

Secret

June, 2018

NCH/61/004A

MEMORANDUM OF THE HONOURABLE MINISTER OF HEALTH ON PROGRESS MADE IN THE NIGERIAN POLIO ERADICATION INITIATIVE

1. PURPOSE:

The purpose of this memorandum is to inform Council Members on the progress made in the Polio Eradication Initiative (PEI) following the resurgence of Wild Polio Virus (WPV) in 2016, after almost two years of interrupting transmission.

2. BACKGROUND:

Since the robust Outbreak Response campaigns that were conducted between August 2016 and January 2017, Seven quality polio campaigns were conducted in 2017 two of which were Nation-wide. In addition, one (1) National Immunization Plus Day (NIPD) and two (2) Sub-National Immunization Plus Days (SIPDs) have been implemented between January and April 2018. In February, 2018, various review meetings were conducted including the orientation meeting for reactivated National Polio Expert Committee (NPEC), National Certification Committee (NCC), and Adverse Events Following Immunization (AEFI) committee. One meeting of the Expert Review Committee on Polio Eradication and Routine Immunization (ERC) was held in March 2018. During the ERC meeting, the country was commended for sustaining the interruption of poliovirus transmission through innovative approaches to improve population immunity; special efforts to reach trapped populations in insecure areas; and the commitment of the Federal government of Nigeria to the polio eradication drive.

3. CONTENT:

Sustained High Quality Campaigns

Through the unwavering efforts of Government and partners, the country has been able to halt the spread of the poliovirus in Borno state to neighbouring States and other parts of the country. So far we have gone 22 months without a case of WPV. This is the result of the sustained high-quality polio campaigns and your commitments in your respective states.

In 2018, the overall goal of the program will be to;

- Sustain the interruption of poliovirus transmission through sustaining a polio-free (WPV, cVDPV) status by Sustaining resilience.
- Enhance SIA quality in prioritized vulnerable areas
- Increase access to vaccination in security challenged areas and IDPs (particularly in Borno, Yobe and Lake Chad islands)
- Ensure robust Outbreak Response across all states
- Enhance routine immunization in polio high risk LGAs
- Intensify surveillance
- Strengthen cross-border collaboration

In furtherance of our efforts to ensure that no other part of the country is re-infected by the poliovirus, many innovative strategies were implemented. These included peer review of surveillance data; temperature tracking using temperature log tags to track transported stool samples; and expansion of environmental sampling. Environmental surveillance sites were expanded to 70 sites in 18 states + FCT compared to 57 sites in 2016. In 2018, we intend to add 2 more States (Anambra and Enugu) and 6 more sites. A one-time sewage collection from potential environmental sites identified from security compromised areas in Borno state was also conducted. Furthermore, children in internally displaced persons (IDPs) camps and from recently accessible areas are being tracked and vaccinated.

Remaining Challenges

Insecurity in the Northeast zone, especially in Borno, Yobe and Adamawa States has continued to be a major challenge to the programme as some communities remain inaccessible to vaccination teams, and evolving security incidents in areas outside the north east relating to kidnapping, armed robbery and clashes between herdsmen and farmers. However, the programme has continued to explore innovative ways to address immunity gaps and protect the children in most of the security challenged communities. These include: vaccinating children in internally displaced persons (IDPs) camps; active engagement of military and civilian Joint Task Force to escort teams and vaccinate children in partially accessible areas; Reaching Every Settlement (RES) intervention; Reaching Inaccessible Children (RIC) intervention.

Government released its 2017 financial contribution to the program in order to address the funding gap. Government is committed to increasing its financial commitment in view of the GPEI funding ramp down. Also, non-release of States and LGA counterpart funds by some high-risk States and frequent health workers’ strike constitute a threat to the programme.

PRAYERS:

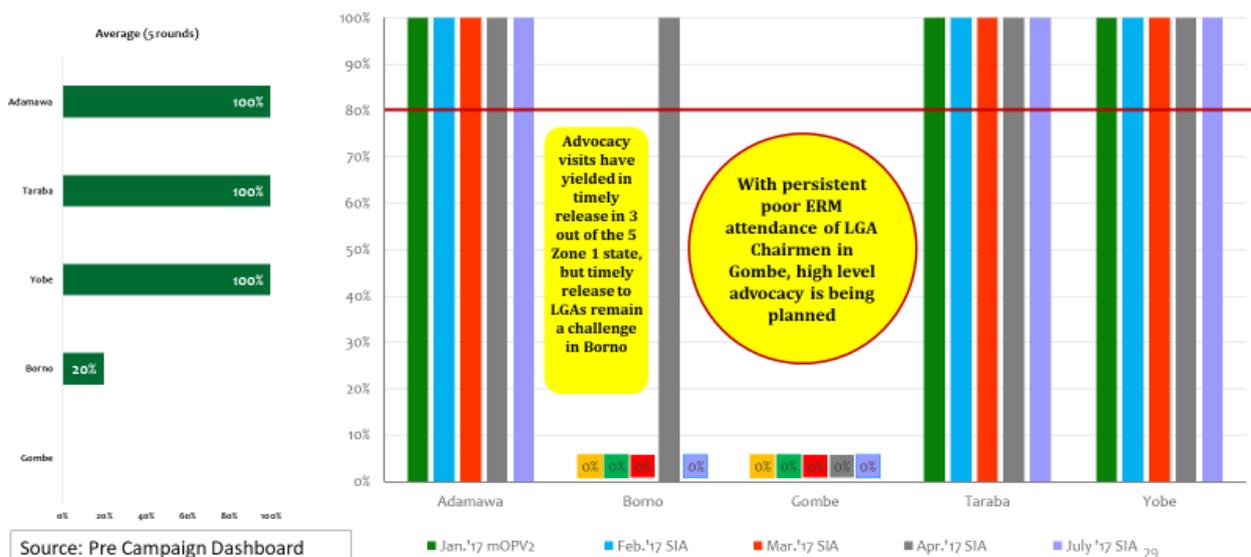
The Council is invited to note as follows:

- I. To ensure that no other part of the country is re-infected by the Polio virus, many innovative Strategies were implemented.
- II. Environmental surveillance sites were expanded to 70 sites in 18 states + FCT compared to 57 sites in 2016.
- III. Continued oversight function and support in appropriating adequate funds for Polio eradication and routine immunization to enable the programme sustain its high impact interventions.
- IV. To interface with States and Chairmen of LGAs with identified low commitment.

Honourable Minister of Health
June, 2018

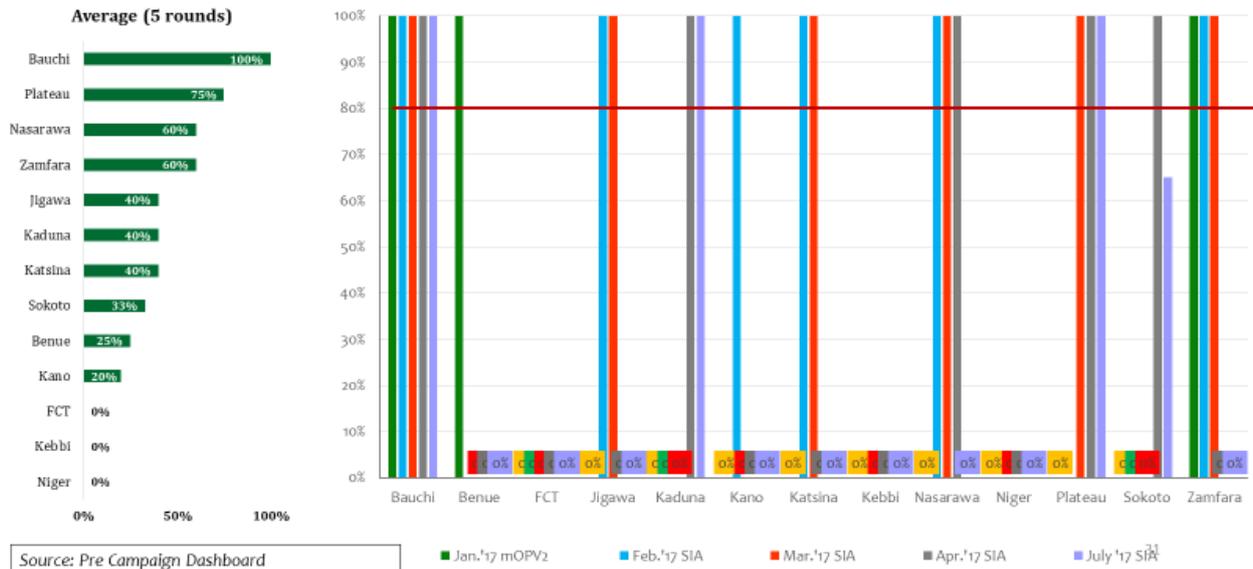
Political Commitment in 2017 – Zone 1

State/LGA Counterpart funds timely release to LGAs as at 3 days to campaign in 2017 (Zone 1)

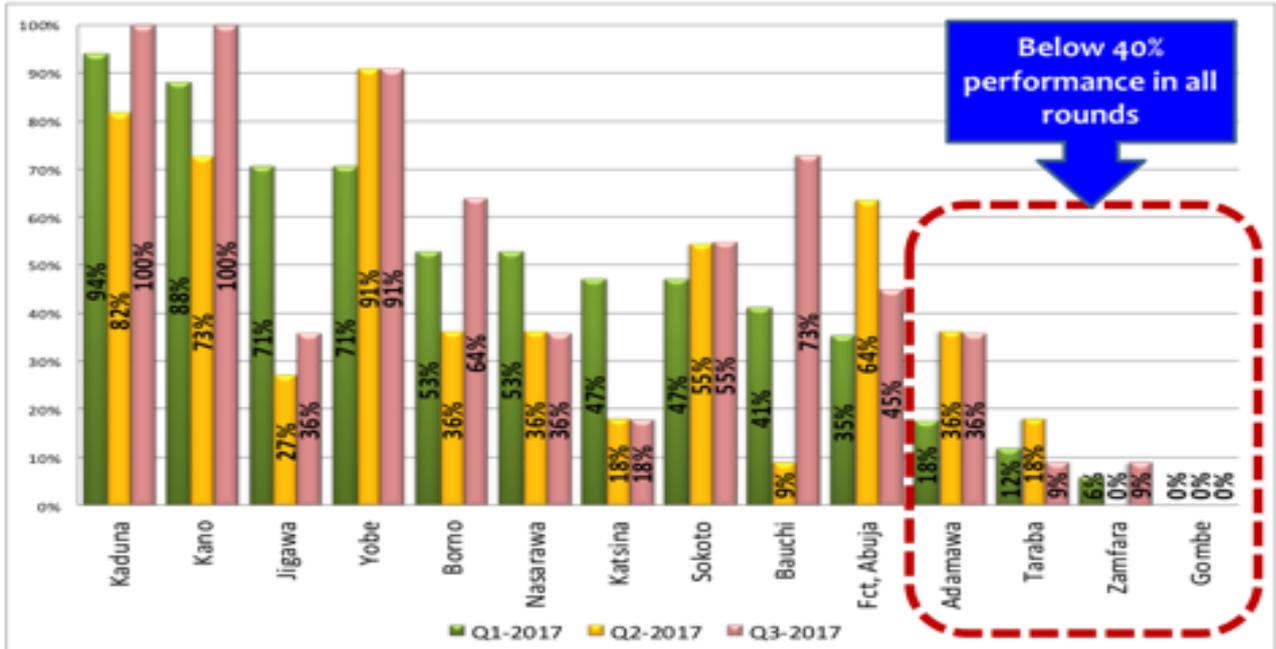


Political Commitment in 2017 – Zone 2

State/LGA Counterpart funds timely release to LGAs as at 3 days to campaign in 2017 (Zone 2)

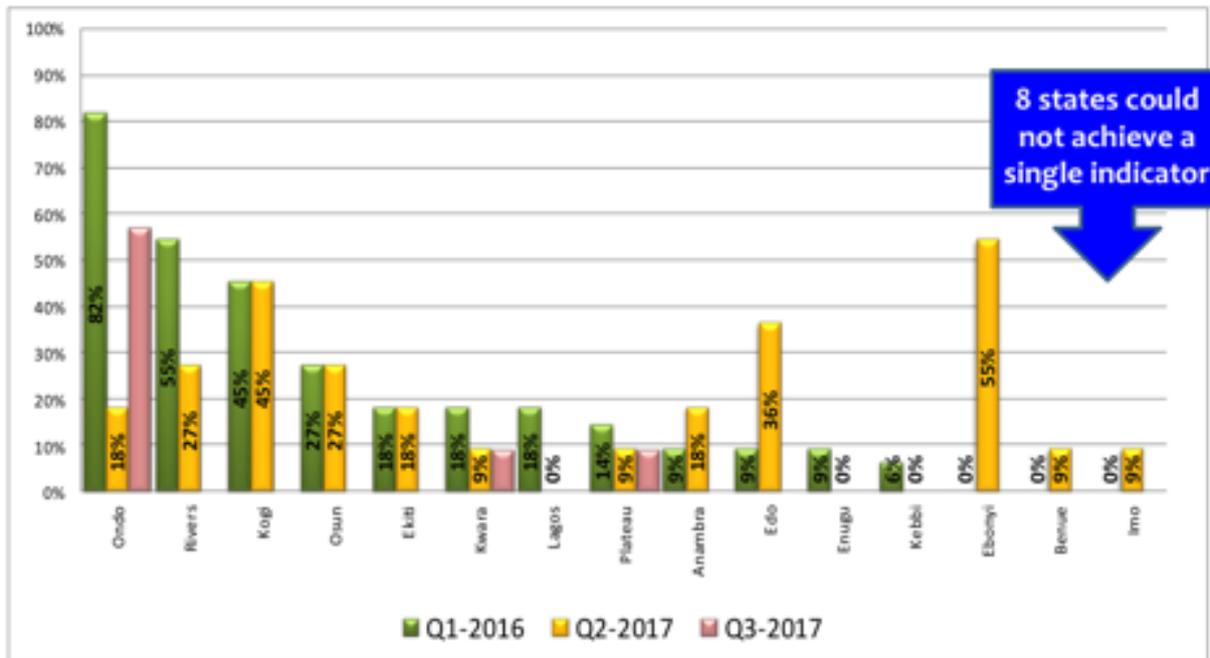


% State level Abuja Commitments Indicators Performance in High Risk States, Q1 – Q3, 2017



14 HR states: Katsina, Kano, Kaduna, Borno, Sokoto, Zamfara, Bauchi, Jigawa, Yobe, FCT, Nasarawa, Adamawa, Gombe, and Taraba

% State level Abuja Commitments Indicators Performance in Non High Risk States, Q1 – Q3, 2017



8 states that did not achieve a single indicator: Abia, Akwa Ibom, Bayelsa, Cross River, Delta, Niger, Ogun and Oyo states

Nigeria has gone 18 months without Wild Polio Virus

