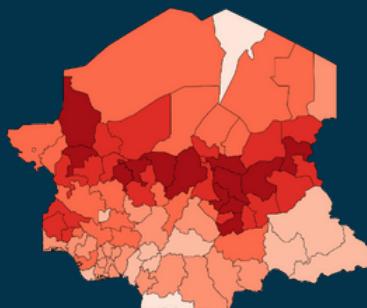




ONE FORCE AGAINST POLIO

Polio eradication in the Lake Chad Basin is advancing through strong regional coordination, with Cameroon, Central African Republic, Chad, Niger, and Nigeria committed to vaccinating every child. However, circulating variant poliovirus type 2 (cVDPV2) outbreaks across all five countries threaten Africa's goal of ending active cases by December 2025. Geopolitical instability, insecurity, and climate change further complicate efforts.



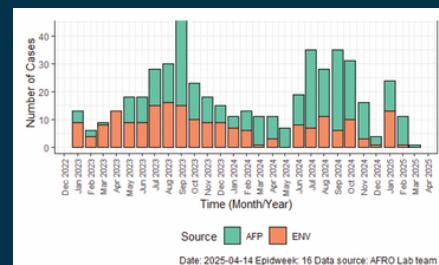
Polio variant type 2 transmission risk in the LCB

»»» CHALLENGES

Cross-border population movements through porous borders exacerbate the risk of transmission, as many areas report below-target surveillance thresholds.

Significant immunity gaps still persist due to low OPV and IPV coverage.

These challenges are further exacerbated by geopolitical instability, socioeconomic disruptions, insecurity, and climate change.



LCB Yearly distribution of monthly polio cases

»»» EPIDEMIOLOGY

Polio transmission in the Lake Chad Basin follows a seasonal pattern, with peaks between July and October. While cases were high in 2022, 2023–2024 saw sustained but lower circulation. Nigeria experienced the highest burden, with a major spike in Q3 2023, while Chad faced continuous transmission across multiple districts.

Though Niger, Cameroon, and the Central African Republic had fewer cases, outbreaks increased in late 2024 and early 2025. The lower case count in early 2025 may reflect incomplete reporting rather than a true decline.



OVERVIEW



70M+ children vaccinated across the Lake Chad region in 2024



Active surveillance visits surged in early 2025, reflecting intensified detection efforts



Cross-border plan endorsed and joint vaccination launched by Lake Chad Health Ministers



High-level advocacy ramped up with joint ministerial commitments and cross-border action plans in 2025

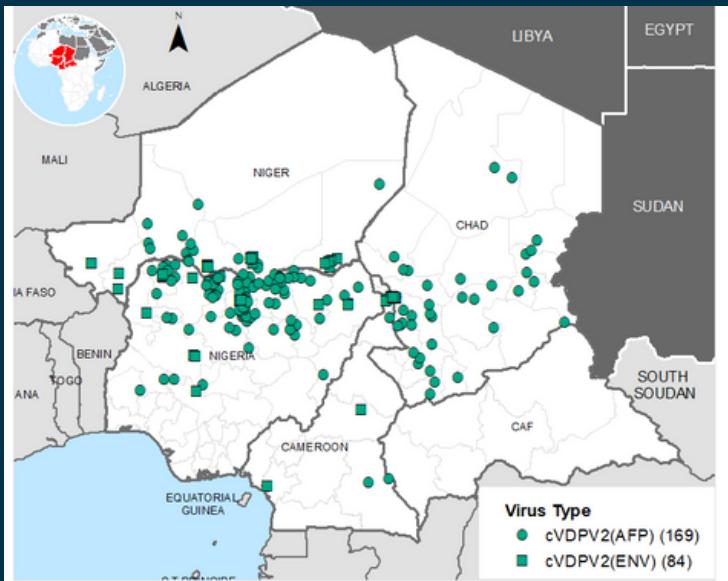


»»» ONGOING EFFORTS

POLO OUTBREAK RESPONSE IN THE LCB

Nigeria and Niger each host over 1.6 million internally displaced persons (IDPs), mainly in border and conflict-affected areas, where vaccination efforts are focused to curb polio spread. Strengthened surveillance, bolstered by enhanced lab capacity, environmental monitoring, and community-based reporting, is improving outbreak detection and response. Community engagement remains vital.

Local health workers, volunteers, and traditional leaders play a key role in vaccine acceptance and countering misinformation. Recent community-driven awareness campaigns have significantly boosted vaccination coverage, especially among hesitant groups.



COUNTRY PROFILES

Cameroon

The country faces security challenges from separatist conflicts and Boko Haram, along with a mobile population that includes refugees and Internally displaced persons (IDPs). Public health is impacted by outbreaks of vaccine preventable diseases, high child mortality, and poor access to care in conflict zones.

Variant poliovirus type 2 persists, with recent detections. Misinformation, that lead to vaccine hesitancy, and hard-to-reach areas complicate efforts, demanding targeted strategies.



Chad

Chad's polio efforts face major challenges from surveillance gaps, poor campaign quality, and complex operations. Orphan virus detections signal surveillance gaps and potential missed outbreaks. 2024 SIAs were poor. The Sudan conflict has brought over 931,000 arrivals, straining health services. Insecurity, population mobility, and tough terrain further limit vaccine access and impact campaign effectiveness. Constant floods in Chad delayed several SIA in 2024.



Nigeria

Africa's most populous country, Nigeria faces insecurity from insurgency, banditry, and separatist movements, especially in the northern regions where active transmission of the virus continues. Population movements are vast, with 9.4 million nomads, 3.4 million displaced people, and rising refugee numbers. Polio transmission persists. Insecurity hampers vaccination—57% of settlements were missed in November 2024—and routine immunization remains low, with IPV2 at 44%.

Central African Republic

Conflicts and displacement continue to limit healthcare access and weaken disease surveillance. Polio eradication efforts face insecurity, funding delays, and operational gaps and weak surveillance in conflict zones, which are hard-to-reach areas.

Niger

Niger faces major security challenges and limited access to remote areas due to armed groups and regional instability. Displacement is widespread, with 4.3 million IDPs and 417,000 refugees. Polio remains a concern. Despite high IPV1 and IPV2 coverage, surveillance gaps persist evidenced by orphan virus detections. Delayed transport of samples hinder immediate response to new outbreaks. Recent floods also impacted over 219,000 people, highlighting the country's vulnerability to extreme weather.

HIGHLIGHTS

Q1 2025

Health Ministers Launch Landmark Polio Campaign to Protect 83 million Children in the Lake Chad Basin

In a historic move to eradicate circulating polio variant type 2 in the Lake Chad Basin, the Ministers of Health and representatives from Cameroon, the Central African Republic (CAR), Chad, Niger, and Nigeria convened on the 17 April, in N'Djamena to launch a synchronized regional vaccination campaign aimed at protecting over 83 million children under 5. The initiative is a crucial milestone in the fight against variant poliovirus type 2, which continues to pose a threat to millions of children across the region.



In direct response, mass immunization campaigns across the Lake Chad Basin vaccinated nearly 12 million children between April 2024 and January 2025, aiming to stop the virus in its tracks.

These efforts are now part of a broader vaccination campaign launching this month to reach 83 million children across five countries: 2.5 million in the Central African Republic, 7 million in Cameroon, 4 million in Chad, 9 million in Niger, and over 62 million in Nigeria.

April nOPV2 Campaign

Country	Target population	nOPV2 approved by ORP	No of days to SIA start date
Cameroon	7,442,572	8,032,235	0
CAR	2,316,891	2,636,450	0
Chad	4,108,055	5,463,800	1
Niger	9,244,623	7,783,073	10
Nigeria	62,101,271	70,469,150	2
Total	85,213,412	89,467,708	



Summary of national preparedness	CHAD	CAM	CAR	NIGER	NIGERIA
1. Planning, coordination and funding	96%	100%	96%	96%	100%
2. SIA Training	95%	100%	85%	60%	100%
3. Monitoring and supervision	94%	100%	94%	94%	88%
4. Vaccine, Cold Chain and Logistics	100%	100%	100%	100%	100%
5. Advocacy, Social mobilization and communication	96%	95%	83%	88%	92%
6. Cross-border coordination and synchronization	93%	93%	86%	100%	100%
7. Adverse event following vaccination (AEFI)	100%	100%	100%	100%	NA
8. Security	100%	100%	83%	100%	45%
Status of preparedness	97%	99%	91%	92%	89%

Joint launching by Ministers of health of LCBs was conducted on the 17th April in N'Djamena

All countries have achieved the desire level of preparedness at national level. Niger is on course at 10 days to implementation.

Status of preparedness of April 2025 campaign for the five LCB countries



GPEI partners meeting the governor of N'Djamena



7-10 April: GPEI Technical Advocacy Mission to Chad

From the 7 to 10 April 2025 a high-level GPEI meeting visit Chad in preparation for the SIA campaign happening from 24-28 April. The mission to Chad aimed to strengthen political commitment, coordination, and operational readiness for polio eradication. High-level engagements were facilitated between the Ministry of Health, the Governor of N'Djamena, the Mayor of N'Djamena, and other national authorities and international partners, such as WHO AFRO/ and LCB Task Force, UNICEF, the Gates Foundation, and the Senior GPEI Technical Advisor to align efforts and reinforce support for the national polio programme.



9 April : RD WHO & UNICEF Virtual Quarterly call with LCB Ministers of Health

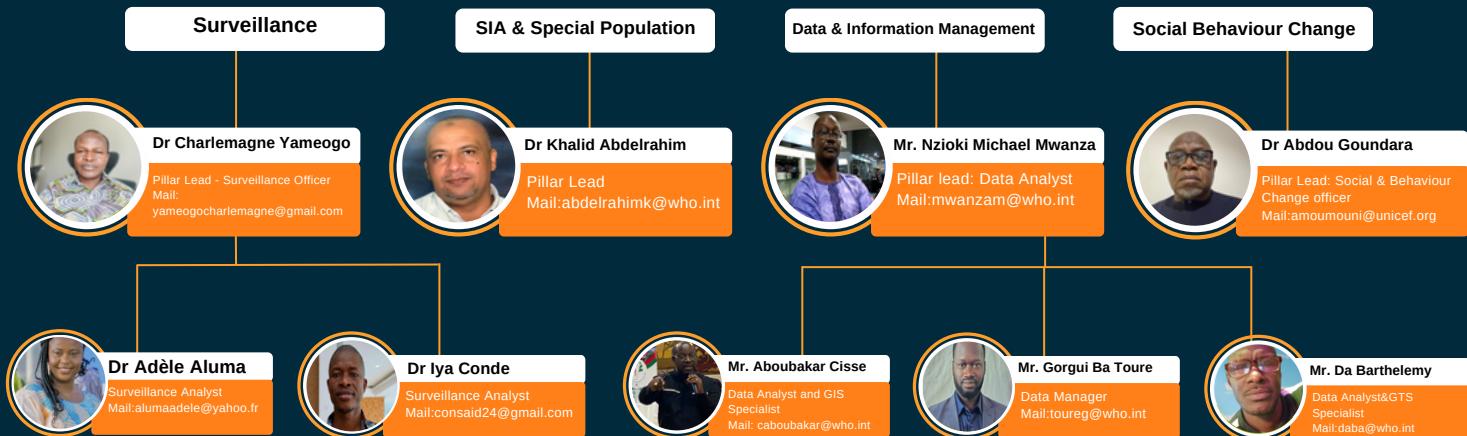
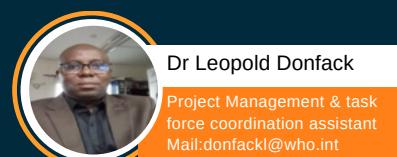
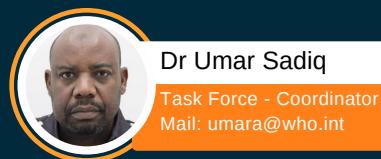
A high-level virtual meeting was held on 9 April between WHO and UNICEF Regional Directors and the Ministers of Health of Cameroon, Chad, Niger, and senior health authorities from Nigeria and CAR. The meeting introduced the Lake Chad Basin Polio Eradication Task Force, review preparedness for the April–May SIAs, and reaffirmed ministerial commitment to quality campaigns and strong surveillance. It also addressed strategies to overcome non-compliance and reach children in border areas and among special populations, while securing support for a high-profile campaign launch during African Vaccination Week.

ONE FORCE AGAINST POLIO

April 2025
Edition #1

LCB countries held cross-border coordination meetings in 2024 leading to the Polio Eradication Cross-Border Coordination Plan 2024–2025. The plan was updated in Abuja (February 2025) to reflect on-the-ground realities.

To address ongoing challenges, the LCB Task Force was established to enhance coordination and technical support for Cameroon, Chad, CAR, Niger, and Nigeria. It operates within the GPEI Regional Outbreak Response Group to ensure alignment across the region.



LBC Task force location:
WHO Country Office, Boîte postale 152, N'Djamena, Chad

Focal points by country:

- Dr Adèle Aluma-Chad
- Dr Iya Conde-Niger
- Dr Charlemagne-CAR
- Dr Khalid A.-Nigeria
- Leopold Donfack- Cameroon