

Ethnic strife halts polio war: Nigerian state's vaccination ban is global issue

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Several hundred men, women and children have been massacred since Tuesday in Nigeria's second-largest city, Kano, and thousands more have fled their homes, running from riots that persist despite curfews and police shoot-to-kill orders.

The dead are Christians, killed by their Muslim neighbors in retaliation for a Christian massacre of several hundred Muslims two weeks ago. The eye-for-an-eye murders are the latest eruption of violence that has flared in Nigeria since 1999, killing 10,000 people.

The most recent bloodshed, though, has significance far beyond the country's borders. It entangles the future of the international campaign to eradicate polio, a 15-year, \$3 billion effort that could stand or fall on the behavior of Nigeria's Kano state..

On Monday, delegates to the World Health Assembly --- the annual meeting in Geneva of the governing body of the World Health Organization --- will consider how to extract the campaign from the intertwined conflicts of religion, ethnic difference and bitter party politics in Kano.

If the eradication effort fails, Kano could become one of the last places on earth where polio persists --- an enduring threat not only to the children of the province, but also to children around the world.

"Local problems require local solutions," said Dr. David Heymann, chief of WHO's global polio eradication program. "It is very difficult to affect this from far away."

Polio, which once killed or crippled 350,000 children each year worldwide, now circulates freely in only six countries: Nigeria, Niger, India, Pakistan, Afghanistan and Egypt. Last year, Nigeria held more than half the world's 748 known cases. As of last Tuesday, it had 119 of the 169 cases diagnosed this year, and was responsible for 17 cases elsewhere in Africa.

The epicenter of polio in Nigeria, and effectively in the world, is Kano state, near the northern border with Niger. The state and its capital city, which have the same name, are also the center of Islamic resurgence, concentrated in the north, which has complicated the touchy relationships between Nigeria's dominant ethnic groups: the Hausa and Fulani in the north and the Yoruba and Ibo in the south.

The 1999 election of President Olusegun Obasanjo, a Yoruba Christian from the south, took political power from the north for the first time in decades. As a partial concession a year later, Kano and 11 other provinces were allowed to implement Islamic sharia law. Islamic law has no prohibitions against vaccination, but the controversial shift to sharia soon touched the polio campaign.

Since 1988, the international eradication effort --- run by WHO, funded by the Centers for Disease Control and Prevention and UNICEF, and staffed by thousands of volunteers from Rotary International --- has distributed polio vaccine throughout the developing world. On "immunization days," volunteers attempt to line up every child in a country at

predetermined locations, dripping into each mouth two drops of oral polio vaccine. Immunization days always are followed by two to three days of house-to-house searching for children who did not line up.

Because the climate and the multiplicity of other diseases that affect poor children can undermine the vaccine's effectiveness, a child must be vaccinated against polio many times to become immune. And because vaccine events are massive organizational efforts, they cannot be held without local political cooperation. Last August, the governments of Kano, Zamfara and Niger states withdrew their approval. The Nigerian Supreme Council for Sharia Law, the governors said, had ruled the vaccine was deliberately contaminated with drugs to make Islamic children infertile, and with the HIV virus to kill them.

Kano's stern position

There is no evidence the vaccine is contaminated. The eradication campaign and the Nigerian Ministry of Health have labored to prove it is not, allowing the vaccine to be tested by labs in South Africa, India and Indonesia.

"All the results have been that the polio vaccine is harmless," said Jonathan Majiyagbe, the president of Rotary International, who lived much of his life in Kano.

Nigeria's government has offered to buy fresh vaccine from Indonesia, a majority-Islamic nation.

In response, Zamfara and Niger states allowed vaccination to resume in April. Kano has not budged. But the polio virus has moved: Since autumn, cases have reappeared in nine additional African countries that stopped vaccinating after being declared polio-free up to 10 years ago. The new infections have been traced to Nigeria.

The most recently infected, Botswana --- which lies 3,000 miles south of Nigeria and was polio-free for 13 years --- last Monday launched an emergency campaign that will vaccinate 200,000 children twice, at a cost of \$1.2 million.

Since the disease re-emerged in Botswana, international political pressure on Nigeria, and especially on Kano state, is increasing.

"Importations such as this will continue to happen until polio is eradicated everywhere," Majiyagbe said. "Even the Organization of the Islamic Conference [an alliance of 57 Islamic countries] has come out to say that immunization must continue and has provided funds."

But observers of Nigerian politics suggest that attempts to persuade Kano to vaccinate are headed for failure, because the vaccine is not the point, but is instead a proxy for deeper political disputes.

"Throughout post-colonial history, elites from the north dominated the politics of Nigeria," said Jean-Germain Gros, an associate professor at the University of Missouri at St. Louis. "Now there is a perception that the northerners have lost power. Since the Obasanjo government came out in favor of the polio campaign, the northern elites feel they have to come out against it."

The polio program has suffered from its association with America and thus the war with Iraq. "People ask, 'If the United States is so concerned about children, then why did they kill so many children bombing Iraq?' " said Sakah Saidu Mahmud, a specialist on Nigerian

Islamic activism and a Rockefeller Visiting Fellow at Notre Dame University's Kroc Institute for International Peace Studies. "The governor of Kano is capitalizing on this, being seen as a defender of the lives of Muslim children."

A reason for suspicion

The CDC, which has provided more than \$600 million of the \$3 billion eradication effort, deplors the fact Kano's leaders have rejected the campaign. But the agency's scientists understand how Kano's poorly educated citizens might misconstrue the effort.

"In parts of the developing world the health infrastructure is not good, and the people we need to reach belong to groups that have been neglected," said Dr. Hamid Jafari, who last month was named chief of the CDC's global immunization division. "And then there is this one program that does not ignore them, but comes to their door. It is natural for them to be suspicious."

Kano's persistent refusal to vaccinate has jeopardized the internationally agreed-upon calendar for eradication, long fixed on 2005 as the year in which no new cases of polio would be recorded.

Afghanistan and Egypt, with only a few remaining cases, are likely to make that goal. So are India and Pakistan: Together they have had only 19 cases so far this year, though the hot season, when polio is transmitted most easily, is just beginning.

Nigeria, though, must vaccinate through the autumn and into next spring if it is to cover the "immunity gap" caused by Kano's stoppage. That would add another year to the calendar and several million dollars more to the global bill --- assuming that Kano's political leadership finds a face-saving way to back down from its recalcitrance. If Kano does not retreat, it risks becoming the refuge of a deadly virus that could emerge to reinfect the world.

"We would have to . . . contain the virus in Kano," said Dr. Stephen Cochi, director of the CDC's immunization programs. "Kano would hold the last isolated vestige of polio in the world."