. She succeeds H.E. Ms. Carole Lanteri, Ambassador and Permanent Representative of the Principality of Monaco to the United Nations in Geneva. PPG stakeholders expressed their appreciation of the outstanding leadership of Ambassador Lanteri as PPG co-chair and welcomed Ambassador Shino in her new role.

Dr. Chris Elias, President of the Global Development Program, Bill and Melinda Gates Foundation, in his capacity as Chair of the Polio Oversight Board (POB), delivered opening remarks. He celebrated the successful Global Pledging Moment at Rotary International Convention on 12 June 2017, which resulted in \$1.2 billion pledges. He noted the recent circulating vaccine-derived poliovirus type 2 (cVDPV2) outbreaks in Syria and in the Democratic Republic of Congo (DRC), and stressed the importance of continued commitment from governments and donors. He acknowledged the challenge of sustainable funding for other essential public health activities after certification, now covered by polio funding, and the importance of involving non-polio stakeholders in the discussion.

Mr. Michel Zaffran, Director of Polio Eradication at WHO, provided stakeholders with an overview of the status of polio eradication efforts. Although Pakistan and Afghanistan have experienced the lowest number of wild poliovirus (WPV) cases to date, there has been no reduction in ongoing positive environmental isolates. He noted that the lack of reduction may be due to the increased frequency of detection. However, he was optimistic that acute flaccid paralysis (AFP) surveillance is covering all regions including security compromised areas in Pakistan and Afghanistan. In Nigeria, 9 months have passed since the last WPV1 was detected; however, there is still uncertainty that transmission has been stopped, since areas remain inaccessible. The programme is using

innovative strategies to expand vaccination coverage and surveillance, including satellite imagery and the military to reach inaccessible children. Regarding the Inactivated Polio Vaccine (IPV), high-risk countries have access to it, but the global supply remains tight throughout 2017. Mr. Zaffran indicated that scientific evidence supports the effectiveness of using fractional doses of IPV (fIPV) to boost immunity of the population, giving weight to recommendations of the Strategic Advisory Group of Experts (SAGE) for governments facing the shortage to consider adopting fIPV. As noted by Dr. Elias, MR. Zaffran also noted the challenges of the continued emergence of new outbreaks of cVDPV outbreaks such as the recent ones in Syria and DR Congo. The response to these cVDPV2 outbreaks will soon be launched.

Mr. André Doren, Senior Strategist, GPEI External Relations, briefed stakeholders on Rotary 2017 Global Pledging Moment, which resulted in \$1.2 billion pledges and commitments, with appreciation and thanks to Rotary for hosting the events. The next step is to operationalize those pledges and to fill the \$300 million gap by advocating at important upcoming events, inter alia: G-20, UN General Assembly and World Polio day.

Sir Liam Donaldson, Chair, Independent Monitoring Board (IMB) and Polio Transition Independent Monitoring Board (TIMB), updated participants on the discussions of both Boards. He stressed that all polioviruses (WPV, cVDPVs and positive environmental samples) present equal risk for causing clinical cases of polio and paralysis. He expressed great concern over the intractable problem of mobile populations in Afghanistan and Pakistan. He emphasised the need for innovative approaches to solve this problem and to urgently strengthen routine immunization. With regard to the first TIMB meeting, he flagged that there are divergent views regarding polio transition, including on the leadership role after the sunset of the GPEI. He summarized by noting that there seemed to be considerable concurrence with EPI and surveillance strengthening, but the other elements will need further evaluation and debate.

Dr. Ian Smith, Co-Chair of the WHO Global Steering Committee on Transition Planning and Executive Director of the Director-General's Office briefed stakeholders on the outcome of the discussion about the transition process in WHO at the 70<sup>th</sup> World Health Assembly. With regard to the high-level oversight in the organization, he mentioned that Director General elect, Dr. Tedros, has been already briefed on this process. In November, there will be a meeting between HQ leadership and WHO representatives from the 16 priority countries as an important step of this process. He explained country-specific data collection, financing and program budget development, human resource planning, monitoring and communication strategy in this process.

Dr. Steve Cochi, Senior Advisor, Centers for Disease Control, briefed stakeholders on the overview of polio resources covering non-polio public health interventions. He stressed that the transition process not only poses a risk to other health goals, but also brings opportunities for polio assets to contribute to other health areas. He also emphasized that surveillance of vaccine preventable diseases (VPD) heavily rely on polio funding.

A round table discussion on perspectives from non-Polio global health actors, moderated by Mr. Dennis King, Polio Transition Manager, UNICEF followed. Mr Peter Graaff, Director of the Global Initiative of WHO's Health Emergencies Programme (WHE), referred to the overlap between the 16 priority countries in polio transition and priority countries in WHE and underscored the importance of capacity building at the country level. Mr. Craig Withers, Senior Director for International Support, The Carter Center, explained that Neglected Tropical Diseases (NTDs) programs are relatively independent from polio programs. He encouraged the WHO polio department to interact with WHO NTDs department. Dr Jean-Marie Okwo Bele, Director, Immunization, Vaccines and Biologicals at WHO, noted the importance of strengthening routine immunization and carrying forward the lessons learned in Polio eradication. He addressed the need to discuss with countries how to identify the technical assistance they

need. Dr. Katrina Kretsinger, Acting Measles Rubella Team Lead, WHO, highlighted the cost-effectiveness of measles and rubella vaccination, and the need to strengthen routine immunization. She suggested that the measles and rubella initiative would naturally align with the capacities established by polio eradication efforts.

WHO Director General (DG), Dr. Margaret Chan, made remarks at her final PPG meeting as DG. She thanked partners and countries for their political and financial support, praised frontline health workers and celebrated the progress made after the establishment of GPEI. However, she stressed that the eradication is not yet done and referred to the recent cVDPV outbreaks as an example to show the urgency to stop transmission of Polio everywhere. She also underscored the importance of careful planning of Polio transition in order to keep a Polio-free world and maintain other essential public health functions. PPG stakeholders expressed their appreciation for Dr. Chan's leadership and requested her continued commitment to global health including polio eradication.

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. They further commended the high-level political commitment of the endemic countries and acknowledged the continued efforts and progress made towards polio eradication.
- Welcomed the statement made by Nigeria regarding the rapid response launched in coordination with the Lake Chad countries following the outbreak in Borno in August 2016. The PPG expressed concern over the uncertainty of stopping WPV circulation due to the remaining inaccessible areas, and encouraged continued commitment by the governments of the Lake Chad region and stakeholders.
- Welcomed the statement by Pakistan and appreciated the lowest number of cases in Pakistan and Afghanistan. Stakeholders also 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 coverage of vaccination and surveillance.
- Expressed concern about the cVDPV2 outbreaks in DRC and Syria emphasized how crucial it is to strengthen routine immunization and high quality surveillance. The PPG further stressed the increasingly important role environmental surveillance will play as we approach eradication, while flagging that its expansion will be gradual, as it is costly and its usefulness is setting-dependent.
- Underscored the critical importance of accelerating implementation of the third objective of the Polio Endgame Strategic Plan – containment and certification. The PPG acknowledged that there are currently 86 designated Polio Essential Facilities (PEFs) in 30 countries, and recommended reducing the number of PEFs to minimize risks.
- Appreciated and thanked Rotary International for hosting 2017 Global Pledging Moment and welcomed pledges and commitments by donors. Stakeholders acknowledged the need to operationalize these pledges and to fill the \$300 million gap.
- Welcomed the 14<sup>th</sup> report of IMB entitled "Every Last Virus" and in particular, its recommendation to look for innovative and transformative solutions. It further welcomed the successful first meeting of the TIMB.

- Regretted the continuing global IPV shortage, now affecting more countries than previously foreseen and noted the explanation of the SAGE recommendation to use fractional doses of IPV.
- Welcomed the report submitted by WHO Secretariat to 70<sup>th</sup> WHA and the decision to request WHO Director General to develop a Strategic Action Plan on Polio transition by end of 2017. Stakeholders underscored the need to identify the essential polio functions to be maintained in order to maintain a polio-free world and sustain progress in other programmatic areas and stressed that this need should be also recognized by non-polio stakeholders.
- Insisted on the need for WHO to carry out risk assessments before terminating positions as a consequence of the GPEI ramp-down to avoid unnecessary loss of skills and capacities, and to explore other options, such as cost-sharing staff with other programmes.
- Welcomed that Director General-elect, Dr. Tedros, has been already briefed on the Polio transition and requested commitments by WHO leadership to continue. The PPG would welcome the opportunity to have an exchange with Dr. Tedros in an upcoming PPG meeting.
- Requested further information about the discussion on transition in the governing bodies of UNICEF and more detailed information on the transition planning for the thousands of social mobilizers in the post-transition period.
- Discussed the possibility of holding a workshop to follow up on transition planning in Geneva, possibly back-to-back with the next High Level Meeting of the PPG in December and agreed that the co-chairs will inform participants 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.