

Medicus Mundi International

Meeting: Seventy-first World Health Assembly (A71/1)

Agenda Item: 12.9 Eradication of poliomyelitis

Statement:

We acknowledge WHO's efforts in effecting long-term planning for polio eradication, particularly as polio continues to affect the poorest and most vulnerable populations in Africa and Asia.

We would, however, like to underline that the draft strategic action plan is insufficient to realize the goal of a polio-free world. Actions to ensure access to safe water and sanitation for all and engagement with communities in areas affected by conflict and extremism should be key strategies. Lack of attention to marginalized groups places the entire populations at risk. The value of a human rights-based approach to health has a proven relevance to ensuring that this final stage of global polio eradication is successful. Polio eradication cannot be achieved solely through a medico-technical strategy but must address socio-economic determinants of health all within a rights-based framework.

Unsatisfactory government-community relationships perpetuate polio transmission and vaccination alone cannot eradicate polio; instead, vaccination and strong health systems must be linked to community engagement and interventions on social determinants of health, particularly sanitation and access to safe drinking water. Polio eradication cannot be achieved solely through a medico-technical strategy but must address community factors, such as culture, marginalization and perceptions, as well as social determinants, within a rights-based framework.

Lasting polio eradication can only happen when governments invest in strong public health systems, public sanitation and respect for the rights of their poorest and marginalized communities. Years of medical and technical efforts have demonstrated that this gap, related to intervention at the community level, is the last remaining barrier to global polio eradication.