



Reporting Period From April 13-26, 2024

Zimbabwe

Polio Response Situation Report No.5

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Highlights

- In October 2023, Zimbabwe declared polio outbreak as a Public Health Emergency (PHE) following the detection of circulating vaccine derived poliovirus type 2 (cVDPV2).
- An index human polio virus type 2 was reported in a 10-year-old girl with a case of acute flaccid paralysis (AFP) in January 2024.
- In this reporting period covering 13 April to 26 April, one new cVDP2 case has been reported from environmental sites in Harare and no new VDP2 cases were reported in the last reporting period from 15 March to 12 April, 2024.
- To date, Zimbabwe has detected 22 circulating cVDPV2 cases from four environmental samples (ES) in Harare since October 2023 (17 cases from 2023 and five in 2024).
- Between April 14-19 (week 16), three new acute flaccid paralysis (AFP) cases were reported (cumulative 97 cases) with a non-polio acute flaccid paralysis (NPAFP) rate at 3.8 per cent children over 15 years.
- Investigation was conducted following detection of VDPV1 from Sunningdale ES in Harare City.
- Technical review of the novel oral polio vaccine type 2 (nOPV2) campaign led by the expanded programme on immunization (EPI) was conducted.
- The risk of poliovirus spreading within the country and neighboring countries remains high. Populations along borders, cross border traders, artisanal miners, and populations in emerging peri urban settlements are at risk.

Situation Overview & Humanitarian Needs

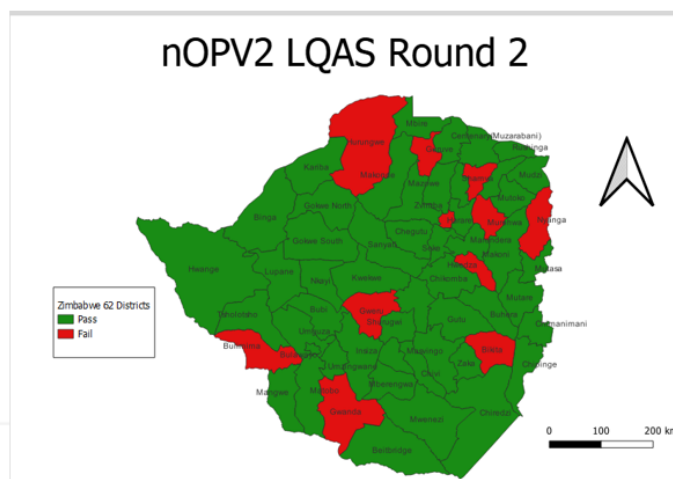
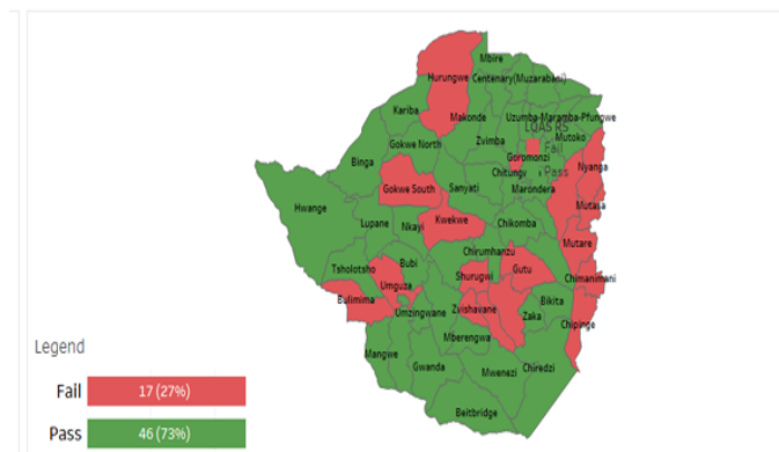
Zimbabwe last reported a case of indigenous wild poliovirus (WPV) in 1986 and has been certified polio free since 2005. Following the detection of wild poliovirus 1 (WPV1) in Mozambique and Malawi, in 2022, Zimbabwe undertook multi-country supplementary immunization activities (SIAs) with bivalent oral polio vaccine (bOPV2) and conducted four rounds of SIA in 2022 and 2023.

The cVDPV2 outbreak was declared a public health emergency by the Minister of Health and Child Care in October 2023. Polio outbreak response activities commenced with plans to conduct two rounds of supplementary immunization activities (SIAs) using novel oral poliomyelitis (polio) vaccine type 2 (nOPV2) in February and March 2024 reaching 4.6 million and 4.8 million children under 10 years of age respectively in each round. The proportion of districts that passed Lot Quality Assuring Sampling (LQAS) results increased from 73 per cent in round one to 82 per cent to in round two of nOPV2 campaign.

Comparison of nOPV2 Campaign R1 and R2 LQAS results

R1 LQAS: 73% of districts have passed LQAS

R2 LQAS: 82% of districts have passed LQAS



Source: MoHCC, April 2024

During the reporting period, one new environmental sample confirmed cVDPV2 from environmental sites in Harare, bringing cumulative positive cVDPV2 cases to 22 (17 from 2023 and five in 2024) from four environmental sites in Harare since October 2023. Furthermore, three new acute flaccid paralysis (AFP) cases were reported between 14 to 19 April 2024 (week 16) (cumulative 97 cases since 2024) with a non-polio acute flaccid paralysis (NPAFP) rate at 3.8 per cent for children over 15 years.

The risk of poliovirus spreading within the country and neighbouring countries remains high. Special considerations to target specific population groups with customized social behaviour change strategies are made in the polio outbreak response. These specific population groups include vaccine hesitant religious groups with high concentration in Manicaland Province (Buhera, Mutasa and Mutare Districts), populations in refugee camps (Tongogara in Manicaland Province and Waterfalls transit camp in Harare), populations along borders, cross border traders, artisanal miners, and populations in emerging peri urban settlements in Harare.

With technical support from UNICEF, Emergency Operations Center (EOC) submitted a request memo to the Zimbabwe National Immunization Technical Advisory Group (NITAG) for technical advice for an additional supplementary immunization activity (SIAs) focusing on high-risk population groups.

Funding Overview and Partnerships

To respond to the outbreak, UNICEF Zimbabwe received US\$4.1 million from the German Federal Ministry for Economic Cooperation and Development (BMZ) and Bill and Melinda Gates Foundation (BMGF). The funding from BMZ is being utilized for human resource capacity for a six-month period between January and June 2024 while the BMGF funding supported the two rounds of nOPV2 vaccination campaigns.

UNICEF's Response

Coordination and Planning

UNICEF provided technical and financial support to the Ministry of Health and Child Care in various activities such as planning and coordination, training, monitoring and supervision, vaccine accountability management, cold chain and logistics, social mobilization, cross-border coordination, and collaboration with ministry of health in bordering countries. Following detection of VDPV1 from environmental sites (ES) conducted in Harare City, UNICEF provided technical support to Ministry of Health and Child Care to conduct a workshop to review the EPI and nOPV2 campaign. This resulted in the development of EPI recovery, Surveillance improvement plan and nOPV2 mop-up plan. UNICEF also supported the review of surveillance priority sites of all provinces. During the review workshop, Social and Behaviour Change (SBC) activities were also discussed, particularly best practices, challenges, and recommendations for upcoming activities.

Human Resources and Surge support

UNICEF has supported the Ministry of Health and Child Care with additional surge staff to support the outbreak response through the recruitment of four local and three international surge staff to support coordination, SBC activities, and vaccine management. A request has been submitted to the Global Polio Eradication initiative (GPEI) rapid response team (RRT) for extension of contracts for the next three months (May – July) for international surge logistics and SBC consultants under UNICEF and one SIA consultant under WHO.

Vaccine Management and Logistics

A final report on vaccine management was produced and submitted to UNICEF Regional Office and the Global Polio Eradication initiative (GPEI). Vial repatriation is in progress at all levels, capturing all used and partially used vials. The estimated available balance of nOPV2 is 387,200 doses which will be used for mop-up campaigns in selected priority areas in Harare Province. The destruction of used vials will be after the proposed mop-up. The planned dates for the destruction will be adjusted accordingly.

Social Behaviour Change (SBC) Community Engagement & Accountability

Following the reporting of a confirmed vaccine-derived polio virus type 1 (VDPV1) from Environmental Surveillance site in Harare City in mid-March, UNICEF as a member of the case investigation team led by Ministry of Health and Child Care supported a socio-demographic assessments in Sunningdale and its surrounding areas (Braeside, St Martins, and Mbare) to identify the social and demographic characteristics and determinants of the areas and consequently to infer the findings for future SBC planning and programming purposes.



UNICEF provided technical support to the SBC pillar in the development of in-between round of campaign activities. These include demand generation for routine vaccination, community engagement, defaulters tracking, linking AFP searches with health promotion structures, mass awareness, and interfaith leaders' engagement. These activities will address Accountability for Affected Population.

UNICEF developed a study focusing on Reasons for Refusal Study: A Quick Qualitative Study in Mutare, Mutasa, Makonde, and Zvimba Districts that have recorded a high number of refusals. The main objectives of the study are to understand the underlying reasons for refusals, to identify the potential constraints and opportunities that facilitate the wide acceptance of the polio vaccine among families and communities, and consequently to inform communication strategies and activities.

Additionally, during the reporting period, UNICEF supported the Ministry of Health and Child Care to prepare a training on interpersonal communication for all Health Promotion Officers at national, provincial, and district levels.

Human Interest Stories and External Media

Stories can be found on UNICEF's website and social media channels:

- UNICEF Zimbabwe stories: <https://www.unicef.org/zimbabwe/stories>
- UNICEF Zimbabwe Social Media: [Facebook](#), [Twitter](#), [LinkedIn](#)

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