

Polio Eradication in the African Region





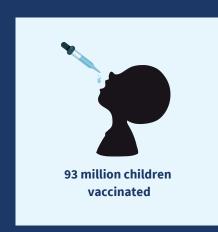
Highlights (January - March 2024)

In August 2020, the African Region accomplished an extraordinary milestone by achieving the certification as free of indigenous wild poliovirus. This remarkable achievement came after years of dedicated efforts, and the region has remained steadfast in its commitment to eradicating all forms of polio, safeguarding children from the devastating effects of paralysis and death.

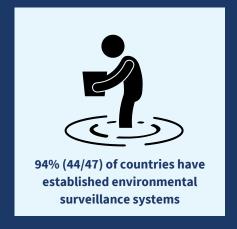
In December 2023, the novel oral polio vaccine type 2 (nOPV2) made history by becoming the first vaccine to move from use under the World Health Organization (WHO) Emergency Use Listing (EUL) recommendation to full licensure and prequalification for its expanded use. The African region is leading its deployment, with over a billion doses administered since March 2021.

The WHO Regional Office for Africa (WHO AFRO) is implementing a comprehensive set of prevention and response activities including enhancing routine immunization, implementing supplementary immunization activities, building human resource capacity, providing technical support, strengthening surveillance activities, and improving data and information management (Including the use of geospatial technologies). In addition, WHO is leveraging the existing polio structures and assets to support other crucial public health priorities particularly enhancing vaccine-preventable disease surveillance, strengthening routine immunization, and increasing response capacity for other epidemic-prone diseases.

Our impact in the African Region

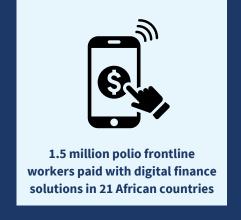












We support countries



Maintaining high quality surveillance to ensure polioviruses are detected on time. The region achieved a 6.7 Non polio Acute Flaccid Paralysis rate (full year) and a 89% stool adequacy rate in 2023, meeting targets for both key core surveillance indicators. Over 241,000 active surveillance visits were documented electronically with AFRO developed technologies in 2023.



Detecting 78 polioviruses in 15 countries in 2024 (as of 10 May, 2024). cVDPV1 and cVDPV2 cases were confirmed with laboratory testing. 55% (26/47) of countries in the African Region reported polio cases in the past year. For as long as there is ongoing transmission elsewhere Africa, with its open borders and deep cultural and economic ties to the world, shall remain vulnerable, and viceversa.



Responding to polio outbreaks by implementing 15 supplementary immunization activities (SIAs) in the first quarter of 2024. In total, more than 93 million children were vaccinated with at least one dose of polio vaccine.



Enabling 94% (44/47) of countries in the Region to have optimal Environmental Surveillance Systems. 47 new environmental surveillance sites were set up in 2023 (7% more sites compared to the previous year), resulting in enhanced detection activities. More than 7,300 environmental Acute Flaccid Paralysis specimens were collected and tested in the past year.



Enhancing country capacities through the AFRO Geographic Information Systems Centre to map cross-border communities, migratory routes, border crossings and transit routes using key electronic data tools (eSURV, ODK).



Reaching over 1.5 million frontline workers with timely payments in 21 African countries. WHO's Mobile Money digital payment system designated country-specific areas in Mali, Ghana and Cote d'Ivoire, where 99% of campaign workers were paid successfully in 2023. The system can serve as a model for agencies committed to delivering improved health campaigns in resource-challenged settings.



Tracking polioviruses through the 16 Polio laboratories able to provide timely determination of the origin and type of poliovirus in stool and wastewater samples. In 2023, WHO conducted trainings for regional polio laboratory data managers and health professionals. Out of the 11 laboratories trained to carry out genetic sequencing for polio (both on Sanger and MinION), 6 are already conducting pilot testing in 2024 to ensure high-quality laboratory data.

Challenges

- Resource challenges lead to decreased preventive supplementary immunization activities.
- Conflict and insecurity disrupt services and complicate the difficult jobs of health workers.
- Fragile vaccine supply with few manufacturers and limited capacity following disruptions caused by the COVID-19 pandemic.
- Vaccination refusal continues due to misinformation and community fatigue, which was exacerbated during and after the COVID-19 pandemic.
- Health systems in Africa are strained by competing health priorities and emergencies, which negatively impact efforts to address health challenges, including polio, resulting in delayed vaccination campaigns and variable quality of those.

Way forward

- Improve population immunity focusing on reaching zero dose, under immunized children and hard-to- reach and/or security-affected areas.
- Prioritize the acceleration of acute flaccid paralysis (AFP) and environmental surveillance.
- Advocate for a budget line to support surveillance activities in an integrated manner and to contribute financially to vaccination campaigns with a priority in high-risk areas.
- Strengthen laboratory sequencing capacity.
- Advance gender equality and the empowerment of women to eradicate polio.
- Intensify vaccination campaigns, leveraging technology and innovative solutions.
- Strengthen cross border coordination, communication and collaboration of polio activities from planning to implementation, monitoring and evaluation.
- Prioritize polio transition to strengthen national public health systems.

Find out more:

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