



A mother holds her child as the LGA chairman for North Sokoto administers polio drops

First round of polio immunisation campaign for 2010 takes off with new vaccine

February 4, 2010, ABUJA – In the first mass immunisation campaign to utilize the new bivalent polio vaccine (bOPV), some 53-million children under five in Nigeria were targeted by an army of 30,000 health workers.

“The new vaccine will make a big difference and will allow us to immunize children more effectively against polio,” said Dr. Boubacar Dieng, the head of immunisation at UNICEF Nigeria. The first round of polio vaccination of 2010 - which lasted four days and will include a 2-3 day “mop-up” phase - was spearheaded by the Government of Nigeria, with UNICEF, WHO and its partners. Such rounds are seen as a strong opportunity to secure a polio-free Nigeria - which just had 388 cases in 2009 and has seen fewer than 30 news cases in the last six months.

The bulk of the \$60million funding came from the Government of Japan and the Gates Foundation. UNICEF also provided an additional \$4million to assist with vaccine procurement. In the run-up to this round, a social mobilisation campaign involving almost 100 consultants was held. Dr. Dieng credited communication activities for fewer refusals compared to the last round. “There was a big effort to reach out to communities and help parents understand the need to immunize their children.”

The use of the new bivalent vaccine in Nigeria is significant as it is proven to work more efficiently to tackle the two types of remaining wild polio virus in the country, Type 1 and Type 3. Nigeria is the first African country to use the new bOPV; it was used for the first time in Afghanistan in 2009.

The involvement of traditional leaders in some states has helped encourage parents to immunise their children. Recently the WHO cited renewed commitment in by state governors as a major reason for “a significant drop” in new polio cases in 2009.

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Partners of the Government of Nigeria in the fight against polio include

UNICEF, WHO, CDC, CIDA, DFID, the Gates Foundation, the Government of Japan, Rotary International, International Red Cross, USAID, World Bank and UNICEF National Committees:
See Page 3 for the quarterly donor profile.

A Nigerian girl receives a polio drop during a recent Child Health Week



The Role of Traditional Leaders in Polio Eradication

by Naureen Naqvi

January 30, 2010, Gummi Local Government Area: It's early morning amid red mud houses, dirt roads and many children running around. Gummi is a remote yet densely populated community in a high risk area of Zamfara State. Milling around are men dressed up in long coats and women in bright colorful clothes with head coverings.

A prominent man makes his way through the crowd dressed up in an elegant long embroidered gown and white turban. Behind the spectacles his deep wise eyes see through the community cheering and excited to witness a very respected partner in the battle against polio - HRH Emir of Bakura Engr. Bello M Sani.

It has been over a year since the crucial role of political and traditional leaders in improving overall quality of immunization activities was took a giant step forward with the formation of a national commitment to stop polio. The involvement of traditional leaders in polio eradication has a longstanding history in Nigeria but was accelerated through advocacy with HRH Sultan of Sokoto - the most senior spiritual leader of Nigeria's Muslim population - who was approached to be part of the fight against polio by Bill Gates and the federal minister of health. The Sultan addressed northern traditional leaders at a meeting in Kaduna state in 2009, concluding with a consensus to mobilise traditional leaders from high risk and polio endemic states. It sealed the involvement of the Emir of Bakura. Their important role was emphasized in January at the Northern Traditional and Religious Leaders Forum for Primary Healthcare and Polio Eradication, attended by the Federal Minister of Health and the Executive Director of the National Primary Healthcare Development Agency. Citing the pivotal role of the traditional leadership in garnering local support and reaching children, the Minister of Health said, "What I'm setting for 2010 is collaboration with you, looking to your leadership. We shall drag polio from Nigeria this year."

The effort sealed the involvement of the Emir of Bakura: "This, has been fulfilling journey since last year. It's a sense of responsibility that has made myself and many others realize our duties towards our people," said the Emir. He possesses a masters degree in civil engineering from University of Dundee, Scotland, and took charge as Emir of Bakura in 2001.

Zamfara is one of high risk states in the north eastern part of Nigeria with alarmingly low indicators of routine immunisation. In mid August 2009, the state had reported 13 children crippled by polio. Analysis of the cases recorded indicates that the virus is active in hard-to-reach areas (border and riverine communities) and among farming populations.

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In Focus: Kebbi

KEBBI STATE is located in the Northwestern part of Nigeria. It shares a border with Sokoto, Niger and Zamfara states and international borders with Benin and Niger. There are 23 Local Government Areas (LGAs) in the state.

With a population of some 3.6-million it is the size of some small nations. About half of the population is 15 years and under.

The state has its share of health issues for children. Stunting is at about 56% - well above the national average of 34%. The state has among the highest incidences of diarrhea and only about a third of the population consumes iodized salt. Less than a quarter of all people have access to household latrines.

Kebbi is a state which has not reached national targets for routine immunisation, and the polio virus still circulates. In the first half of 2009, a total of 15 polio cases were reported in Kebbi state.

The state has put in a number of schemes to improve child and maternal mortality, and has increased financial support of child survival interventions. Experts credit the Emir of Argungu and the Governor for improving policies for fighting polio.

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The Emir and others have their work cut out for them here. Zamfara state has low population immunity and is susceptible to polio outbreaks due to large number of non-immunized children: none of the LGAs had coverage above 80% during recent campaigns. It is believed that children are missed during immunization activities because of the poor quality of campaigns and a low understanding of why immunization is important among community members.

In 2009, monthly tallies of the percentage of children who did not receive a single dose of the polio vaccination ranged from a low of six percent to as high as 17 percent. LGA ownership and refusals by parents (termed non-compliance) remains a key reason for the unvaccinated children in the LGAs.

As stated in the ERC report, the role of traditional leaders has brought about a significant change and increase in ownership by local leaders. As the realization grows among states, the need for urgent and serious action is being realized.

"We need to engage into a dialogue with religious heads of northern Nigeria and call for immediate action to make Nigeria polio free and boost immunisation to save our children. This is the real assistance that we seek from our partners," says the Emir with commitment and Nigeria's hope lives on.



"We need to engage into a dialogue with religious heads of northern Nigeria and call for immediate action to make Nigeria polio free and boost immunisation to save our children."

- HRH Emir of Bakura Engr. Bello M- Sani.
(Photo Credit: Naureen Naqvi)

Donor Profile: Gates Foundation

Guided by the belief that every life has equal value, the Bill & Melinda Gates Foundation works to help all people lead healthy, productive lives. In developing countries, the focus is on improving people's health and giving them the chance to lift themselves out of hunger and extreme poverty. Based in Seattle, the Foundation is led by CEO Jeff Raikes and co-chair William H. Gates Sr., under the direction of Bill and Melinda Gates and Warren Buffett. In the battle against polio, the Foundation works with partners, such as the World Health Organization (WHO), the Global Polio Eradication Initiative, Rotary International, UNICEF, and the United States Centers for Disease Control and Prevention. It is supporting the following strategies:

- the purchase and distribution of existing vaccines in high-risk countries.
- the development of new vaccines.
- Enhance surveillance and outbreak response activities.
- Advocate with governments and manufacturers of vaccines to increase their efforts toward eradicating polio.

Read more at: www.gatesfoundation.org

Polio in Nigeria - The Latest Numbers:

Number of new polio cases detected in 2009: 388

Number of new polio cases detected in 2008: 782

Number of Type 1 polio cases (most virulent): 74 (down from 707 in 2008)

Number of states where polio detected: 27

Number of national rounds in 2009: 3

Number of sub-national rounds in 2009: 5

Q&A: A quarterly feature on key leaders in the battle against polio

UNICEF Nigeria Representative Suomi Sakai



What are the major challenges standing in the way of polio eradication?

While the virus circulation is obviously down, it is too early for a feeling of victory - complacency is probably the greatest threat. Now is actually the time to encourage political will, implementer will and donor will.

Our key challenge is low routine coverage. In many areas especially in the south, keeping immunity levels up relies increasingly on routine. So we need to work on that. Holding child health weeks twice-a-year would help in this as well as other routine schedulable interventions such as Vitamin A supplementation and deworming.

What has been the key contribution of UNICEF?

First, we were able to agree with WHO that LGA actions plans for high risk LGAs were now necessary. As UNICEF, we have the experience and capacity to work with LGAs in detailed work planning on communication and social mobilization.

Our work with communities on multiple convergent issues will allow polio discussions with other issues - like nutrition, child protection, malaria, hygiene and sanitation, and ECD. This is achieved through increasing community dialogues and community information board use. By appointing our C4D chief to lead the social mobilization component of polio eradication, we are strengthening the leadership in this area as well as allowing the above convergence to serve polio well. This should meet the felt need of the communities as well as of the political and traditional leaders.

Working on child health weeks is especially important for improving routine coverage of polio along with that of other schedulable high impact interventions. Finally we are strengthening the supply chain management capacity building team by a full time capacity building staff.

Explain the crucial role of donors in UNICEF's fight to eradicate polio.

This is the time to hit harder as Nigeria is almost there in terms of complete polio eradication. So donors supporting the effort is crucial. We will need fast action and fast approval as the virus will not wait but will take advantage of any extra time in which we do not act. Donors also have a role in continuing to motivate the political leaders and decision makers at the highest levels.

Next Issue: Read about the multi-country, synchronized campaigns in Africa: On 6 March, Nigeria and 15 other west African countries will be joined by Cameroon, Central African Republic (CAR) and Chad, to vaccinate 85.5 million children and boost immunity across the "importation belt."

IPDs Dates: January-June 2010

ROUND 1: Jan 30-Feb 1 (bOPV)

National

ROUND 2: March 6-9 (bOPV)

National

(Synchronized across West Africa to reach some 85m children)

ROUND 3: April 24-27

Sub-National

ROUND 4: June 5-8

Sub-National

Upcoming Events and Activities:

- Social data training
- Workshop for capacity building
- State level task force meetings
- National Polio Walk
- Communications Strategy Workshop
- Database development

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