



In the Name of God, the Compassionate, the Merciful

Address by

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WHO EASTERN MEDITERRANEAN REGION

to the

**SEVENTEENTH MEETING OF THE REGIONAL COMMISSION FOR
CERTIFICATION OF POLIOMYELITIS ERADICATION**

Cairo, Egypt, 24–26 April 2007

Mr Chairman, Dear Colleagues, Ladies and Gentlemen,

I am very pleased to welcome all of you to the Seventeenth Meeting of the Regional Commission for Certification of Poliomyelitis Eradication. I would like to extend a special welcome to Professor Gaafar Ibnauf Suliman and Professor Oyewale Tomori who are attending this meeting as members of the Commission for the first time.

I believe that at this meeting, the Commission will be reviewing the largest number of national reports since it began to do so in the late 1990s. I take this opportunity to express my deep appreciation for the commendable work being done by the National Certification Committees and the national programme managers, and for their continuing commitment to the goal of polio eradication.

I am sure you are aware that we have reached a critical stage in our efforts to eradicate polio. We are conscious that the task has proved far more difficult than was envisaged when the World Health Assembly, in 1988, set the target for polio eradication by 2000. Five years ago, we all thought that the Eastern Mediterranean Region would be polio free very soon and that certification would take place by about now. However, wars and persistent civil strife and insecurity in some parts of the remaining endemic countries in the Region, together with importations have created considerable operational difficulties. Now, we are back on track and are witnessing substantial progress.

Mr Chairman, Dear Colleagues

A few weeks ago a high level consultation was convened in Geneva for stakeholders on interruption of poliovirus transmission in the remaining four endemic countries. It was gratifying that all the stakeholders, including representatives of endemic countries and the partners, renewed their commitment in unequivocal terms, to eradicating polio during the coming two years. Endemic countries committed themselves to assigning the highest public health priority to the polio eradication initiative and ensuring political support from the highest level to the grassroots level. They also agreed to share with the donors the financial burden of this initiative, through increased allocation of domestic resources, both for vaccine procurement and for programme operations.

Within our region, apart from the two endemic countries, the situation in the countries in the Horn of Africa continues to remain very fragile. The epidemic in Somalia appears to be coming to an end but we need to be vigilant. The second meeting of the technical advisory group of the Horn of Africa is to take place soon after your meeting and will provide an opportunity to improve further the cross-border coordination of activities and sharing of information on a timely basis in this very important part of the world.

Mr Chairman,

Most of the polio-free countries in the Region remain at risk of importation. Some, of course, are at a higher risk than others. I am pleased to learn that, at the insistence of the Commission, the national plans of action for responding to importation are continually being reviewed and updated. However, it is critical that certification level surveillance is maintained in all the countries of the Region, particularly in areas and population groups at high risk. I am aware that the quality of surveillance is being continually monitored in each country of the Region. In this regard I wish to call on the NCCs to be really critical of the quality of the data presented to them, and on the Commission to further evaluate these data.

I realize that building the infrastructure for the polio eradication initiative has placed a heavy burden on the health services of the country, even though substantial resources are provided through generous and sustained support from our partners. I feel that it is now timely to start thinking how the skills and the infrastructure developed for polio eradication could be utilized for the control of other communicable diseases and for strengthening public health care in the countries, and to start planning with the countries ways and means to maintain this very valuable infrastructure.

Mr Chairman, I am pleased to learn that you have already started to discuss and to prepare your own report on regional certification rather than leaving it to the very end and wish you success in this endeavour.

In conclusion, I would like to thank you all for your commitment to polio eradication and for ensuring eventual regional certification, which I hope will be soon.

I wish you a productive meeting and a pleasant stay in Cairo.