

PHM appreciates Global Polio Eradication Initiatives' strategic and operational efforts towards polio eradication, certification and containment.

Polio has not been eradicated yet due to social challenges rather than medical ones. Thus, considering a vaccine as the silver bullet has ignored the social determinants of this disease. In the absence of funds allocated towards these determinants, eradication will remain a distant dream.

The COVID 19 pandemic shook the already weak health systems in most countries. Diversion of resources from major health programs towards COVID, lack of OPD services led to disruption of immunization services in many LMICs. It is in this background we feel that the 2023 deadline set for polio transition feels unrealistic.

The report also notes that the outbreaks of circulating vaccine derived polio virus type 2 have been witnessed in the regions where immunization coverage is very low.

Moreover, downscaling of funds since 2016 has shrunk the polio workforce by 17% globally. Polio staff spend 50% of their time working on other disease or intervention areas. And in the absence of funding, these health workers would face serious consequences. The report fails to mention where will these workers be reassigned and how WHO plans to finance their new responsibilities.

Polio leaves its victims disabled for life and pushes them deeper into poverty. Rehabilitation services and assistive aids are essential to limit functional deficits and to prevent secondary disabilities. Yet, the transition plan has neglected this crucial area of intervention.

Therefore, we urge WHO to relax the timelines, provide support to MS on addressing gaps in access to social determinants and rehabilitation services.