

# POLIO

GLOBAL  
ERADICATION  
INITIATIVE

ERADICATION  
WITHIN REACH...



World Health  
Organization

Rotary



unicef



BILL & MELINDA  
GATES foundation



# GLOBAL POLIO ERADICATION INITIATIVE

**Annual Report 2016**



World Health  
Organization

Rotary



unicef



BILL & MELINDA  
GATES foundation

Published by the World Health Organization (WHO) on behalf of the Global Polio Eradication Initiative.

© World Health Organization 2017

Some rights reserved. This work is available under the Creative Commons Attribution-NonCommercial-ShareAlike 3.0 IGO licence (CC BY-NC-SA 3.0 IGO; <https://creativecommons.org/licenses/by-nc-sa/3.0/igo>).

Under the terms of this licence, you may copy, redistribute and adapt the work for non-commercial purposes, provided the work is appropriately cited, as indicated below. In any use of this work, there should be no suggestion that WHO endorses any specific organization, products or services. The use of the WHO logo is not permitted. If you adapt the work, then you must license your work under the same or equivalent Creative Commons licence. If you create a translation of this work, you should add the following disclaimer along with the suggested citation: "This translation was not created by the World Health Organization (WHO). WHO is not responsible for the content or accuracy of this translation. The original English edition shall be the binding and authentic edition".

Any mediation relating to disputes arising under the licence shall be conducted in accordance with the mediation rules of the World Intellectual Property Organization.

**Suggested citation.** Global Polio Eradication Initiative: annual report 2016. Geneva, Switzerland: World Health Organization; 2017 (WHO/Polio/17.03). Licence: CC BY-NC-SA 3.0 IGO.

**Cataloguing-in-Publication (CIP) data.** CIP data are available at <http://apps.who.int/iris>.

**Sales, rights and licensing.** To purchase WHO publications, see <http://apps.who.int/bookorders>. To submit requests for commercial use and queries on rights and licensing, see <http://www.who.int/about/licensing>.

**Third-party materials.** If you wish to reuse material from this work that is attributed to a third party, such as tables, figures or images, it is your responsibility to determine whether permission is needed for that reuse and to obtain permission from the copyright holder. The risk of claims resulting from infringement of any third-party-owned component in the work rests solely with the user.

**General disclaimers.** The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of WHO concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement.

The mention of specific companies or of certain manufacturers' products does not imply that they are endorsed or recommended by WHO in preference to others of a similar nature that are not mentioned. Errors and omissions excepted, the names of proprietary products are distinguished by initial capital letters.

All reasonable precautions have been taken by WHO to verify the information contained in this publication. However, the published material is being distributed without warranty of any kind, either expressed or implied. The responsibility for the interpretation and use of the material lies with the reader. In no event shall WHO be liable for damages arising from its use.

Cover photo: A young girl shows ink mark on her finger, which confirms that she has received polio vaccine during Sehat Ka Ittehad campaign, in Peshawar city, Khyber-Pakhtunkhwa Province, Pakistan.

©Unicef/PAK/Asad Zaidi.

Printed by the WHO Document Production Services, Geneva, Switzerland

Design by Inis Communication – [www.iniscommunication.com](http://www.iniscommunication.com)

# CONTENTS

<b>Acronyms</b> .....	iii
<b>Executive summary</b> .....	2
<b>Stopping poliovirus transmission</b> .....	6
Current situation: Setbacks and steps towards a polio-free world in 2016.....	6
Polio in Nigeria.....	6
Progress in Afghanistan and Pakistan.....	7
Circulating vaccine-derived polioviruses.....	8
Global progress since 1988 and focus for 2017.....	9
<b>Trivalent oral polio vaccine to bivalent oral polio vaccine switch – start of the phased removal of oral polio vaccines globally</b> .....	12
<b>Containment and certification</b> .....	16
<b>Transitioning the Global Polio Eradication Initiative</b> .....	19
Securing the legacy of the GPEI through transitioning its infrastructure.....	19
<b>Financing the Polio Eradication &amp; Endgame Strategic Plan</b> .....	22
2016 GPEI contributors.....	22

# ACRONYMS

<b>bOPV</b>	Bivalent oral polio vaccine
<b>CCS</b>	Containment certification scheme
<b>cVDPV</b>	Circulating vaccine-derived poliovirus
<b>cVDPV2</b>	Circulating vaccine-derived poliovirus type 2
<b>GAPIII</b>	WHO Global Action Plan to minimize poliovirus facility-associated risk after type-specific eradication of wild polioviruses and sequential cessation of oral polio vaccine use
<b>GCC</b>	Global Commission for the Certification of the Eradication of Poliomyelitis
<b>GPEI</b>	Global Polio Eradication Initiative
<b>IPV</b>	Inactivated polio vaccine
<b>mOPV</b>	Monovalent oral polio vaccine
<b>mOPV2</b>	Monovalent oral polio vaccine type 2
<b>OPV</b>	Oral polio vaccine
<b>OPV2</b>	Oral polio vaccine type 2
<b>SAGE</b>	Strategic Advisory Group of Experts on immunization
<b>TIMB</b>	Transition Independent Monitoring Board
<b>tOPV</b>	Trivalent oral polio vaccine
<b>UNICEF</b>	United Nations Children's Fund
<b>USAID</b>	United States Agency for International Development
<b>VAPP</b>	Vaccine-associated paralytic polio
<b>VDPV</b>	Vaccine-derived poliovirus
<b>VDPV2</b>	Vaccine-derived poliovirus type 2
<b>WHO</b>	World Health Organization
<b>WPV</b>	Wild poliovirus
<b>WPV1</b>	Wild poliovirus type 1
<b>WPV2</b>	Wild poliovirus type 2
<b>WPV3</b>	Wild poliovirus type 3



© WHO/S. Ramo



© WHO/R. Akbar

# WHAT WE WANT YOU TO TAKE AWAY FROM THIS REPORT...

## *Global Polio Eradication Initiative – The worldwide eradication of a disease*

- Polio is a devastating disease, which paralyses children for life.
- There is no cure for polio – but a simple and effective vaccine protects a child for life.
- In 1988, a global movement was started to ensure that every child is vaccinated against polio.
- At that time, every year more than 350 000 children were paralysed by the disease, in more than 125 countries.
- In 2016, only 37 cases were reported, from just 3 countries: Pakistan, Afghanistan and Nigeria.
- The world has never been closer to being polio-free. But if we do not succeed, polio will come roaring back. Within ten years, 200 000 children could again be paralysed all over the world – every single year!
- Please help us eradicate polio once and for all. For just US\$ 0.50, you can protect a child for life against this terrible disease.

*Together, let's achieve  
something historic!*

*Let's make sure that  
no child will ever again  
be paralysed by polio.*

# EXECUTIVE SUMMARY

In 2016, fewer children were paralysed by polio than in any other year in history, and the world moved closer still to eradicating polio. Circulating in a few areas of Pakistan, Afghanistan and Nigeria, wild poliovirus (WPV) is more geographically constrained than ever before. Every country using trivalent oral polio vaccine (tOPV) switched to bivalent oral polio vaccine (bOPV) thanks to the eradication of wild poliovirus type 2 (WPV2), which had been certified in September 2015. This progress continues to be made possible by the over 20 million volunteers and front-line staff who vaccinate over 400 million children worldwide each year as part of the Global Polio Eradication Initiative (GPEI).

## ERADICATING ALL POLIOVIRUSES

After circulating undetected for several years, WPV reared its head in north-eastern Nigeria. Despite persistent improvements in operational quality accompanied by marked innovations, children in Pakistan and Afghanistan continue to be paralysed by polio. As WPV teeters on the edge of eradication,

response to vaccine-derived polioviruses (VDPVs) takes on a larger role. And as the public health community zeros in on all poliovirus, containing any virus in safe, essential facilities becomes more urgent.

Pakistan and Afghanistan both continued to intensify eradication efforts and implement their respective national emergency action plans, overseen by their heads of state. The countries treat virus transmission as a single epidemiological block and emphasize the coordination of activities across their common border. In Pakistan, the proportion of children who have never had a dose of polio vaccine continued to decline in 2016, as more children are now being immunized than ever before, in particular in historical reservoir areas. In Afghanistan, 9 out of 10 areas tested met the coverage standards for vaccination campaigns. Both countries introduced a number of innovations, including the recruitment of community-based vaccinators (often female), increased environmental testing to complement the surveillance of observed cases of acute flaccid paralysis, additional cross-border vaccination teams, and remote monitoring of the quality of operations in inaccessible areas through mobile technology and independent monitors.

预览已结束，完整报告链接和二维码如下：

[https://www.yunbaogao.cn/report/index/report?reportId=5\\_26614](https://www.yunbaogao.cn/report/index/report?reportId=5_26614)

