

FACTSHEET



History

Polio is a highly contagious viral disease that can easily spread through contaminated food or water. The disease does not impact every person who is infected, making it particularly dangerous as several members of a community may be carriers and spread the virus before any one person begins to show signs of symptoms. Polio has devastating effects on infants and young children and can result in chronic health problems, paralysis, stunting and premature death.

As a result of intensive worldwide efforts to eradicate the disease, Afghanistan is now one of only four countries where the disease remains endemic, the others being Nigeria, India and Pakistan. The current global goal is to completely stop transmission of polio by the end of 2012. Afghanistan is determined to play its part by meeting the 2012 target. Together with the Ministry of Public Health, the World Health Organization (WHO), a group of highly committed donors and non-governmental organizations, UNICEF is working tirelessly to ensure this preventable disease does not continue to harm children and families.

Polio is one of the few diseases that can be eradicated, it only affects humans – there is no strain in animals that can further the circulation of the disease - the virus can only survive for a very short time in the environment, there is an effective, safe and inexpensive vaccine, the oral polio vaccine (OPV), and immunity against polio is life-long.



Women in burqas and their children wait to see a doctor at a health clinic in the Khan Kalacha area of Kandahar.

Polio in Afghanistan 2011

47 reported cases, as of November 2011

81 per cent of 2011 cases located in the Southern region

7.8 million children targeted with oral polio vaccination through four National Immunization Days and 3.1 million children in high risk areas targeted with four additional doses through Sub-National Immunization Days (SNIDs)

Polio Immunization days are also used to provide Vitamin A supplementation and de-worming for children

More than 1.5 million children were vaccinated in 2010 at sites along the Afghanistan-Pakistan border; a similar number is expected to be vaccinated during 2011

Figures provided by WHO & UNICEF polio staff, 4 November 2011

Impact of polio on communities

Plagued by more than 30 years of conflict and a harsh climate and terrain, Afghanistan has had little opportunity to develop infrastructure, and generations have grown up in the midst of conflict. This has resulted in poor communities being isolated for large periods of time, and people lacking access to and knowledge about basic healthcare, water and sanitation and education. In this challenging environment it is difficult to reach all children with immunization campaigns.

Nevertheless, for the last several years, polio immunization campaigns have been conducted in Afghanistan and there has been a significant decrease in the total number of cases and areas where the disease continues to spread. Last year polio cases were concentrated in the Southern and Eastern regions, and as of early November 2011 the majority of cases remain localized to the Southern region, but with sporadic cases being reported in all other regions except in the South East. The porous border with Pakistan, which continues to report a much larger number of cases, means that large populations remain at high risk from the spread of the disease between the two countries. In these areas conducting high quality campaigns continues to be a challenge due to insecurity, inaccessibility, lack of health infrastructure, and traditional suspicion of authorities.

UNICEF's Response

This year, UNICEF and the WHO established an integrated polio team in Afghanistan, combining the resources and expertise of the two agencies. This allows for closer collaboration and greater coherence in the work of the two organizations, continuing many years of partnership that brings together the various components essential to the success of polio eradication efforts, including: procurement of vaccines and other supplies, trainings of workers and supervisors, micro-planning, implementation, monitoring and evaluation of the efficacy and execution of campaigns and communication for increased community awareness, acceptance and involvement in immunization in the country. In 2011, nearly 2000 community mobilizers are trained before every campaign, with the main aim of providing information on the upcoming campaign to households, ensuring that refusals are minimized and sleeping, sick and newborn children are vaccinated. Additionally, UNICEF programmes emphasize integrated approaches to preventing the continued spread of polio, including by helping communities access clean water and develop healthy habits for hand-washing and waste disposal.

Key Challenges

- Continued conflict and fragile security threaten community-health workers' safety, impede access to communities and frustrate the delivery of vaccination supplies to at-risk populations.
- Entrenched traditional norms do not empower mothers to make decisions about their children's health, delaying critically needed vaccinations.
- Lack of awareness on what polio is and the urgency in eradicating the disease means families may not follow-through with multiple rounds of immunization.

Strategic Approach

In order for polio eradication efforts to succeed, it is imperative to work with local residents and empower communities to make decisions about their children's well-being. UNICEF has developed an evidence-based communication strategy that addresses long-held concerns about what vaccines are and what they will do for children. In 2011, these outreach efforts place additional and concentrated focus on 13 high-risk districts. UNICEF also established a Polio Communication Network in these locations, comprised of mullahs, community elders, teachers, 'courtyard' women's councils and Community Health Workers who have received polio education training and are available to address community questions.

Additionally, local campaigns in the Eastern Provinces are synchronized with campaigns in neighbouring Pakistan, where the disease also remains endemic. Because of continued movement of populations between the two countries, special efforts have been made to develop fixed vaccination posts in border crossing areas to provide on-the-spot vaccinations.

Other major contributions by UNICEF include the procurement of vaccines, the strengthening of vaccine and cold chain management systems, capacity building of vaccinators, supervisors and cold chain technicians, offering technical support to strengthen routine and supplemental immunization, and the distribution of deworming tablets and Vitamin A supplements.

For more information:

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A health worker dressed in a burqa vaccinates a boy against polio outside his home, while his older siblings watch, in Kandahar. Vaccinators travel door-to-door to ensure that all eligible children are immunized.