



Press Release  
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### **Announcing the publication of a 14-article supplement: “Impact, Innovation and Inclusion of Civil Society Organizations in Polio Eradication: The CORE Group Polio Project Story.”**

Oct. 3, 2019 - At 12 noon EST today, the American Journal of Tropical Medicine and Hygiene (AJTMH) released the publication of a special series of 14 articles chronicling the CORE Group Polio Project’s (CGPP) multiple contributions to improving community health in extremely difficult contexts by working to eradicate polio, improve immunization uptake, promote healthy household behaviors for mothers and children, and increase disease detection.

The supplement may be accessed at [https://www.ajtmh.org/content/journals/14761645/101/4\\_Suppl](https://www.ajtmh.org/content/journals/14761645/101/4_Suppl)  
The AJTMH is a peer-reviewed, open-access scientific journal published by the American Society of Tropical Medicine and Hygiene.

The supplement addresses the CGPP’s unique model of community engagement and the concrete strategies that have focused largely on high-risk areas with marginalized or hard-to-reach populations where health systems and immunization programs have also been weak, and where transmission of poliovirus has not been stopped or where the risk of recurrent transmission is high, and where resistance to the polio campaign has been encountered. The CGPP has engaged local civic leaders and communities in ways to complement top-down vertical efforts of ministries of health and other partners in the Global Polio Eradication Initiative (GPEI.) The CGPP works in India, Ethiopia, South Sudan, Nigeria, Kenya, Somalia, Uganda and Afghanistan

Over the past two decades, the USAID-funded CGPP has strategically reached and engaged with these communities to promote positive participation and acceptance of polio eradication efforts, engage marginalized communities through behavior change strategies coordinated by national and local non-governmental organizations, and galvanize underserved communities to take ownership of their health. To learn more about the CGPP, please visit the <https://coregroup.org/our-work/programs/core-group-polio-project/> or find a [one-page summary](#) here.

Dr. Jon K. Andrus, with the University of Colorado, and Dr. Henry B. Perry, with the Johns Hopkins Bloomberg School of Public Health, served as co-editors of the publication. The supplement features the work of approximately 40 authors from India, Ethiopia, Nigeria, Kenya, South Sudan, Malawi and the

United States. Their work addresses the impact of CGPP strategies such as pioneering the use of community-based surveillance, promoting independent campaign monitoring, establishing a cross-border initiative, and developing a creative cadre of community mobilizers and volunteers to track missed children, engage families in discussions about the importance of immunization, provide behavior change education on key health issues, dispel rumors and misperceptions, and link families to vaccination sites and other health services.

“The CORE Group Polio Project (CGPP) is one of the unsung heroes of the Global Polio Eradication Initiative, working in some of the most challenging places of the world where polio immunization levels were the lowest, where resistance to polio immunization was the greatest, and where health services were the weakest,” Dr. Perry said. “And the CGPP has strengthened surveillance in these same areas, which is indispensable for being able to certify that polio eradication has in fact been achieved.”

Dr. Perry continued: “Getting to the final eradication of polio will require further application of the lessons learned from the CORE Group Polio Project regarding community engagement in order for communities where transmission is still occurring to take ownership of the issue and to recognize the benefits for their own populations – not just for the eradication of polio but for raising levels of coverage of all routine immunizations and for addressing the underlying problems that facilitate polio transmission, namely lack of sanitation and hygiene.”

2019 has been a very difficult year for polio eradication. As of October 1, 82 cases of wild poliovirus (WPV) have been confirmed (66 in Pakistan and 16 in Afghanistan) compared to 33 WPV cases in 2018. Outbreaks of circulating vaccine-derived Type 2 poliovirus continue to be a major concern; such outbreaks occur when the live weakened virus in oral polio virus (OPV) genetically changes, circulates, and causes polio. Cases are rare and can occur in populations with under-immunized children.

“The eradication of polio will also require stopping transmission of all circulating vaccine-derived polioviruses (cVDPVs) and related outbreaks that are now spreading, since their occurrence is caused by the oral polio vaccine,” Dr. Andrus explained. “This can be done using the same lessons of the CGPP, strengthening essential immunization services through community engagement, and achieving high levels of coverage. Surveillance will continue to be critical for monitoring progress towards the eradication of all polioviruses.”

The GPEI is two decades past its original target date for eradication. Despite missed deadlines, the CGPP has implemented community strategies at a granular level that are sustainable and impactful. Many of the innovations and approaches that the CGPP helped to develop are now being replicated by governments and international agencies to tackle other public health priorities in underserved and marginalized communities around the world.

“The CORE Group Polio Project demonstrates the powerful synergism of international NGOs working at scale with national NGOs with adequate international donor funding and technical support to reach down to the household level to the most vulnerable and underserved communities with priority public health interventions,” Dr. Perry said. “The lessons learned have powerful applications for addressing other public health priorities, extending basic primary health care services to the billions of people not being reached at present, and achieving Universal Health Coverage.”

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