

Two Drops, One Life

By Suzi Wirtz, CAE

It has been called the world's most terrifying crippling disease. At the height of its power, it killed or paralyzed 600,000 people per year, mostly children. It has staked claim from Afghanistan to Zimbabwe, with more than 125 countries affected in 1988 when the World Health Assembly resolved to eradicate polio. Its name is poliomyelitis, more commonly referred to as polio, and the world would gladly be rid of it forever.

One association, Rotary International (RI) based in Evanston, Ill., through its Foundation and a massive global initiative called PolioPlus, aims to do just that: to immunize all the world's children against polio, saving lives and changing the future. Perhaps no one knows what a relief that would be more than Ann Lee Hussey, polio survivor and president of the South Berwick, Maine Rotary Club. Ann (pictured on page 16) contracted polio in the summer of 1955 when she was just 17 months old — ironically, the same year Dr. Jonas Salk developed the first injectable polio vaccine.

"It was one of the largest outbreaks in Maine," she recalls. "I was the youngest of five children and had just started to walk. I faltered and tumbled, however, at the time when my siblings had been learning to run. I came down with a fever, and my mom knew immediately that the cause was polio. I was paralyzed from the waist down for a few months, although I don't remember much except what they tell me. I went through rehab; I underwent surgery; I wore braces. The fact that I don't remember much, I think, is a good thing."

The best thing, however, would be to prohibit the deadly disease from affecting another child. Today, polio is extinct in the Americas, Europe and the Western Pacific; thanks in large part to Rotary, the world in 2005 is 99% polio-free. Not good enough, however. Rotary believes that the final one percent counts as much as the first 99.

Don't Just Stand There (Even if You Can)

The key to total global eradication of polio was the development of an effective oral polio vaccine (OPV) versus an injectable one, as it does not need to be administered by trained health workers; it requires no sterile needles or syringes; and one dose costs 10 cents or less. In 1960, after extensive worldwide preliminary trials over the previous five years, Dr. Albert Sabin (on the heels of Dr. Jonas Salk's injectable vaccine) introduced an OPV that was first used in approximately 100 million children in Europe. Nearly 100 million people of all ages received the vaccine in the United States between 1962 and 1964. Still, something was missing. An army of volunteers dedicated to the cause. A humanitarian group able to administer the vaccine. A bunch of folks called Rotarians who were willing to walk the walk and change the world.

In 1985, Rotary launched PolioPlus, the most ambitious program in its history. Dr. Sabin served as a special consultant for this unparalleled initiative and also addressed Rotary's annual convention that same year. There he shared some staggering statistics. Despite Rotary's initial noble efforts of purchasing and delivering polio vaccine, there would be 400,000 cases of polio each year. By the year 2005, Sabin said, an

Indelible dye marks the fingers of children who have received the polio vaccine.

additional eight million of the world's children could be permanently paralyzed. Sabin, along with Rotary leaders, challenged members to raise a nearly unbelievable amount of money and, even more astounding, to use their vast volunteer network to deliver the vaccine and put those two drops into children's mouths with their own two hands.

"In 1985, our mission was to protect the world's children from polio," states Carol Pandak, manager of the PolioPlus Division at Rotary International. "Three years later, we changed the wording to 'eradicate' instead of just protect. No one was convinced we could actually eradicate the disease entirely, until we started raising money."

According to Herbert A. Pigman, vice chair of RI's International PolioPlus Committee, chair of Rotary's Polio Eradication Advocacy Task Force for four years and general secretary from 1979 to 1986 and from 1993 until his 1995 retirement, "Rotary faced the twin challenges of conducting a fundraising effort unprecedented in scope and a massive educational program to build the support of its members."

The decision to start such a daunting and large-scale initiative came after extensive research and much organizational soul-searching. PolioPlus was possible because of strong, directed leadership; dedicated staff support; and unwavering member commitment and involvement.

Ed Futa has served as general secretary of Rotary International and chief operating officer of Rotary's Foundation for six years. He believes, "The strength of Rotary is member clubs. We're an association of 33,000 autonomous clubs in 168 countries. Those numbers made everything else happen. We have six PolioPlus staff members who have helped the association to maintain focus. Our board's role is critical; they, too, have sustained the focus and maintained the discipline to succeed. Rotary's board and the Foundation's trustees are our champions and our cheerleaders. We're all in this together."

Getting to that point wasn't easy.

WHAT IS POLIO?

Polio is an acute infectious disease caused by one of the three types of poliovirus. Poliovirus enters the body through the mouth. After incubation in the throat and intestines, the virus can enter the bloodstream and, unless blocked by antibodies such as those provided by the polio vaccine, the virus can invade the central nervous system. There, it damages or destroys those motor neurons in the spinal cord or brain stem whose function is to transmit signals to the muscles of the body. The result of sudden damage is sudden onset of paralysis.

Come Together, Right Now

Bill Sergeant joined the Rotary Club of Oak Ridge, Tenn. in 1947 and has served as chair of the International PolioPlus Committee since 1994. He previously was Rotary International vice president, a RI director and a Rotary Foundation trustee. At the age of 85, Bill is a full-time volunteer totally devoted to the mission of PolioPlus.

"Rotary's president in 1978, Clem Renouf, convinced me and everyone else that we could do something big if we joined forces,"

Sergeant recalls. "If all the clubs worked together, we could change the world. At that time, working together was heresy at Rotary, though! Clubs wanted to be independent. They were frightened of the idea of working together and being told what to do."

This notion of working independently had been mandated for Rotary since 1923, with Resolution 23-24, which stated that each Rotary club had absolute autonomy in the selection of its activities and that Rotary International "should never prescribe nor proscribe any objective activity for any club." A classic case of an association holding fast to a sacred cow, Resolution 23-24 at last was challenged in the 1960s with Rotary's World Community Service program. The success of this endeavor led to the 1979 Health, Hunger and Humanity (3-H) program, spearheaded by Renouf and approved in a 1978 board of directors meeting. Further, the board decided, in honor of Rotary's 75th anniversary in 1980, a special fund would be created specifically for 3-H. Funding and administration of the 3-H program would funnel through The Rotary Foundation. Donations reached \$7.2 million.

Clearly, working together really worked. Encouraged by that astounding dollar amount, the 3-H Committee recommended, in 1979, the Philippines project whereby Rotary purchased and delivered OPV to six million children in that country. By 1982, Philippine polio cases had decreased by 68 percent.

Spurred by the success of 3-H, in 1982, a committee was appointed to solicit suggestions for ideas and innovations to accomplish Rotary's objective of service to humanity. Dubbed The New Horizons Committee, the group received a tremendous number of submissions, one of which was to eradicate polio by the year 2005. The committee formally sent a recommendation to the board with a specific target date, not coincidentally Rotary's 100th anniversary. The recommendation was adopted, the Polio 2005 Committee was formed and all that was left to do was raise a mere \$120 million to buy enough vaccine for a five-year period.

RI general secretary at the time, Pigman, was charged with the task of presenting the monetary goals and strategic plan to the committee. In 1984, he did. Endorsed by the committee and adopted by the board and Foundation trustees, PolioPlus became a reality. Pigman says, "It was a proud moment for Rotary. It was also audacious. We didn't have a dime in the bank to back up the \$120 million pledge."

From Cookbooks to Concerts

John Osterlund, current general manager of The Rotary Foundation, says, "When I first joined the staff in 1991, I was enamored with Rotary and its humanitarian mission. I quickly realized, though, how far behind we were, specifically in the world of technology. We immediately worked to get up to speed — particularly to accept credit cards for donations! Rotary's strength has always been in planning. As staff, we identify goals and adopt plans of action. Specific to PolioPlus, we demonstrated results early on and gained confidence from an encouraging and trusting board.

"For the 1986 campaign, we enlisted an outside fundraising consultant, whose recommendation was that we'd provide every Rotary District an individual, target goal for the \$120 million campaign, based upon 1) density of membership in the district, and 2) historical pattern of giving to the Rotary Foundation. Giving goals was a huge benefit. In most cases, they far surpassed the goal; they felt challenged," Osterlund continues. The Foundation has since adopted that model for all ongoing fundraising efforts.



The first year was spent educating members about polio. The board then appointed a seven-person International PolioPlus Campaign Committee to coordinate the campaign and a massive campaign structure consisting of an executive director and staff; 11 international and 84 national coordinators; 44 PolioPlus committees; and 3,300 area coordinators.

By September 1987, Rotary reached \$50 million. Four months later, that number doubled. Money was coming from individuals as well as large gifts. Raffles, wine-tasting parties, car rallies, cookbooks and concerts brought in the dollars, as did entertainers, sports figures and governments. On February 3, 1988, Rotary recognized donations at \$120 million. The final results would not be announced, though, until the end of Rotary's fiscal year. In the interim, the World Health Assembly adopted a resolution to eradicate polio, and its director-general praised Rotary highly as proponents of the cause.

Perhaps the word was spreading to other groups. Maybe people just wanted to donate more money to this cause because polio resonated with the demographic, meaning that a majority of Rotarians at that time had personal stories about polio: quarantined swimming pools, affected siblings or high school friends and so on. Whatever the reason, the 1986 campaign totaled \$247 million, more than doubling Rotary's goal.

Bill Sergeant says, "Yes, the money came in, but we were far from done. We had not eradicated polio; we could not move onto something else."

Rotary Gains Mileage

More money was flowing in than Rotary could have imagined. Rotary's board and the Foundation trustee leaders were in full support, staff was committed and the clubs were working together. Because of Rotary, other groups were taking notice and getting involved. In 1988, the World Health Assembly, the annual meeting of the ministers of health of all Member States of the World Health Organization, voted to launch a global goal to eradicate polio, called the Global Polio Eradication Initiative with four major partners. (See sidebar on page 16.)

ROTARY INTERNATIONAL MISSION

The mission of Rotary International is to support its member clubs in fulfilling the Object of Rotary by:

- Fostering unity among member clubs;
- Strengthening and expanding Rotary around the world;
- Communicating worldwide the work of Rotary; and
- Providing a system of international administration.

ROTARY FOUNDATION MISSION

The mission of The Rotary Foundation is to support the efforts of Rotary International in the fulfillment of the Object of Rotary, Rotary's mission, and the achievement of world understanding and peace through local, national, and international humanitarian, educational, and cultural programs.

With all this manpower and money, what more was needed to wipe out polio completely?

Again, Sergeant says it best, "The only way we could eradicate polio was through National Immunization Days. We do as much as we can in one day in a single country. In India alone, 150 million children under the age of five needed to be immunized. Mothers in those countries can't jump in the car; they can't take a bus. We had to reach them. This was possible because we have willing and able Rotarians in every corner of the world."

National Immunization Days (NIDs) aim to immunize every child in the highest risk age group (normally under the age of five) quickly and effectively by flooding a country with OPV. In countries where polio is endemic, this usually involves organizing two rounds of National Immunization Days a year — one month apart — for a period of at least three years. The goal is to catch children who are non-immunized, or only partially protected, and boost the immunity of children already immunized. In this way, every child in the most susceptible age group is protected against polio at the same time.

Rotary reports that planning for NIDs begins three to four months before the event. Immunization booths are set up in places like airports, bus stations and amusement parks. Rotarians and other volunteers are mobilized to administer the vaccine and follow up with house visits.

Says Sergeant, "People in those countries don't just know to show up, though. We can't make announcements on TV like in the US and reach millions of people." In places like India (where NIDs average five to six per year), tactics such as drum beating, street plays and public announcements broadcast from rickshaws are employed to alert the country that 6,000 children every second are about to be immunized.

Ann Lee Hussey has been on five NIDs in both India and Africa so far. She relates, "Nothing could prepare me for the sights I was to see in the streets of old Delhi during my first journey to India ... the polio victims crawling in the streets, the man who wore sandals on his hands and feet as he walked on all four limbs, the little beggar girl with calluses so thick on

the palms of her hands and her knees from dragging herself along the ground. That is what brought it all home to me." For such efforts, among a host of other volunteering activities, Hussey was honored with Rotary International's highest honor, "The Service Above Self" Award.

Sergeant, throughout his years of service to Rotary, has also attended numerous NIDs. In 1996, he was in Pakistan. "All these little people are lined up to be immunized. One girl about nine years old was carrying her little brother to get his vaccine; that was her job that day. I always thought the greatest symbol of trust is a little child putting his or her hand in the hand of an adult. I now think differently. The greatest symbol of trust is a child opening his or her mouth, allowing us to administer two drops and knowing that vaccine will save their lives."

Ed Futa's experience was similar, "I was in Ethiopia two years ago. It is a life-changing experience. It all comes down to two drops. Those drops put all of our efforts into the proper human perspective."

In 2002, 500 million children were vaccinated in 93 countries, using about two billion doses of vaccine. The number of polio cases in 1985 was 350,000; that was slashed to 1,000 in 2002 in large part thanks to the far-extending and exponential effect of NIDs.

However, as Futa says, "If you haven't crossed the finish line, you haven't finished the race." In order for the world to be polio-free, no polio cases can occur for at least three years. Polio remains Rotary's top priority because the race is not over.

Keep Running, Stay Focused

In 1994, while the war on polio was still being waged, it was lagging. Time had taken its toll on some enthusiasm and people began to wonder what was next on the agenda. It was time to empower committees even further. Rotary created the International PolioPlus Committee (IPPC) to take it up a notch and, once again, Bill Sergeant was called to action. He was asked to chair the committee because of his knowledge and consistent dedication to the program.



Says Sergeant, "In Rotary, most committees don't meet at all, or just once per year. The IPPC meets three times a year. We have carte blanche; we come up with things that get Rotarians excited. We're the planners and strategic thinkers. We discuss specific amounts of money, who the funds would go to, and so on. What we bring to the table is planning, and Rotary has the people, the 'doers' to back the plans up."

According to Carol Pandak, "The IPPC receives proposals from groups like UNICEF and WHO. In their two-plus day meetings, they evaluate the proposals and decide exactly where the money will go. From there, they recommend to the Foundation's board of trustees to approve the proposal."

Dr. Bruce Aylward, Global Coordinator of the Polio Eradication Initiative, the World Health Organization (WHO), sits in on many of the IPPC meetings as one of the spearheading partners. He says, "Even though Rotary is one of four partners, it is regarded by the others as primus inter parus due to its central role in launching, leading and sustaining the initiative through the tremendous generosity of its volunteers worldwide. I continue to marvel at the dedication of individual Rotarians in the effort to eradicate polio. That said, the risks to using the same people are fatigue and complacency. Everyone recognizes these risks, which underscore the need to finish the job as quickly as possible. Given the high stakes and the enormous rewards of a successful polio eradication effort, everyone is extremely committed to finishing this job."

Bob Keegan, deputy director of the global immunization division at the CDC, says, "I've worked for 15 years on this project. I've been the informal liaison with Rotary and especially the PolioPlus program. We participate in the same meetings, talk on the phone, discuss how we'll move ahead strategically and — recently — we've turned to advocacy. The IPPC is a marvel; they are focused and deliberate."

"One day, Bob Keegan called me, and he was quite upset," relates Sergeant. "An immunization had been organized in southern Sudan. Everything was in place, the amount of vaccine, volunteers, everything was ready to go. However, the roads are

PARTNERS IN THE GLOBAL POLIO ERADICATION INITIATIVE

World Health Organization
www.who.int/en

US Centers for Disease Control and Prevention
www.cdc.gov

United Nations Children's Fund (UNICEF)
www.unicef.org

terrible. Bob did not know how they'd get the vaccine to the kids. He said the only way to deliver the vaccine was to charter planes, but the CDC didn't have the funds. I asked how much money was needed. \$400,000, Bob said."

Because the IPPC previously had established a "rapid response" plan, especially with this type of occasion in mind, the chairman of the board of trustees could approve an expenditure up to \$500,000.

Sergeant continues, "I called our trustee chair immediately. He said yes. I called Bob back and said, 'Charter the planes. You have the money.' Our only restriction on those funds was that it had to help to eradicate polio. The IPPC, through careful planning and documentation, will spend money on whatever brings us closer to the goal of eradicating polio. That is the mission; those are our marching orders."

Both Sergeant and Keegan, just like Rotary, feel that keeping the same people involved in important projects like PolioPlus is crucial to ultimate success.

Sergeant says, "The IPPC has virtually no turnover. Yes, new people can bring fresh ideas. But, this committee needs stability and the institutional knowledge of what happened last year, and the year before that. We need to know what we've accomplished and where we're going."

Keegan says, "Trust is established as you get to know people. You can be more innovative because you're not threatening; you are more effective and efficient. Over time, I have come to realize how valuable Rotary is in this war on polio. Their network is extraordinary."

Extraordinary though they may be, Rotary members could not single-handedly save the world ... or produce money when it simply wasn't there.

Between 1994 and 2004, Rotary's IPPC developed working procedures and terms of reference for regional and national PolioPlus committees. With guidance from the CDC and other groups, a spending plan ensured Rotary's ability to make grants over the long term. Every new grant came with the condition that the recipient government or agency publicize it. Much was done to elevate Rotary's profile. Still, more money was needed to meet the 2005 eradication target. Money in the sum of \$500 million.

Rotary added advocacy to its mix of ingredients for raising money. Osterlund says, "As successful as we've been raising money from Rotary sources, the whole polio experience taught us the importance of advocacy and looking to the public sector. Our members are politically active. We have had a formalized effort in Washington DC for about six years and it's produced terrific results. We now have level funding from US Congress of \$130 million for the Global Polio Eradication Initiative."

Herbert Pigman was asked to chair the Polio Eradication Advocacy Task Force in 1995. He drafted a global strategy targeting 30 potential donor nations and put the case for polio before heads of state, key legislators and development aid ministers. US appropriations for polio eradication rose from \$9.8 million in 1995 to \$133 million in 2004. Increased support was seen in more than a dozen countries.

In 1998, a new source of support was enlisted: the private sector, including foundations, corporations and wealthy individuals. At this point the United Nations Foundation got involved, seeing how serious Rotary was. The UN Foundation decided to fund an appeal to the private sector, with Rotary managing the project. Rotary, in turn, trained 150 Rotarians worldwide

to carry the message to corporate and foundation boardrooms, raising \$112 million.

Still, in 2002-03 another fundraising campaign was instituted, with a goal of \$80 million and a secondary goal of reaching corporate leaders and allowing them to witness Rotary's efforts, as well as those of all the partners.

Says Osterlund, "In the 1986 fundraising campaign, we missed an opportunity for large gifts. Before that time, we never had a structured major gift effort. Now, we do. In the 2002-03 campaign, we had far more major gifts. We routinely receive major gifts now. It's become part of the culture."

Again, a committee was formed, called the International Polio Eradication Fundraising Campaign Committee, this time Pigman served as director and John Osterlund as associate director. Again, member leaders were trained through global seminars, videotapes and printed materials. The result was donations surpassing the \$80 million goal. Rotary, once again, had gone above and beyond ... raising \$130 million.

The Final One Percent

Through valiant efforts and relentless dedication, Rotary takes much pride. However, in 2005, one percent of the world still is affected by polio. Dr. Aylward, of WHO puts it like this: "Polio eradication is about much more than simply the eradication of a devastating, debilitating disease. Polio eradication is about demonstrating that communities can reach and protect every single child in the world, when they are provided the guidance, tools and resources necessary to do this. Polio eradication is about social justice and equity. If these children can be reached for polio eradication, regardless as to religion, conflict, geography or culture, they can be reached with education, clean water and every other essential needed for a healthy, productive future. In reality, it is this vision that fires the commitment of Rotary International to finish the job of polio eradication."

In polio survivor Hussey's own words, "I stick with this program because polio sticks with me. When I put those two drops of vaccine into the mouth of a child, I know first-hand what I'm preventing. I feel responsible ... not just as a polio survivor or a Rotarian. I feel responsible as a human being to do everything I can to make sure no child lives with polio ever again." ■

Some information contained in this article is borrowed from the book Conquering Polio by Herbert A. Pigman. Thank you to Mr. Pigman for his comprehensive and eloquent history of Rotary International's efforts.

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THE NOVEMBER 2005 FORUM SIGNATURE STORY will feature the National Black MBA Association's program called Ntential. Launched in September of 2004, Ntential, which stands for infinite career potential, combines access to talented, certified coaches along with one of the most extensive and state-of-the-art online career development systems found anywhere. The first wave of participants have called Ntential "life-changing." The NBMBA is a 501 (c)(3) organization with 6,000 members, 27 staff and a budget of \$7 million. Visit www.nbmbaa.org for more information.