For the past four thousand years, the tiny poliovirus has killed and disabled millions of children. Today, we are on the threshold of eradicating poliomyelitis, a frightening disease that historically has been the world’s greatest cause of disability.

Rotary International (RI) initiated the effort to eradicate poliomyelitis in 1985, when it launched its PolioPlus campaign, the first and largest internationally coordinated private sector campaign in support of a public health initiative in the history of the world. By 1988, Rotarians had contributed $247 million to support the effort to eradicate only the second disease in history — the first being smallpox.

That accomplishment and early victories over the disease in Latin America served as the catalyst for the 166 member countries of the World Health Assembly to set the goal of eradicating polio worldwide, with total certification by 2005.

RI has been the leading private sector partner in the global effort to totally stop the transmission of the poliovirus. Rotary’s commitment of $500 million and leadership of ten million volunteers has helped to reduce the number of cases of polio from 350,000 in 1988 to 2,000 at the end of 2002.

During that time, the number of countries harboring the wild poliovirus has been reduced from 125 to 7. But as long as there are new cases of polio anywhere in the world, every country is at risk. The virus is only a plane ride away and is not asked for its visa.

Three major challenges confront RI and its collaborators.

**1. Continuing to achieve cease-fires.** In November of this past year, health workers carried out a National Immunization Day during a cease-fire in Afghanistan.

**2. Maintaining political will** to finish the job in the face of a rapidly disappearing disease.

**3. Ensuring funding** to buy oral polio vaccine and get it to the children.

The World Health Organization (WHO) and UNICEF estimates that $1 billion is needed in the four-year period (2002-2005) leading to an acute polio-free world. Governments and other private sector sources have pledged $725 million of that sum, leaving a $275 million funding gap. Each year of delay in reaching the last child can add more than $100-150 million to the total cost of the program.

The remaining endemic countries include some of the world’s poorest countries. They need financial help to buy oral polio vaccine, to deliver it house-to-house, and to establish the surveillance systems that pinpoint the remaining pockets of the disease.

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**Michael Abdalla, MD** (mwabdalla@earthlink.net), Orange Orthopedic Medical Group, Inc., is also a clinical professor at the University of California at Irvine, where he directs the prosthetic/amputee clinic. As a member of the Rotary Club of Orange since 1971, he has served as local president, district governor (D-5320), a training leader, and a Technical Advisor to the 3-H Programs of The Rotary Foundation. He is currently Polio Eradication Campaign National Coordinator for Zones 23 and 24 on the West Coast of the United States.
Filling the funding gap

Twenty months ago, RI set a challenging goal of raising $80 million from Rotarians in communities all over the world, during the period from July 1, 2002 to June 30, 2003. Rotarians surpassed the $80 million goal and have raised or committed $111 million. More than $12 million was raised in the US West Coast region alone. The money will be significantly multiplied through a partnership with the Bill & Melinda Gates Foundation and through World Bank loans.

Observing the results

Many Rotarians travel at their own expense to wave banners and walk in parades and to stand in market stalls and public buildings to mobilize parents to bring their children in for immunization. They visit garbage dumps and slums and hike to remote villages to put drops in children’s mouths, so not one child is left out.

“It was one of the great experiences of my life,” says Anil Garg, an Indian immigrant and a member of the Rotary Club of Simi Valley, California, who organized 36 people to go to India. “There were 2.6 million volunteers, 100,000 of them Rotarians, in 650,000 booths who immunized close to 140 million children in two days.”

WHO recently announced that there are now (2003) only six countries that are polio endemic and they believe that by the end of 2004 the world will have seen the last case of wild polio-virus infection.

The savings alone from not having to immunize children against polio in the future are potentially as high as US $1.5 billion per year — funds that could be used to address other public health priorities. Once polio is eradicated, the world can celebrate not only the eradication of the second disease in human history, but also the delivery of a global public good. Every person, regardless of race, sex, ethnicity, economic status, or religious belief, can benefit for all time from this accomplishment — no matter where they live.

PSA — Polio Survivors and Associates

Rotarian and polio survivor, PDG ’92-93 Ray Taylor, Pinehurst, North Carolina, has received approval from Rotary International for a Health/Medical Fellowship. Rotary Fellowships are operated independently of Rotary International, and each fellowship has its own rules and administrative structure.

The purpose of PSA — Polio Survivors and Associates is to create a support and communications network of Rotarians, spouses, and associates who are either survivors themselves or are active participants in polio-related worldwide programs. They seek to assist individual Rotarians, Rotary Clubs, and Rotary International in all phases of their polio programs, including Polio Eradication, PolioPlus, Polio Partners, World Community Service, etc., by establishing an information and support network for survivors and through increasing the awareness of polio and the continuing condition and needs of polio survivors.

Rotarians, Rotoractors, or spouses are invited to become members. Associate members may be anyone with an active interest in the subject who agrees to abide by RI policies. All members must register with the Fellowship on the Internet, at www.taranto.com/mailman/listinfo/psa.