MEETING REPORT

Report of Inter-ministerial advocacy meeting on polio eradication in Afghanistan

Date: 11 March 2026
Location: National Emergency Operations Center (NEOC), Kabul

1. Background and purpose of the meeting

An inter-ministerial advocacy meeting was convened at the National Emergency Operations Center on 11 March, 2026 in Kabul with the support from UNICEF to strengthen coordination among key government ministries and partners in support of the national polio eradication programme.

Despite significant progress in reducing transmission, Afghanistan remains one of the last countries where wild poliovirus continues to circulate. The meeting brought together senior government officials, technical partners, and representatives from relevant ministries to discuss the current epidemiological situation, operational challenges, and opportunities for stronger collaboration.

The primary objective of the meeting was to mobilize multi-sectoral support for the polio eradication programme and to identify practical measures that ministries and institutions can take to facilitate vaccination campaigns, strengthen community engagement, and address vaccine hesitancy.z

2. Participants

The meeting was attended by senior government officials and representatives from national institutions and international partners. Participants included Minister of Public Health, Dr. Noor Jalal Jalalee, NEOC Director Dr. Abdul Qadus Baryali, UNICEF Deputy Representative, Andrea James, WHO Representative, Edwin Ceniza Salvador, National EPI Director, Dr. Hakeem Himat, and representatives from:

- Ministry of Education
- Ministry of Higher Education
- Ministry of Information and Culture
- Ministry of Hajj and Religious Affairs
- Ministry of Propagation of Virtue and Prevention of Vice (Amr bil Marof)
- National Emergency Operations Center (NEOC) technical members
- Ministry of Public Health Public Relations Directorate

The meeting provided a platform for open discussion between ministries and technical partners to address operational challenges and strengthen collective action for polio eradication.

3. Opening remarks

The meeting was opened by the Minister of Public Health, Dr. Noor Jalal Jalalee, who welcomed participants and emphasized the importance of coordinated national action to prevent a disease that continues to threaten children in Afghanistan.

The Minister highlighted that Islamic teachings encourage both treatment and prevention of diseases, noting that the teachings of Prophet Muhammad (peace be upon him) emphasize the importance of preventive measures. He reiterated that the Ministry of Public Health places strong emphasis on prevention as a cornerstone of the national health system.

He noted that despite global scientific efforts, no cure exists for polio once a child is infected. Vaccination therefore remains the only effective method to protect children from lifelong paralysis.

The Minister emphasized that Afghanistan and Pakistan remain the only countries where wild poliovirus transmission continues. Eliminating the virus from Afghanistan would therefore represent a major milestone in global public health.

He acknowledged that although polio campaigns have been conducted for more than two decades, the virus persists mainly because some children continue to miss vaccination during campaigns. These missed children allow the virus to continue circulating.

The Minister highlighted encouraging progress in some regions, particularly the eastern region, where vaccination coverage has improved significantly. However, challenges remain in the southern and southeastern provinces, including Kandahar, Helmand, and Paktika.

He emphasized that polio eradication is not solely the responsibility of the health sector but requires collective support from all ministries and partners. He called on participants to support awareness efforts, engage community leaders and religious scholars, and ensure a supportive environment for vaccinators.

Minister of Public Health, Dr. Noor Jalal Jalalee, and NEOC Director, Dr. Abdul Qadus Baryali, during the inter-ministerial advocacy meeting on polio eradication at NEOC, Kabul.

4. Programme update and operational overview

A technical presentation was delivered outlining the history of polio eradication efforts, the current epidemiological situation, and plans for upcoming vaccination campaigns.

Participants were briefed on the progress achieved through national immunization campaigns and the operational strategies currently being implemented to reach children under five years of age.

The presentation highlighted that although most areas of the country are now accessible, operational challenges continue to affect vaccination coverage in some locations.

Key challenges identified included:

- Continued transmission in southern and southeastern regions
- Vaccine refusals and community misconceptions
- Limited engagement of religious leaders and community influencers in some areas
- Restrictions on vaccination activities in schools, madrassas, or other community spaces
- Limited inter-ministerial coordination at the provincial and district level

The programme also outlined plans to strengthen community engagement, improve coordination with ministries, and ensure high-quality vaccination campaigns capable of reaching every eligible child.

Programme update on polio eradication progress, operational challenges, and plans for upcoming vaccination campaigns.

5. Remarks from partners

UNICEF

UNICEF Deputy Representative, Andrea James thanked government authorities and partners for their efforts to accelerate progress toward polio eradication.

She emphasized that protecting children from preventable diseases is a shared national responsibility. Drawing on field visits conducted during the past year, she noted that in provinces where vaccination coverage is high, parents frequently report that they vaccinate their children based on advice from trusted sources such as midwives, doctors, community elders, and religious leaders.

This demonstrates the critical importance of community engagement and trusted messengers in promoting vaccination.

She stressed that while operational systems such as cold chain infrastructure and supervisory mechanisms are well established, strengthening community awareness remains essential to reaching every child.

She also highlighted that vaccine refusals remain a challenge and require coordinated efforts from ministries, community leaders, and religious authorities to address misconceptions.

She reaffirmed UNICEF's continued commitment to supporting the Government of Afghanistan in achieving polio eradication.

WHO

WHO Representative, Edwin Ceniza Salvador emphasized that polio eradication requires a collective national effort.

He noted that the polio programme extends beyond vaccination and contributes to strengthening multiple components of the health system, including surveillance, laboratories, logistics, and community engagement.

He reminded participants that only two countries in the world still report wild poliovirus transmission. Successfully eliminating the virus in Afghanistan would represent a historic achievement for the country and for global health.

He stressed that as long as the virus remains in circulation, every child remains at risk. Therefore, sustained cooperation from all ministries is essential.

He proposed that similar coordination meetings be held regularly to ensure continued dialogue and joint problem solving.

WHO Representative Edwin Ceniza Salvador and UNICEF Deputy Representative Andrea James during the inter-ministerial advocacy meeting.

6. Key discussion points from ministries

Points raised by the representative from the Ministry of PVPV:

- **Governance and public perception**
  It was noted that for nearly five decades the country has faced prolonged instability and a lack of sustained independent governance, which has affected public trust in institutions. Participants emphasized that, according to Islamic belief, Allah has created both diseases and their cures, and therefore medical treatment and prevention are consistent with faith.
- **Leadership demonstration to build public confidence**
  It was suggested that the Ministry of Public Health could request senior leadership, including the Prime Minister, to publicly vaccinate their own children on camera. Such a visible demonstration could significantly strengthen public confidence in vaccines and help address vaccine hesitancy.
- **Community perceptions in remote areas**
  In remote and hard to reach areas, some communities still hold negative perceptions or misconceptions about vaccines. Addressing these beliefs requires sustained

community engagement, dialogue with local leaders, and continuous awareness raising efforts.

- **Religious guidance from Ulama Shura**
  The Ulama Shura could play an important role by issuing a formal fatwa supporting vaccination, which may help address religious concerns and strengthen community acceptance.
- **Approach of international partners**
  It was emphasized that engagement with national stakeholders should be conducted respectfully and constructively. Statements suggesting restrictions such as denial of visas or limitations related to Hajj and Umrah should be avoided, as these may create unnecessary sensitivities and reduce cooperation. If the vaccine is Haram, we are ready to not to go to Haj, but we will give polio vaccine to the children.
- **Need for religious and leadership endorsement**
  Approval or endorsement from the Ulama Shura through an Isteftah (formally seeking a religious opinion) process, as well as guidance from the Supreme Leader, was highlighted as essential for strengthening legitimacy and acceptance of the vaccination programme.
- **Public endorsement by senior officials**
  It was suggested that if senior officials, such as the Minister of Public Health or the Prime Minister, publicly vaccinate their own children, it could significantly improve public trust and help address vaccine hesitancy.
- **Support from Muhtasebeen and policy alignment**
  The Muhtasebeen (Religious compliance inspectors of PVPV) expressed readiness to provide full support to the Ministry of Public Health and the NEOC as requested. At the same time, it was emphasized that programme implementation should remain aligned with the policies of Amr bil Maroof (PVPV).
- **Gender considerations in programme implementation**
  Where feasible, consideration may be given to engaging only male staff in certain contexts and locations.
- **Transparent selection of frontline workers:**

  The selection of frontline workers should be conducted through a transparent process. It was emphasized that selected individuals should demonstrate appropriate conduct and modesty, given that vaccination teams interact directly with households and communities.
- **Travel considerations for female staff**
  It was noted that female staff may face travel limitations, particularly when traveling distances exceeding 75 kilometres without a Mahram.
- **Commitment of support**

A commitment was expressed to continue providing full support to the Ministry of Public Health, NEOC, and the polio eradication programme when our mentioned concerns are resolved.

- **Representation of community perspectives:**

  It was noted that participants attend the meeting as representatives of their respective ministries while also reflecting the perspectives of the communities they serve. The concerns, issues, and views shared during the discussion were intended to bring all relevant matters to the table so that appropriate and practical solutions can be identified.

- **Commitment to public service:**

  Participants emphasized that, in line with the guidance of the Supreme Leader, who has stated that he serves the people of Afghanistan, government representatives also see themselves as servants of the people and remain committed to providing full support to address public needs.

Ministry representatives share key perspectives and discuss community concerns, religious considerations, and coordination needed to strengthen polio vaccination efforts.

- **Acknowledging and addressing concerns:**

  It was further acknowledged that certain concerns may exist regarding programme

implementation, and that these concerns should be constructively addressed through dialogue and coordinated efforts.

Point raised by the representative from the Ministry of Haj and Religious Affairs:

- Share the letter of supreme leader with the ministry of Haj and Religious Affairs regarding the vaccination in M2M (Mosque to Mosque), then they will extend their cooperation in supporting the implementation of the vaccination programme.

Points raised by the representative from the Ministry of Higher Education:

- **Confidence building through vaccine production transparency:**

  It was suggested that, in addition to awareness raising efforts to address our and the public doubts about vaccines, religious scholars and government representatives could be facilitated to visit vaccine production facilities and observe the manufacturing process directly. Such visits could help strengthen confidence and enable them to provide informed guidance to communities.

- **Concerns about vaccine quality assurance:**

  Concerns were raised regarding the quality assurance of vaccines used in the country, including whether the vaccines supplied meet the required international standards.

- **Limited national capacity for vaccine quality testing:**

  It was noted that Afghanistan currently does not have a national laboratory capable of independently testing and verifying the quality of vaccines, so we should be assured of vaccine safety:

- **Addressing the vaccine related health effects:**

  Participants emphasized the need to address circulating misinformation, including claims that vaccines may cause diseases such as polio or conditions such as oral cancer.

- **Influence of anti-vaccine literature:**

  Reference was made to certain publications and books that contain narratives opposing polio vaccination, which continue to influence public perceptions in some communities.

- **Programme equipment and data sharing:**

  Concerns were also mentioned related to equipment used in the programme, such as refrigerators equipped with alarm systems. Some individuals speculate that such equipment may be used for monitoring purposes because programme related data is reportedly shared with international partners based outside the country. He specifically mentioned that his friend told me that he got the information from EMRO that your refrigerator has an alarm. And as EMRO is responsible for Polio programme and there is speculations about that they are spying because all data are with EMRO and their office is in Egypt and they are near or controlled by the government of Isreal.

- **Availability of other vaccines:**

  It was further noted that Afghanistan requires other important vaccines for other diseases, such as rotavirus and meningitis. Participant expressed concern that while these vaccines may face shortages, but the polio vaccine is widely available in larger quantities, which sometimes raises questions among community members.

- **Engagement of universities for community awareness:**

  It was noted that the Ministry of Higher Education oversees more than 250 universities, with approximately 7,000 academic staff and hundreds of thousands of students across the country. Participants highlighted that if key questions and concerns about vaccines are clearly addressed, universities can play a significant role in supporting community awareness and promoting accurate information.

- **Questions raised regarding polio vaccine assurance and its ingredients:**

  During the discussion, several questions were reiterated, including the availability of qualified laboratories in the country to verify vaccine quality, the reasons for programme related data being shared with EMRO, the ingredients of the vaccine production, and stated that they heard and read that includes pig's meat and monkey's meat in polio vaccine

Points raised by the representative from the Ministry of Information and Culture:

- **Influence of anti-vaccination publications:**

  It was noted that some individuals share books and materials that oppose polio vaccination. In this context, participants emphasized the importance of strengthening public awareness and social and behaviour change efforts to address this information and improve community understanding about vaccines.

- **Advocacy through religious and community leadership:**

  It was suggested that advocacy meetings should be conducted in areas where challenges exist, with the participation of religious scholars (Ulama) and community leaders, in order to facilitate dialogue, address concerns, and strengthen community support for vaccination.

Points raised by the representative from the Ministry of Education:

- **Coordination through official communication:**

  It was noted that whenever the Ministry of Education receives an official letter from the Ministry of Public Health, it is shared with provincial education departments with instructions to cooperate with the Ministry of Public Health in supporting programme activities.

- **School age coverage considerations:**

  Participants highlighted that polio vaccination targets children aged 0 to 5 years, while schools generally enroll children aged six or seven and above. As a result, schools are not typically used as vaccination campaign sites. However, the Ministry reaffirmed its willingness to continue supporting the programme where possible.

- **Memorandum of understanding with the polio programme:**

  It was mentioned that the Ministry of Education previously signed annual Memorandums of Understanding with the polio programme. However, no such MoU has been signed during the past six to seven years.

- **Ongoing agreement with the Ministry of Public Health:**

  It was further noted that discussions are currently underway between the Ministry of Education and the Ministry of Public Health to finalize a formal agreement. Once finalized, the agreement is expected to help address several coordination and operational issues.

- **Advance notification for programme support:**

  The Ministry requested that any support required from the education sector be communicated through an official letter at least one month before the campaign. Upon receiving the request, the Ministry will disseminate the communication to all provincial and district education authorities and instruct them to support the polio programme.

- **Previous communication as reference:**

  As an example of prior collaboration, a letter issued in the previous year directing provincial authorities to support vaccination campaigns was shared during the discussion.

7. Responses to questions from ministry representatives during the open discussion:

- The Supreme Leader has provided verbal approval to the Minister of Public Health to conduct vaccination campaigns in health facilities and designated sites.
- Female health workers operate within their own local areas. They reside within their assigned clusters or team areas and are responsible solely for administering vaccines.
- Female staff participating in the polio programme are not permitted to travel more than 75 kilometres and are not deployed to other provinces.
- All female staff involved in the programme observe Islamic hijab in accordance with national and cultural requirements.
- Female vaccinators are currently active in the Eastern, Northern, Central, North-Eastern, and Western regions. There are no female vaccinators in the Southern and South-Eastern regions, except in Ghazni province.
- Vaccines used in the programme are supplied from India, rather than from the regional office.
- All vaccines used in Afghanistan’s immunization programme are verified and quality-assured by the World Health Organization.
- Over the past three months, discussions have been ongoing with the Ministry of Public Health Afghanistan to facilitate a visit for 12 religious scholars and government officials to a vaccine production facility in India.

- Alerts from vaccine freezers are first received by the National EPI (Afghanistan). The technical team normally responds immediately to protect vaccine quality. If there is no response, the notification is then escalated to UNICEF.
- Supported vaccine freezers are installed in approximately 2,700 clinics across the country and are managed by Afghan technical staff from the National EPI.
- The World Health Organization remains available to respond to any questions related to vaccines, including the ingredients and safety.
- As observed during the global COVID-19 pandemic, countries act to protect their populations. Similarly, as mentioned by the NEOC Director regarding the detection of a positive polio virus sample in Germany, countries take preventive measures to safeguard public health.
- International partners remain committed to supporting Afghanistan in achieving polio eradication.
- A common question raised is why polio receives particular attention compared with other diseases. The reason is that polio is a disease that can be fully eradicated, making global elimination achievable.
- Historical data shows that prior to the global eradication effort, approximately 400,000 children were affected by polio each year worldwide. Without vaccination and campaigns over the past 70 years, an estimated 28 million people could have been affected by polio.
- Many countries have invested substantial financial resources to eliminate polio. Partners such as UNICEF and World Health Organization and continue to support Afghanistan in these efforts.

Programme officials respond to questions from ministry representatives, providing clarification on vaccination policies, vaccine safety, programme operations, and international support for polio eradication.

8. Conclusion

The meeting concluded with a shared recognition that polio eradication requires more such meetings and sustained collaboration among government institutions, communities, and international partners.

Participants agreed that strengthening community engagement, improving inter-ministerial coordination, and addressing vaccine hesitancy are critical to reaching every child with vaccination.