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In 1980, Polio had 4.5 million cases globally. By 2009, that number had fallen to just below 1,500, concentrated in just four countries: Nigeria, Pakistan, Afghanistan, and India. India, in particular, had hit a wall in eradicating the disease. Nearly half of the world's cases at the time (741) were in India, particularly in the Northern and Eastern regions of the country. In just 2 years, India completed a feat which beforehand had seemed impossible. Given the resistance to vaccination from some sectors in society, poor sanitation, and dense population (particularly in areas where Polio was endemic) many thought polio would survive much longer than it did. But through a holistic approach, developing national infrastructure development plans and concentrated community development initiatives, India's government attempted to eradicate the obstinate illness.

India targeted development efforts in vulnerable areas to eradicate the disease, rather than sending out vaccinators to strictly administer the polio inoculation. For the eight years prior, UNICEF had asked localities to submit micro-plans for tackling the disease.
Though these plans helped in overcoming some barriers and determining specific needs for specific communities, their utilization did not lead to unequivocal success. There were many remaining complications to eradication, including the fact that diarrhea lowered its efficacy. In areas where poor sanitation frequently led to diarrhea and polio was prevalent, many folks did not believe the vaccine was effective.

**A Holistic Approach**

The government of India, the World Health Organization, and Rotary International initiated a multi-faceted plan to tackle the many barriers to eradication. In areas most-affected by polio, immunization mobilizers began to implement Water, Sanitation, and Hygiene (WASH) programs: teaching best practices for hygiene, like hand washing with soap. Immunizers also encouraged women to exclusively breastfeed children for six months as a means of preventing gastroenteritis in the short term and building a stronger immune system in the longer term.

In order to manage issues associated with diarrhea’s prevalence, mobilizers were given Oral Rehydration Salts and Zinc to treat the ailment, both strengthening the efficacy of the vaccine and building trust within communities with a show of tangible improvements in health. At a national level, India’s government implemented mass WASH infrastructure improvements in areas with polio. This included water treatment facilities in larger population areas as well as bore holes rural, sparsely populated areas. The government also initiated a campaign to convince Muslim clerics to encourage vaccination. This holistic approach to eradicating the disease reduced the number of cases from 741 in 2009 to the final case being report Jan 17 of 2011.

**Future Eradication Programs**

The government of India and its global partners’ impressive efforts to eradicate polio have shown that narrow approaches to addressing public health needs are not sufficient. Instead, multi-level initiatives, focusing on particularly vulnerable areas while simultaneously pursuing national-level infrastructure campaigns, are the most effective. If the world expects to eradicate Malaria, for example, it will require more than bed nets and case management. As in India’s anti-polio efforts, future disease eradication will have to entail a combination of general community development and infrastructure improvements.

Another key lesson is to address the Sisyphean problem facing many disease eradication programs: with success, funding reductions follow. Successful elimination of 80% of cases does not mean that funding should be reduced. Even after polio was eliminated in 2011, India vaccinated 172 million children in 2015. This sustained effort is important in order to prevent potential importation of the disease from Pakistan. Just because a locality or nation has eliminated a disease, funding for sensitive disease surveillance and rapid responses to potential outbreaks remains vital to remaining free of it, even after elimination is reached. India’s successful polio-elimination efforts illuminate possible ways of addressing the next epidemic.