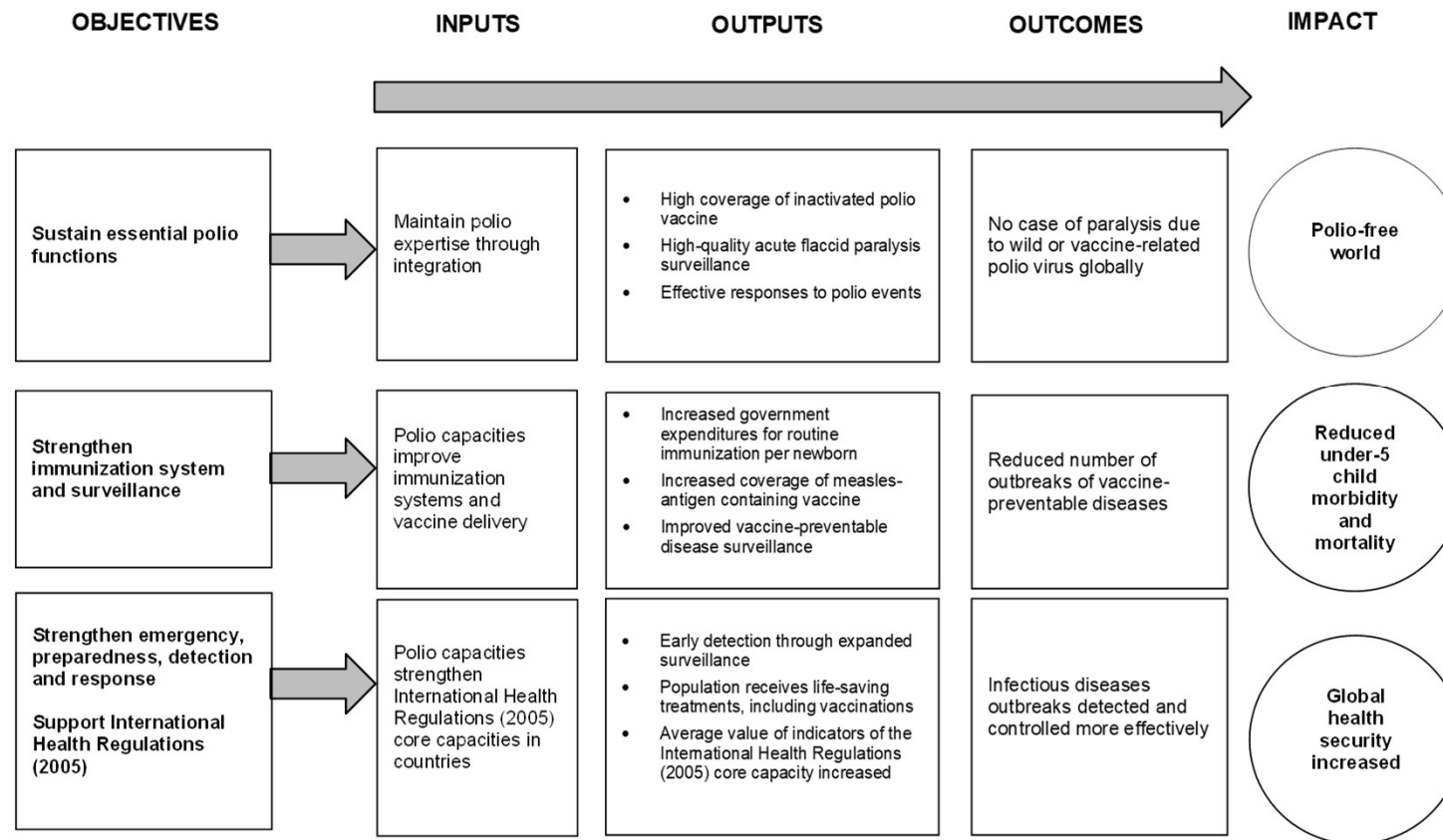

Polio Transition Monitoring & Evaluation 2018-2023

Review of M&E Indicators in 20 priority countries of the
Strategic Action Plan on Polio Transition (2018-2023)



World Health
Organization

Results chain of the polio transition plan (2018-2023)



M&E Dashboard: <https://www.who.int/teams/polio-transition-programme/monitoring-and-evaluation-dashboard>

Polio Transition M&E Indicators in 20 Priority countries (2018-2023)

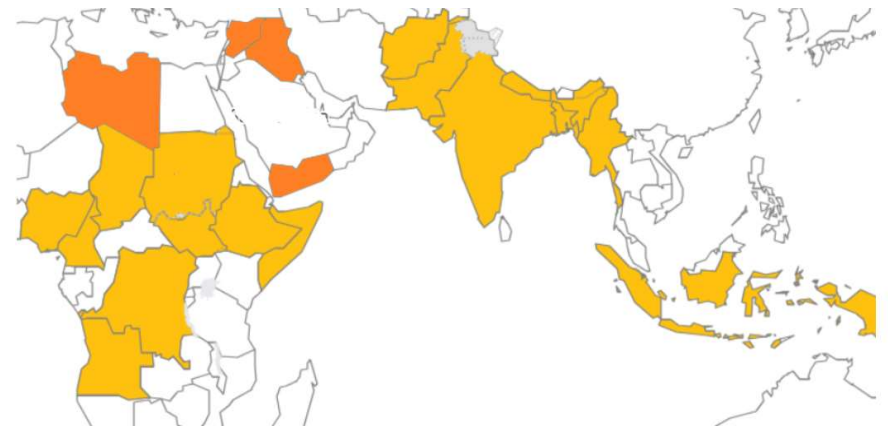
20 Polio Transition Priority Countries

The current set of slides refer only to M&E indicators reported by the 20 polio transition priority countries as defined in the strategic action plan (2018-2023):

AFR (7): Angola, Cameroon, Chad, DRC, Ethiopia, Nigeria, South Sudan

SEAR (5): Bangladesh, India, Indonesia, Myanmar, Nepal

EMR (8): Afghanistan, Iraq, Libya, Pakistan, Somalia, Sudan, Syria, Yemen



Polio Transition M&E Indicators in 20 Priority countries (2018-2023)

High level summary

- There has been limited progress in reaching the three objectives of the Strategic Action Plan on Polio Transition (2018-23).
- There are large variations between countries and regions on most output indicators over the period of 2018-2023.
- Immunization coverage has not fully regained increase after the drop during the Covid-19 pandemic crisis. In addition, district level data shows that there has been limited progress on geographical inequities.
- In AFR and EMR, coverage for polio and measles containing vaccines are generally far behind performance targets with some exceptions in EMR (Iraq and Pakistan), whereas in SEAR coverage levels are generally high (above 90% in Bangladesh, India and Nepal).
- Polio surveillance improved across all the regions and countries in this period.
- WPV and cVDPV cases in the 20 priority countries increased in 2019-2020, followed by a drop in 2021 and then increase in 2022 and decrease again in 2023.
- Government expenditures on routine immunization increased overall, and country self-assessment on health emergency core capacity indicators generally increased until 2022, then decreased in the last reporting year.

HIGHLIGHTS

1. Sustaining a polio free world

The progress to reach this objective was uneven. While IPV1 and OPV3 coverage and polio surveillance (non-polio AFP detection and increased number of environmental surveillance sites) slightly improved, the number of WPV and cVDPV cases continued to increase after a decline in 2021.

- The estimated coverage of IPV1 varies greatly across the 20 polio transition priority countries, however the overall average increased from 63% (2018) to 70% (2023).
- The average OPV3 coverage remained relatively stable around 72%, despite a decline in 2021.
- The non-polio AFP rate increased from 7.6 (2018) to 8.6 (2023), coupled by a similar improvement in stool specimen rate from 87% (2018) to 90% (2023).
- The number of WPV cases in the two endemic countries (Afghanistan and Pakistan) reached the minimum of 5 cases in 2021, then increased to 27 in 2022 and 12 in 2023.
- The number of cVDPV cases in the 20 priority countries reached its peak of 833 in 2020, and despite a decline in 2021, 355 cases are counted in 2023.
- The number of surveillance sites increased from 366 (2018) to 973 (2023), especially in Afghanistan, Pakistan, Nigeria and DRC. Yet, the average of samples per site declined from 21 (2018) to 13 (2023).

HIGHLIGHTS

2. Strengthening immunization systems and surveillance

There has been limited progress in reaching this objective, as measured in terms of MCV coverage and government expenditure for routine immunization.

- The estimated coverage of MCV1 varies greatly across countries. The unweighted average of MCV1 is around 70% coverage, despite a slight decline in 2020-21.
- The estimated MCV2 coverage remains sub-optimal. The unweighted average of MCV2 coverage declined from 66% (2018) to 56% (2023), with a decrease also at the subnational level from 44% (2018) to 42% (2023).
- In terms of resources, countries reported increased commitments, with the government expenditure on routine immunization per surviving infant on average increasing from US\$ 11.2 (2018) to US\$ 15.5 (2023). Yet, there are gaps in country reporting.

3. Strengthening emergency, preparedness, detection and response capacity (IHR)

There has been little progress in reaching this objective, as measured by countries' surveillance, laboratory and emergencies management core capacities under the IHR (through electronic IHR States Parties Self-Assessment Annual Reporting Tool (e-SPAR)).

- Laboratory core capacity on average slightly increased from 54 (2018) to 56 (2023).
- Surveillance core capacity on average slightly decreased from 73 (2018) to 71 (2023).
- Emergency framework core capacity on average increased from 49 (2018) to 60 (2020, last year reported).

PROGRESS IN A SNAPSHOT

The 20 polio transition priority countries reported the following progress over the period 2018-2022:

1. Sustaining a polio free world

- ● IPV1 coverage on average **increased** from 63% (2018) to 70% (2023), after a peak of 73% in 2022.
- ● OPV3 coverage remained relatively **stable** around 72%, despite a decline in 2021
- ● Rate of non-polio AFP/100,000 children <15 years **increased** from 7.6 (2018) to 8.6 (2023) after a peak of 11 in 2022.
- ● Percentage of AFP cases with two adequate stool specimens **increased** from 87% (2018) to 90% (2023)
- ● The number of WPV cases reached the **minimum** of 5 cases in 2021, then **increased** to 27 in 2022 and 12 cases in 2023.
- ● The number of cVDPV cases **increased**, reaching its peak of 833 in 2020, still counting 355 cases in 2023.
- ● The number of surveillance sites **increased** from 366 (2018) to 973 (2023)
- ● The average of samples per site **declined** from 21 (2018) to 13 in the last years.

2. Strengthen immunization systems and surveillance

- ● The unweighted average MCV1 coverage, after a **decline** in 2020-21, returned to the **same level** as 2018 of 70% coverage
- ● The unweighted average MCV2 coverage **declined** from 66% (2018) to 56% (2023)
- ● Percentage of districts with MCV2 coverage >80% on average **slightly declined**, from 44% (2018) to 42% (2023)
- ● The government expenditure on routine immunization per surviving infant on average **increased** from US\$ 11.2 (2018) to US\$ 15.5 (2023)

3 Strengthen emergency, preparedness, detection and response capacity (IHR)

The average score of:

- ● Laboratory core capacity **slightly increased** from 54 (2018) to 56 (2023)
- ● Surveillance core capacity **slightly declined** from 73 (2018) to 71 (2023)
- ● Emergency framework core capacity **increased** from 49 (2018) to 60 (2020, last year reported)

1st dose Inactivated Poliovirus Vaccine (IPV1) coverage

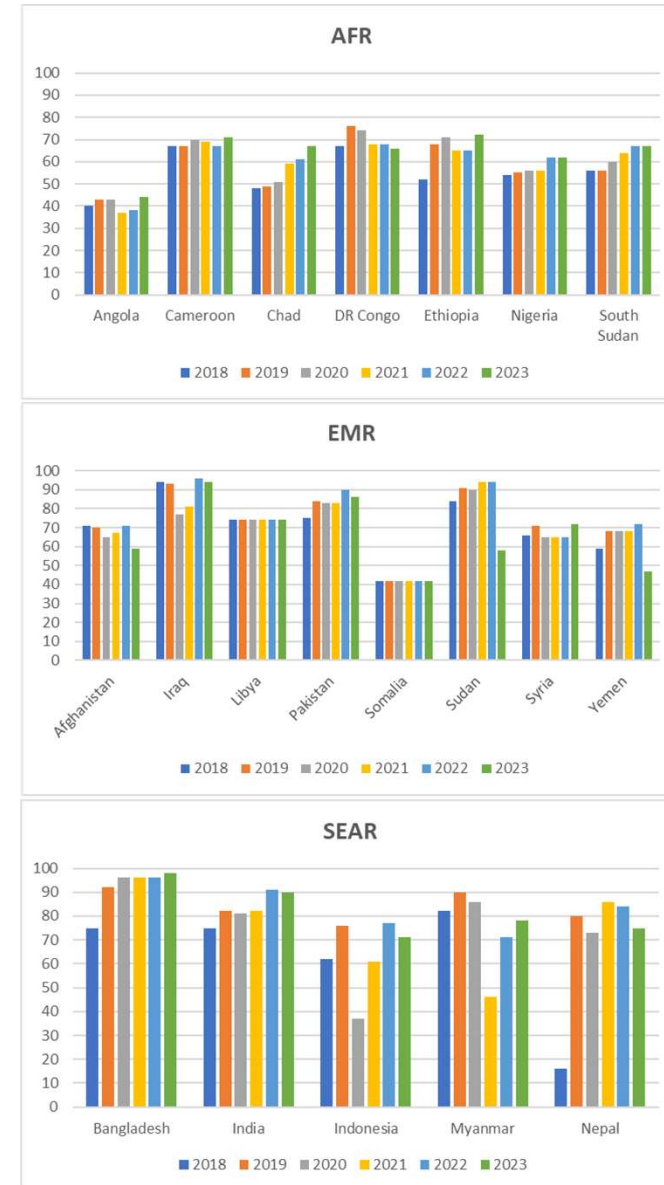
The estimated coverage of IPV1 varies greatly across regions and countries. Twelve countries reported an increase between 2018 and 2023, three countries reported unchanged estimates, and five countries reported a decline in estimated IPV1 coverage.

Countries in **AFR** increased coverage of IPV1 (Angola, Chad, Cameroon, Ethiopia, Nigeria and South Sudan) except for DRC that slightly declined. None of the countries reached 90% coverage of the 1st dose, the closest being Cameroon and Ethiopia reaching 71-72% in 2023. Average coverage levels of the seven AFR countries were 55% and 64%, in 2018 and 2023, respectively.

In **EMR** IPV1 coverage decreased in three countries (Afghanistan, Sudan and Yemen), remained unchanged in three countries (Iraq, Libya and Somalia) and increased in two countries (Pakistan and Syria) between 2018 and 2023. Only one country (Iraq) reached the benchmark with 94% coverage estimate in 2023, and Somalia remained at the lowest level of 42% coverage for the period 2018-2023. Averages from 2018 to 2023 for the eight EMR countries were 71% and 67% respectively.

Countries in **SEAR** have a higher IPV1 coverage estimate overall than the other two regions. Bangladesh and India reached above 90% coverage in 2023, whereas Indonesia and Myanmar reported sharp decreases in 2020 and 2021, respectively, followed by increases in 2023. Average coverage levels for the five SEAR countries were 62% and 82% in 2018 and 2023 respectively.

Polio Transition M&E Indicators in 20 Priority countries (2018-2023)



3rd dose of Oral Polio Vaccine (OPV3) coverage

The estimated coverage of OPV3 varies significantly across the 20 polio transition countries. Nine countries reported an increase between 2018 and 2023, three countries reported unchanged estimates and eight countries reported a decline in estimated OPV3 coverage.

In **AFR** four countries increased coverage of OPV3 (Cameroon, Chad, Nigeria and South Sudan) and three countries experienced a decline in coverage (Angola, DRC and Ethiopia). None of the countries reached 90% coverage of the 3rd dose, the closest being Cameroon reaching 74% in 2023. Average coverage levels of the seven AFR countries were 61% and 67%, in 2018 and 2023, respectively.

Between 2018 and 2023 in **EMR** OPV3 coverage decreased in three countries (Afghanistan, Sudan and Syria), remained unchanged in two countries (Libya and Somalia) and increased in three countries (Iraq, Pakistan and Yemen). Only Iraq exceeded the benchmark of 90% coverage in 2023, Somalia remained at 47% coverage for the period 2018-2023 and Yemen declined from 59% in 2018 to 46% in 2023. Averages from 2018 to 2023 for the eight EMR countries declined from 69% to 66% and respectively.

Countries in **SEAR** have a higher OPV3 coverage estimate overall than the other two regions. Bangladesh, India and Nepal reached above 90% coverage in 2023, whereas Indonesia and Myanmar reported sharp decreases in 2020 and 2021, respectively, partially recovered by increases in 2022-23. Average coverage levels for the five SEAR countries were 91% and 89% in 2018 and 2023 respectively.

Polio Transition M&E Indicators in 20 Priority countries (2018-2023)



Rate of non-polio AFP/100,000 children <15 years

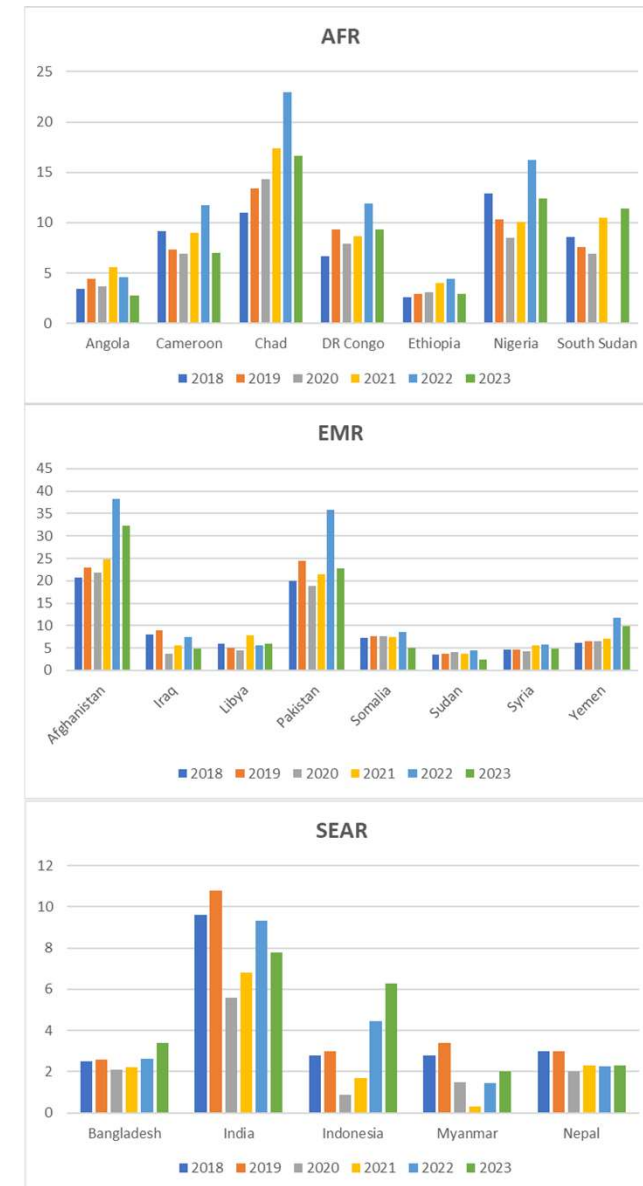
The rate of non-polio AFP cases has been reported above the performance targets of 1/100,000 (and for endemic countries: 2/100 000) for almost all polio transition countries throughout the period 2018-2022. Only Indonesia and Myanmar reported rates below 1/100 000 in 2020-22 and 2020-21, respectively.

In **AFR**, four countries reported higher rates in 2023 compared to 2018. All countries reported rates well above the target of 1/100 000 in all years. Averages from 2018 to 2023 for the seven AFR countries were 7.8 and 8.9 respectively.

In **EMR**, the non-polio AFP rates have seen a more stable trend across the period 2018-2023, with some fluctuations in five countries (Libya, Somalia, Sudan, Syria, and Yemen), and increases compared to baseline in 2018 in Afghanistan and Pakistan. All eight countries reported rates above the target in all years. Averages for the eight EMR countries were 9.5 and 11 for the years 2018 and 2023, respectively.

SEAR shows an overall lower rate of non-polio AFP than the two other regions and an overall decreasing trend across the time-period 2018-21, recovered in 2022-23. India reported the highest rates in all years among the five countries. Rates in Myanmar remained the lowest, with 0,3/100 000 and 1,4/100 000 in 2021 and 2022, respectively.

Polio Transition M&E Indicators in 20 Priority countries (2018-2023)



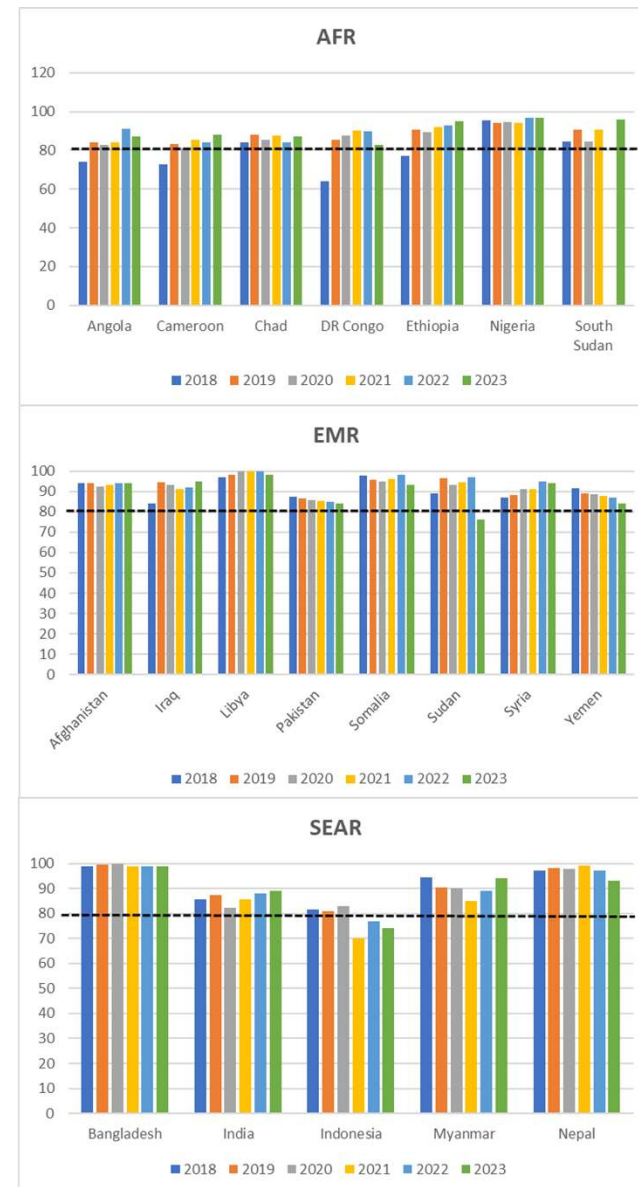
Percentage of AFP cases with two adequate stool specimens

The indicator on the percentage of AFP cases with two adequate stool specimen, showed 18 out of 20 polio transition priority countries reaching the performance target of 80% in 2023. On average all three regions register similar performance around 90% of adequate stool specimens.

AFR showed fluctuations in the period under review. All countries reported overall increasing percentages. Average rates for 2018-2023 for the seven AFR countries were 79% and 90% respectively.

All polio transition priority countries in **EMR** had a continued high proportion of coverage above 80% in all countries across the years, except for Sudan. Declining but still above the target in the recent years were reported by Pakistan and Yemen. Average rates for 2018-2023 for the eight EMR countries were 91% and 90% respectively.

In **SEAR**, a slightly declining trend over the years 2018-2021. All the countries, except Indonesia for the last three years, reached above the performance target of 80% in all years of the period. Average rates in 2018-2023 for the five SEAR countries were 92% and 90% respectively.



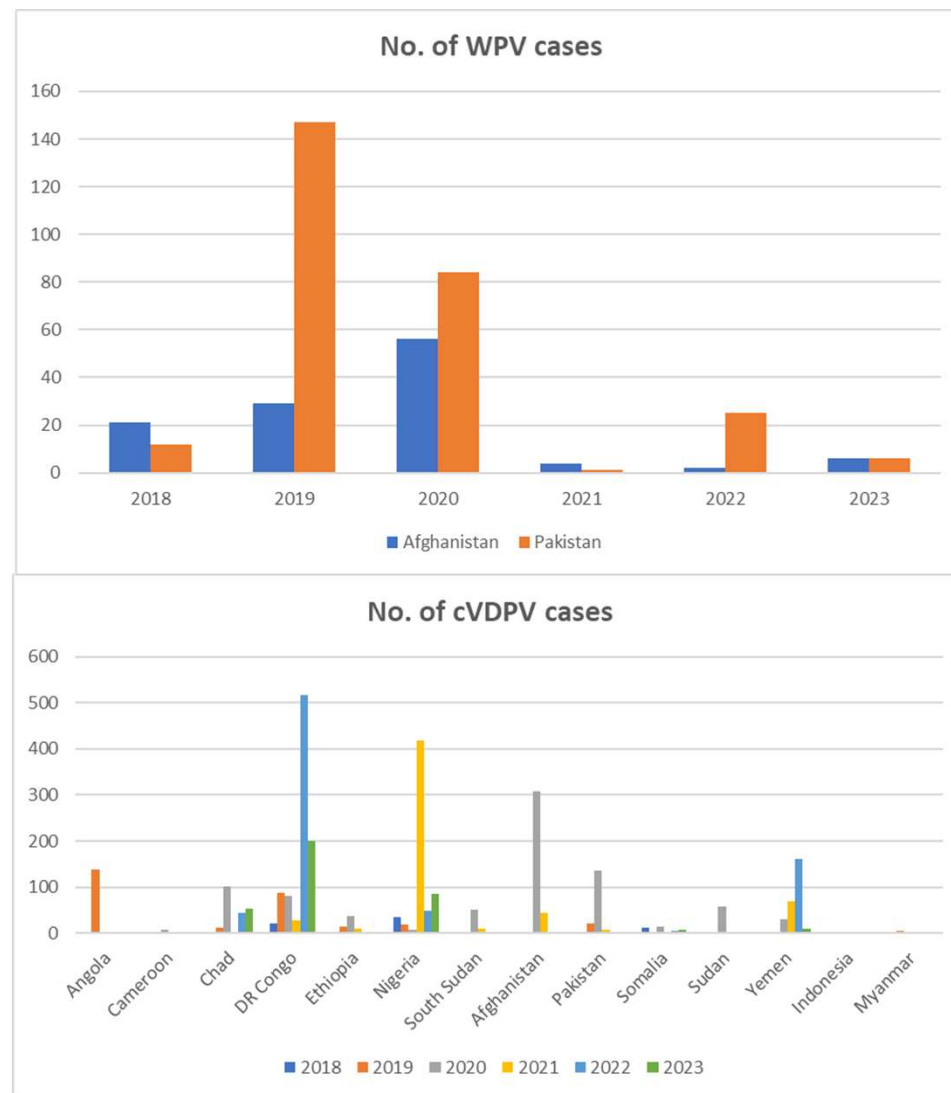
Wild Poliovirus (WPV) and circulating Vaccine-Derived Poliovirus (cVDPV) cases

In the two endemic countries, the number of wild poliovirus type 1 reached a minimum of 5 cases in 2021, then increased to 27 cases in 2022 and 12 in 2023. Thirteen priority countries were affected by cVDPV, with case load reaching a peak in 2020 with 833 cases. 355 cases were counted in 2023.

All seven countries in **AFR** were affected by cVDPV over the period 2018-2023. They reported 338 cases in 2023.

In **EMR**, Afghanistan and Pakistan, the two endemic countries, reported 6 cases each in 2023. Somalia and Sudan reported 8 and 9 cVDPV cases respectively in 2023.

SEAR reported two cVDPV outbreaks in Indonesia and one in Myanmar, with a total of 8 cases in the period 2018-2022, no cases in 2023.



Environmental surveillance

The total number of environmental surveillance sites in the priority countries **increased** from 366 (2018) to 973 (2023). In the last years, the average number of samples collected per site has been around 13.

In **AFR** the number of environmental sites increased, especially in DRC and Nigeria. The average number of samples per site declined from 20 (2018) to 14 (2023).

In **EMR** the number of environmental sites increased, especially in Afghanistan and Pakistan. The average number of samples per site declined from 21 (2018) to 9 (2022).

In **SEAR** the number of environmental sites increased in India, whereas declined in Indonesia and Myanmar. The average number of samples per site declined from 22 (2018) to 18 (2023).

Polio Transition M&E Indicators in 20 Priority countries (2018-2023)



1st dose of Measles Containing Vaccine (MCV1) coverage

The estimated coverage of MCV1 varies greatly from region to region and country to country. Nine out of 20 polio transition priority countries showed an increase in coverage between 2018 and 2023. Five countries had unchanged estimates and six countries reported a decline in estimated MCV1 coverage.

In **AFR** five countries increased coverage of MCV1 (Cameroon, Chad, Ethiopia, Nigeria and South Sudan) and two countries experienced decline in coverage (Angola and DRC). All countries are still far from the performance target of >90% coverage, the closest being South Sudan reaching 72% in 2023. Average coverage levels of the seven countries were 54% and 61%, in 2018 and 2023, respectively.

Between 2018 and 2023 in **EMR** MCV1 coverage decreased in three countries (Afghanistan, Sudan and Syria), remained unchanged in two countries (Libya and Somalia) and increased in three countries (Iraq, Pakistan and Yemen). Only one country (Syria) reached above the benchmark of a 90% coverage estimate in 2023. Averages from 2018 to 2023 for the eight countries were 71% and 66% respectively.

Countries in **SEAR** have a higher MCV1 coverage estimate than the other two regions. Bangladesh, India and Nepal reached above the 90% coverage target in 2023, whereas Indonesia and Myanmar reported decrease over period. Average coverage levels for the five countries were 93% and 88% in 2018 and 2023, respectively.

Polio Transition M&E Indicators in 20 Priority countries (2018-2023)



2nd dose of Measles Containing Vaccine (MCV2) coverage

Large variations are reported on the coverage of MCV2 across regions and countries. Most of the countries reported an increasing trend over the period 2018 - 23. Five countries reported a decline in the estimated MCV2 coverage.

In **AFR** five countries reported increased coverage of MCV2 (Angola, Cameroon, Chad, Ethiopia and Nigeria) and two countries did not report as they did not introduce the 2nd dose during the reporting period (DRC and South Sudan). The average coverage of the reporting countries was 23% and 37%, in 2018 and 2023, respectively.

Between 2018 and 2023 in **EMR** MCV2 coverage increased in three countries (Pakistan and Somalia and Syria), remained unchanged in two countries (Iraq and Libya) and decreased in three countries (Afghanistan, Sudan and Yemen). Averages from 2018 to 2023 for the eight countries were 63% and 55% respectively.

Countries in **SEAR** have a higher MCV2 coverage estimate than the other two regions. Bangladesh and India reached 90% coverage in 2023. Indonesia and Myanmar reported decreases over the period. Average coverage levels for the five countries were around 80% in the period 2018-23.

Polio Transition M&E Indicators in 20 Priority countries (2018-2023)



Percentage of districts with MCV2 coverage >80%

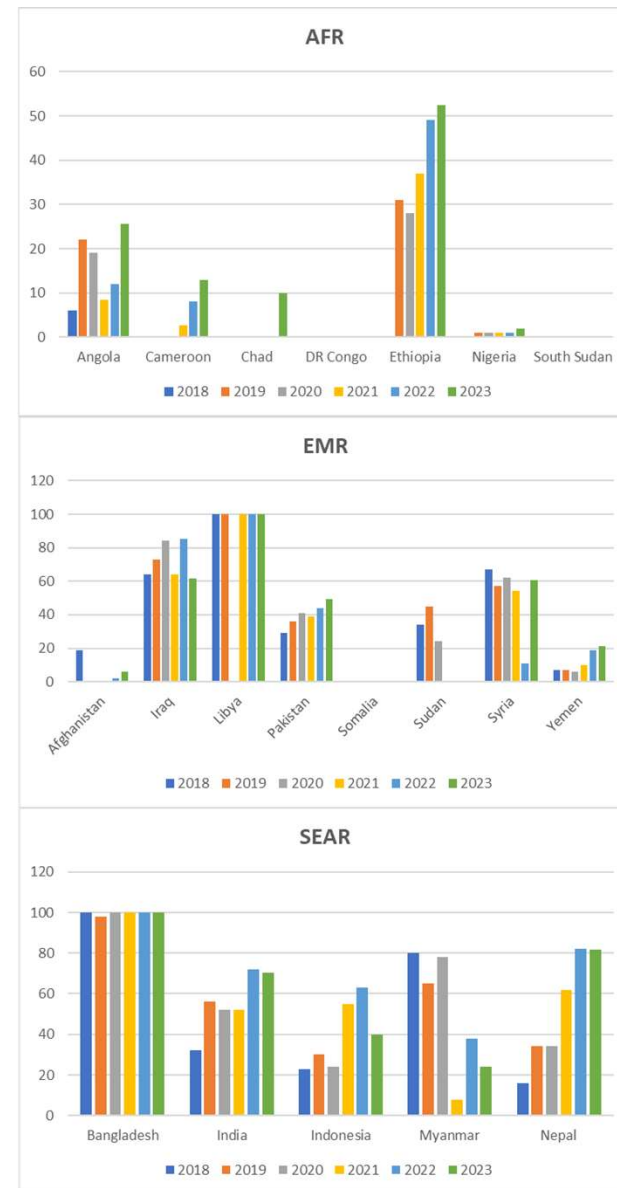
There are variations in the reporting on the percentage of districts with coverage of MCV2 greater or equal to 80% across regions and countries. Most of the countries reported an increasing trend over the period 2018 - 23.

In **AFR** five countries reported the percentage of districts with MCV2 coverage >80% (Angola, Cameroon, Chad, Ethiopia and Nigeria). The average indicator values of reporting countries were 8% and 17%, in 2018 and 2023, respectively.

In **EMR** the percentage of districts with MCV2 >80% increased in two countries (Pakistan and Yemen), remained unchanged at 100% in one countries (Libya) and decreased in the other four countries (Afghanistan, Iraq, Sudan and Syria). The average indicator values of reporting countries were 46% and 50%, in 2018 and 2023, respectively.

In **SEAR** all polio transition countries reported increasing percentages of districts with MCV2 coverage >80%, except Myanmar. The average indicator values of reporting countries were 50% and 63%, in 2018 and 2022, respectively.

Polio Transition M&E Indicators in 20 Priority countries (2018-2023)



Government expenditure on routine immunization per surviving infant (US\$)

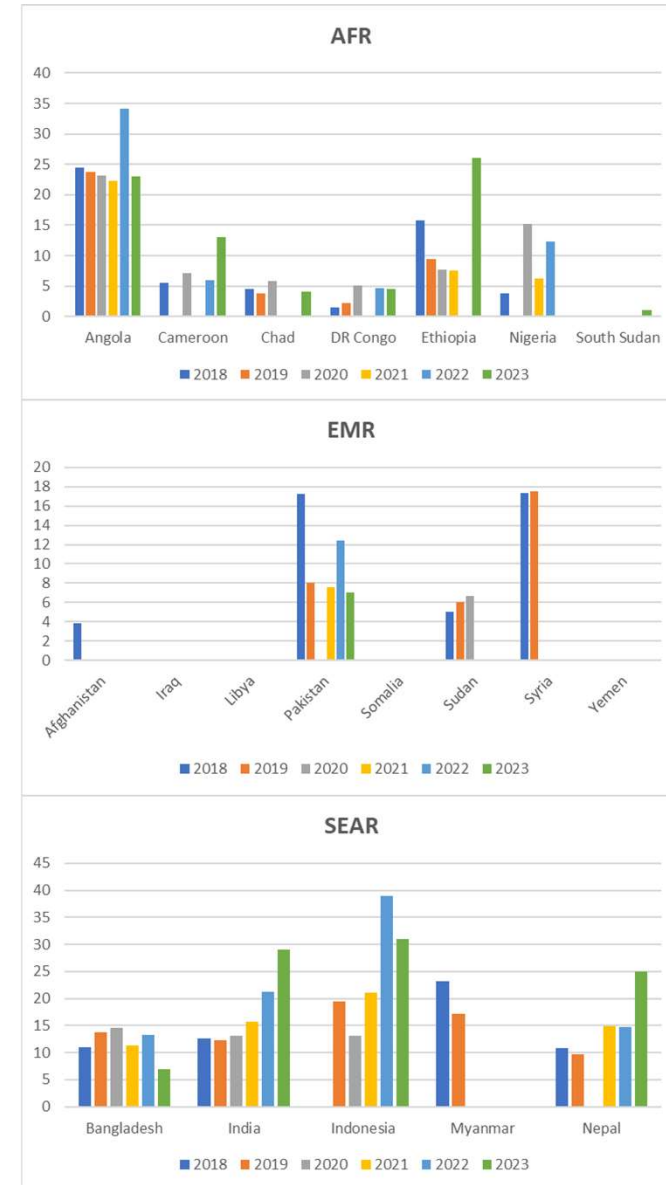
There are variations and gaps in the reporting on government expenditure on routine immunization across regions and countries. This limitation impedes the ability to monitor the financial sustainability of the transition process.

Government expenditures on routine immunization slightly increased in **AFR** between 2018 and 2023. The total averages for the six AFR reporting countries were US\$ 9.3 per surviving infant in 2018 and US\$ 11.9 in 2023.

Few polio transition priority countries of the **EMR** have reported over the period on this indicator. Among the countries reporting, the trend is increasing in the recent years. The total averages of government expenditure on routine immunization are US\$ 10.9 per surviving infant in 2018 and US\$ 7.0 in 2023.

In **SEAR** government expenditures show an increasing trend for the polio transition priority countries between 2018-2023, except Myanmar. The total averages for the five SEAR countries were US\$ 14.4 in 2018 and US\$ 23.0 in 2023.

Polio Transition M&E Indicators in 20 Priority countries (2018-2023)



Laboratory core capacity

Laboratory core capacity (IHR indicator) has increased in more than half of the polio transition priority countries. Eight countries reported a decline in the laboratory core capacity between 2018 to 2023.

Four countries in **AFR** reported increased laboratory core capacity over the period (Angola, Cameroon, Ethiopia and Nigeria) the other three countries (Chad, DRC and South Sudan) reported declines. The average indicator values of the reporting countries were 47% and 55%, in 2018 and 2023, respectively.

Between 2018 and 2023 in **EMR** laboratory core capacity increased in three countries (Afghanistan, Somalia and Syria), remained unchanged in one countries (Pakistan) and decreased in four countries (Iraq, Libya, Sudan and Yemen). Averages in 2018 and 2023 for the eight countries were 58% and 50% respectively.

Countries in **SEAR** reported increased laboratory core capacity, except Myanmar, in the period 2018 and 2023. Average coverage levels for the five countries were 57% and 68%, in 2018 and 2023, respectively.

Polio Transition M&E Indicators in 20 Priority countries (2018-2023)



Surveillance core capacity

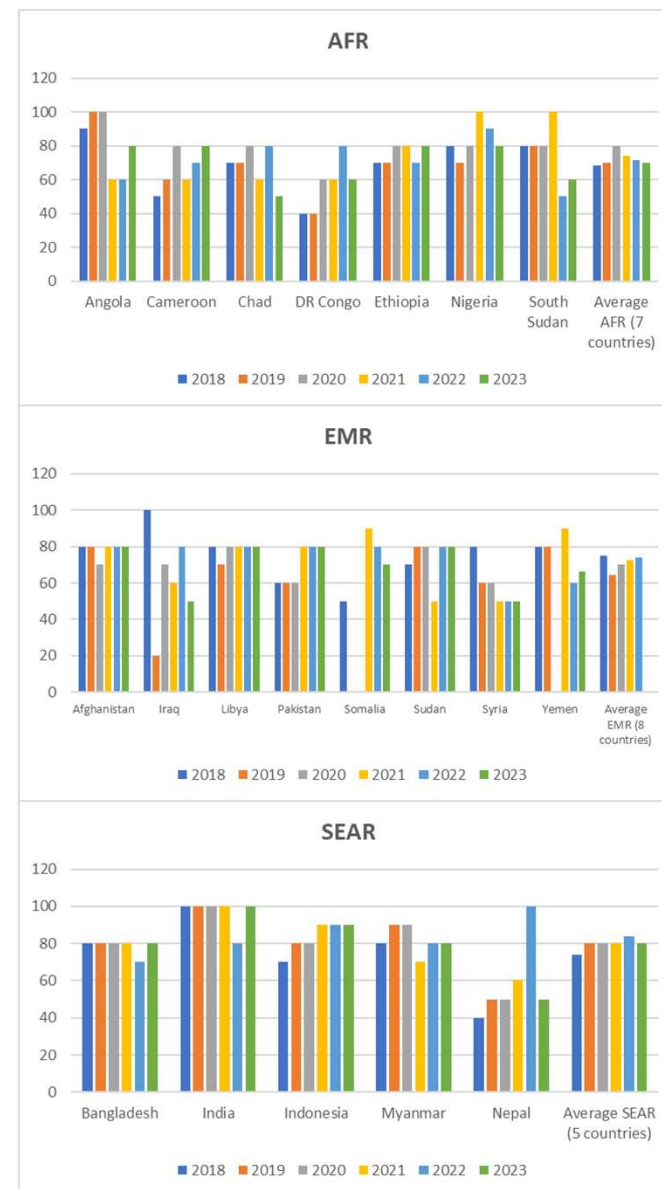
Surveillance core capacity (IHR indicator) increased in eight polio transition priority countries, remained stable in six countries and declined in six countries between 2018 to 2023.

In **AFR** three countries reported increased surveillance core capacity (Cameroon, DRC and Ethiopia), three countries declined (Angola, Chad and South Sudan) and one country remained stable (Nigeria). The average indicator values of the reporting countries were 69% and 70%, in 2018 and 2023, respectively.

Between 2018 and 2023 in **EMR** surveillance core capacity increased in three countries (Pakistan, Somalia and Sudan), remained unchanged in two countries (Angola and Libya) and decreased in three countries (Iraq, Syria and Yemen). Averages in 2018 and 2023 for the eight countries were 75% and 66% respectively.

In **SEAR** two countries reported in 2023 increased surveillance core capacity (Indonesia and Nepal), three countries reported the same values as in 2018 (Bangladesh and India, Myanmar). Average indicator values were 74% and 80%, in 2018 and 2023, respectively.

Polio Transition M&E Indicators in 20 Priority countries (2018-2023)



Emergency framework core capacity

The indicator on emergency framework core capacity (IHR indicator) has been available through e-SPAR only for the period 2018 to 2020, replaced by other indicators. Fifteen polio priority countries reported an increase of emergency framework core capacity or no change between 2018-2020. The increase was especially vivid between 2019 and 2020. This increase is assumed to be related to the strengthening of emergency responses in general during the COVID-19 pandemic.

All polio transition priority countries in the **AFR** except South Sudan reported an increased core capacity on emergency framework especially between 2019 and 2020, with large variations among countries. The largest increase was reported by DRC. The total averages for the AFR countries were 44% in 2018 and 58% in 2020.

In the **EMR**, the range also varied extensively from 33% reported by Libya in 2020 to 87% reported by Iraq. An increasing trend is noted for countries reporting, except in Sudan. The total averages for the EMR countries were 52% in 2018 and 62% in 2020.

All polio transition countries in the **SEAR** reported an increasing trend except Myanmar during the period 2018-2020. Variations were also present, yet slightly less pronounced in SEAR countries than for the other two regions, ranging from 47% in Myanmar and Nepal to 80% in Indonesia and India 2020. The total averages for the SEAR countries were 50% in 2018 and 61% in 2020.

Polio Transition M&E Indicators in 20 Priority countries (2018-2023)



Process indicators

Twelve countries, 60% of the priority countries, developed and endorsed **National Polio Transition Plans**, four countries developed draft plans that however were not endorsed. All 7 countries in AFR, 3 countries in EMR 3 and 2 countries in SEAR developed and endorsed national transition plans.

Only two countries (Bangladesh and Nigeria) have developed related **Action Plans** for the implementation of National Polio Transition Plans.

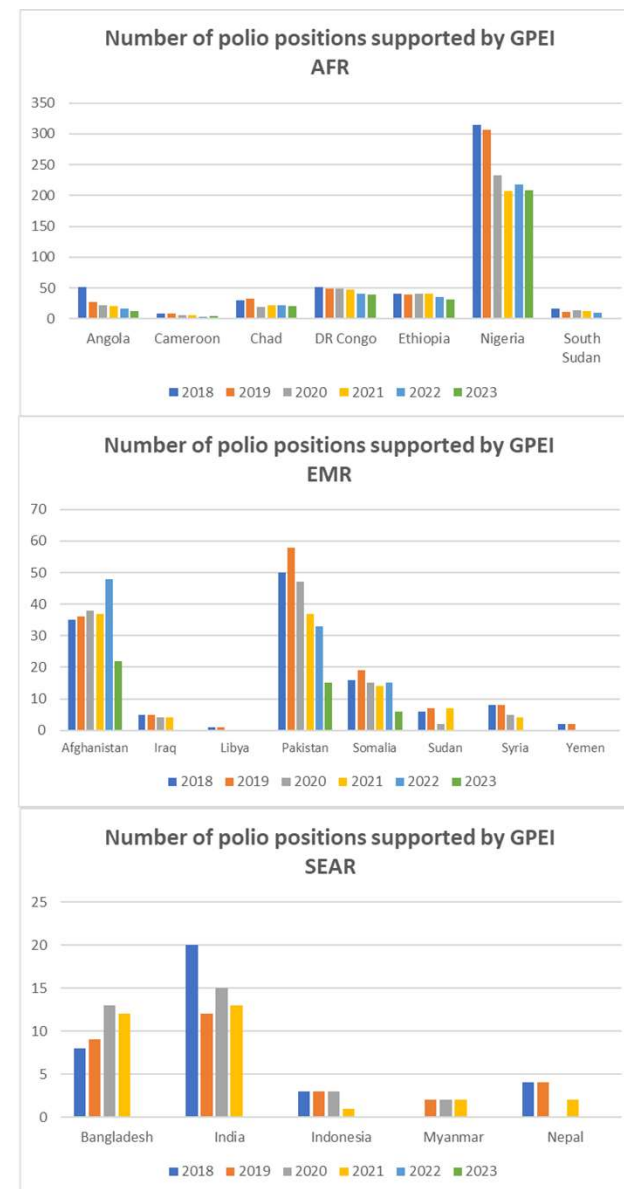
The **number of polio position supported by GPEI** declined progressively, from 671 staff positions in 2018 to 360 in 2023. These numbers do not include other types of contract arrangements, e.g. consultancies.

In **AFR** the majority of staff are positioned in Nigeria (209 in 2023), followed by DRC and Ethiopia (39 and 31 staff, respectively in 2023). Decline was reported by Angola (from 52 staff in 2018 to 13 staff in 2023), Chad (from 30 to 21) and South Sudan (from 16 to zero).

In **EMR** the two endemic countries, Afghanistan and Pakistan, have 22 and 15 staff respectively, and Somalia has 6 staff in 2023.

SEAR reduced the number of staff from 35 staff (working part-time on polio) in 2018 to zero staff in 2022-23.

Polio Transition M&E Indicators in 20 Priority countries (2018-2023)



Overview - Averages of the 20 priority countries								
Objective 1 – Sustaining a polio-free world after eradication of poliovirus								
Indicator		2018	2019	2020	2021	2022	2023	Line trend
1.1	Coverage with inactivated poliovirus vaccine (IPV1)	63	71	68	68	73	70	
1.2	Coverage with bivalent oral polio vaccine (OPV)	72	74	72	68	72	72	
1.3	Rate of non-polio acute flaccid paralysis/100,000 children <15 years	7.6	8.1	6.7	8.1	11.0	8.6	
1.4	Percentage of AFP cases with two adequate stool specimens	87	91	90	90	91	90	
1.5.1	Polio Outbreak & endemic: Total number of cases of WPV	33	176	140	5	27	12	
1.5.2	Polio Outbreak & endemic: Total number of cases of cVDPV	67	301	833	589	782	355	
1.6.1	Total number of environmental surveillance sites	366	418	440	465	600	973	
1.6.2	Average number of environmental samples per site	21	19	13	14	13	13	
Objective 2 – Strengthening immunization systems, including surveillance for vaccine-preventable diseases								
Indicator		2018	2019	2020	2021	2022	2023	Line trend
2.1	Vaccine coverage with one dose of measles containing vaccine (MCV1)	70	70	69	66	70	70	
2.2	Vaccine coverage with two doses of measles containing vaccine (MCV2)	66	62	60	56	57	56	
2.3	Percentage of districts with MCV2 >80%	44	44	40	40	46	42	
2.4	Government expenditure on routine immunization per surviving infant (US\$)	11.2	11.9	11.2	13.3	17.5	15.5	
Objective 3 – Strengthening emergency preparedness, detection and response capacity								
Indicator		2018	2019	2020	2021	2022	2023	Line trend
3.1	Avg % of IHR self-assessment annual reporting of laboratory core capacity	54	58	66	62	61	56	
3.2	Avg % of IHR self-assessment annual reporting of surveillance core capacity	73	71	77	75	76	71	
3.3	Avg % of IHR self-assessment annual reporting of emergency framework core capacity	49	50	60	-	-	-	
Process indicators								
Indicator		2018	2019	2020	2021	2022	2023	Line trend
4.1	Cumulative number of national polio transition plan endorsed	7	8	9	12	12	12	
4.2	Development of Action Plan (2021-2023)	-	-	2	2	2	2	
4.3	Total number of polio positions supported by the Global Polio Eradication Initiative	671	639	526	490	440	360	




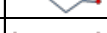














Polio Transition M&E Indicators in 20 Priority countries (2018-2023)

AFRO - Averages of the 7 priority countries (Angola, Cameroon, Chad, DR Congo, Ethiopia, Nigeria, South Sudan)							
Objective 1 – Sustaining a polio-free world after eradication of poliovirus							
Indicator	2018	2019	2020	2021	2022	2023	Line trend
1.1 Coverage with inactivated poliovirus vaccine (IPV1)	55	59	61	60	61	64	
1.2 Coverage with bivalent oral polio vaccine (OPV)	61	62	63	61	60	67	
1.3 Rate of non-polio acute flaccid paralysis/100,000 children <15 years	7.8	7.9	7.3	9.3	12.0	8.9	
1.4 Percentage of AFP cases with two adequate stool specimens	79	88	87	89	90	90	
1.5.1 Polio Outbreak & endemic: Number of cases of WPV	0	0	0	0	0	0	
1.5.2 Polio Outbreak & endemic: Number of cases of cVDPV	54	269	287	468	613	338	
1.6.1 Number of environmental surveillance sites	167	199	227	465	236	222	
1.6.2 Average number of environmental samples per site	20	22	13	15	13	14	
Objective 2 – Strengthening immunization systems, including surveillance for vaccine-preventable diseases							
Indicator	2018	2019	2020	2021	2022	2023	Line trend
2.1 Vaccine coverage with one dose of measles containing vaccine (MCV1)	54	54	55	53	57	61	
2.2 Vaccine coverage with two doses of measles containing vaccine (MCV2)	23	28	29	35	31	37	
2.3 Percentage of districts with MCV2 >80%	6	18	16	12	18	17	
2.4 Government expenditure on routine immunization per surviving infant (US\$)	9.3	9.8	10.7	12.0	14.2	11.9	
Objective 3 – Strengthening emergency preparedness, detection and response capacity							
Indicator	2018	2019	2020	2021	2022	2023	Line trend
3.1 Avg % of IHR self-assessment annual reporting of laboratory core capacity	47	53	64	66	66	55	
3.2 Avg % of IHR self-assessment annual reporting of surveillance core capacity	69	70	80	74	71	70	
3.3 Avg % of IHR self-assessment annual reporting of emergency framework core capacity	44	47	58	-	-	-	
Process indicators							
Indicator	2018	2019	2020	2021	2022	2023	Line trend
4.1 Cumulative number of national polio transition plan endorsed	5	6	7	7	7	7	
4.2 Development of Action Plan (2021-2023)	-	-	-	1	1	1	
4.3 Number of polio positions supported by the Global Polio Eradication Initiative	513	473	382	357	344	317	

Polio Transition M&E Indicators in 20 Priority countries (2018-2023)

EMRO - Averages of the 8 priority countries (Afghanistan, Iraq, Libya, Pakistan, Somalia, Sudan, Syria, Yemen)							
Objective 1 – Sustaining a polio-free world after eradication of poliovirus							
Indicator	2018	2019	2020	2021	2022	2023	Line trend
1.1 Coverage with inactivated poliovirus vaccine (IPV1)	71	74	71	72	76	67	
1.2 Coverage with bivalent oral polio vaccine (OPV)	69	73	71	69	72	66	
1.3 Rate of non-polio acute flaccid paralysis/100,000 children <15 years	9.5	10.5	8.9	10.5	14.7	11.0	
1.4 Percentage of AFP cases with two adequate stool specimens	91	93	92	92	94	90	
1.5.1 Polio Outbreak & endemic: Number of cases of WPV	33	176	140	5	27	12	
1.5.2 Polio Outbreak & endemic: Number of cases of cVDPV	12	26	546	121	168	17	
1.6.1 Number of environmental surveillance sites	102	117	127	153	271	657	
1.6.2 Average number of environmental samples per site	21	12	12	10	10	9	
Objective 2 – Strengthening immunization systems, including surveillance for vaccine-preventable diseases							
Indicator	2018	2019	2020	2021	2022	2023	Line trend
2.1 Vaccine coverage with one dose of measles containing vaccine (MCV1)	71	71	70	69	69	66	
2.2 Vaccine coverage with two doses of measles containing vaccine (MCV2)	63	64	65	56	58	55	
2.3 Percentage of districts with MCV2 >80%	46	45	36	44	44	50	
2.4 Government expenditure on routine immunization per surviving infant (US\$)	10.9	10.5	6.7	7.6	12.4	7.0	
Objective 3 – Strengthening emergency preparedness, detection and response capacity							
Indicator	2018	2019	2020	2021	2022	2023	Line trend
3.1 Avg % of IHR self-assessment annual reporting of laboratory core capacity	58	54	62	57	51	50	
3.2 Avg % of IHR self-assessment annual reporting of surveillance core capacity	75	64	70	73	74	66	
3.3 Avg % of IHR self-assessment annual reporting of emergency framework core capacity	52	48	62	-	-	-	
Process indicators							
Indicator	2018	2019	2020	2021	2022	2023	Line trend
4.1 Cumulative number of national polio transition plan endorsed	0	0	0	3	3	3	
4.2 Development of Action Plan (2021-2023)	-	-	-	-	-	-	
4.3 Number of polio positions supported by the Global Polio Eradication Initiative	123	136	111	103	96	43	

Polio Transition M&E Indicators in 20 Priority countries (2018-2023)

SEARO - Averages of the 5 priority countries (Bangladesh, India, Indonesia, Myanmar, Nepal)							
Objective 1 – Sustaining a polio-free world after eradication of poliovirus							
Indicator	2018	2019	2020	2021	2022	2023	Line trend
1.1 Coverage with inactivated poliovirus vaccine (IPV1)	62	84	75	74	84	82	
1.2 Coverage with bivalent oral polio vaccine (OPV)	91	91	86	77	88	89	
1.3 Rate of non-polio acute flaccid paralysis/100,000 children <15 years	4.1	4.6	2.4	2.7	4.0	4.4	
1.4 Percentage of AFP cases with two adequate stool specimens	92	91	91	88	90	90	
1.5.1 Polio Outbreak & endemic: Number of cases of WPV	0	0	0	0	0	0	
1.5.2 Polio Outbreak & endemic: Number of cases of cVDPV	1	6	0	0	1	0	
1.6.1 Number of environmental surveillance sites	97	102	86	79	93	94	
1.6.2 Average number of environmental samples per site	22	21	14	17	19	18	
Objective 2 – Strengthening immunization systems, including surveillance for vaccine-preventable diseases							
Indicator	2018	2019	2020	2021	2022	2023	Line trend
2.1 Vaccine coverage with one dose of measles containing vaccine (MCV1)	93	91	88	78	88	88	
2.2 Vaccine coverage with two doses of measles containing vaccine (MCV2)	80	81	80	71	80	80	
2.3 Percentage of districts with MCV2 >80%	50	57	58	55	71	63	
2.4 Government expenditure on routine immunization per surviving infant (US\$)	14.4	14.5	13.6	15.8	22.1	23.0	
Objective 3 – Strengthening emergency preparedness, detection and response capacity							
Indicator	2018	2019	2020	2021	2022	2023	Line trend
3.1 Avg % of IHR self-assessment annual reporting of laboratory core capacity	57	71	74	66	69	68	
3.2 Avg % of IHR self-assessment annual reporting of surveillance core capacity	74	80	80	80	84	80	
3.3 Avg % of IHR self-assessment annual reporting of emergency framework core capacity	53	59	61	-	-	-	
Process indicators							
Indicator	2018	2019	2020	2021	2022	2023	Line trend
4.1 Cumulative number of national polio transition plan endorsed	2	2	2	2	2	2	
4.2 Development of Action Plan (2021-2023)	-	-	1	1	1	1	
4.3 Number of polio positions supported by the Global Polio Eradication Initiative	35	30	33	30	0	0	

Polio Transition M&E Indicators in 20 Priority countries (2018-2023)