

## The Role of Government's Commitment on Polio Eradication Programme in Kano State, Nigeria

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**Abstract:** Government commitment is a major political tool in actualizing the success of any giving policy or programme through deliberate prioritization and allocation of resources. Polio eradication is one of the major public health challenges that had continued to give Nigerian government sleepless night in its quest to ensure effective public healthcare delivery among its citizen. Polio virus being one of the contagious diseases in our community, which primarily infect young children below the age 5 of years, mostly causes infantile paralysis or even death among these children and this require not only Government attention, but strong commitments that will ensure total elimination of the virus. Eradication of this deadly virus requires multi-dimensional approaches involving government agencies, healthcare workers, community leaders, community associations, non-governmental organizations and international organizations such as; World Health Organization (WHO), UNICEF, Rotary International and many others for proper and effective coordination of activities, facilitation of public awareness, information sharing and mobilization of resources to achieve the set out objectives of the program. Consequently, realizing the important role government should play in order to achieve this major objective, a study of this nature was conducted to examine the specific roles needed to be played by Kano State government in polio eradication programme. The Political Will theory of Post, Raile and Raile (2010), which emphasizes the importance of a strong government commitment and qualitative leadership in driving policy decisions and implementation, was adopted as a framework of the study. The theory posits that when governments prioritize and commit enough political will specifically on public health programs or policies, such as polio eradication, it sets the stage for a sustained effort in making effective implementation of all strategies, (Asempah & Wiktorowicz, 2023). The Data for the study was collected through cross-sectional survey method and the population of the study comprises of all elements within the area of the research and Kano state being the area of the study has a total population of Nine Million, Four Hundred and One Thousand, Two Hundred and Eighty Eight (9,401,288) based on 2006 Census, (Isah, Raimi & Sawyer, 2021). The sample size of the population was taken using Krejcie and Morgan (1970) approach, in which three hundred and eighty four (384) was considered. Purposive sampling technique was used in the study and with the help of SPSS Package version 23 and descriptive statistics method using Spearman's rank correlation approach was applied for data analysis and testing of the hypotheses. The findings of research had indicated that political will has quite significant impact on polio eradication programme in Kano State, especially toward resources mobilization for rapid elimination of the virus and recording success in the polio eradication programme in the State. Therefore, based on the findings of this study above, the following recommendations were made; there is the need to strengthen the political will and prioritization of the polio eradication program at all levels of government in Kano State through; increase in the allocation of resources for the program and establishing strong monitoring and evaluation units for the routine immunization campaigns at all level levels of government, which can lead to wider vaccination coverage and total elimination of the virus from the State.

**Keywords:** Government, Government commitments, polio, polio eradication

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## **INTRODUCTION**

The eradication of polio has been one of the major public health challenges in Nigerian in its quest to provide effective healthcare system among its populace. Polio, is a highly contagious viral disease that primarily affect young children below the age 5 of years, which can cause lifelong paralysis and even death (Tian, 2022). However, through concerted efforts by governments, international organizations, healthcare workers, communities and other relevant stakeholders the global polio eradication program was introduced in 1988 by World Health Organization with view to eradicate the deadly in 2000 and as a result this initiative remarkable progress was achieved among nations. One crucial factor that played key role in the success of this program over the years was the unwavering commitment and support from various governments across the World (Adkhamov, 2023).

Polio eradication has been one of the major task that require Government commitments at various levels; national, regional, and international (Lindstrand, Cherian, Chang-Blanc, Feikin & O'Brien, 2021). Governments play a central role in shaping policies, resources mobilization, coordination and implementing of immunization campaigns. Their commitment has been instrumental in achieving significant milestones and overcoming the number challenges associated with exercise.

First and foremost, government commitment provides the necessary political will to prioritize and allocate resources to polio eradication efforts. It involves establishing national immunization programs, integrating polio vaccination into routine immunization schedules, and ensuring adequate funding for vaccines, storage facilities, surveillance systems, healthcare facilities and personals. This commitment not only demonstrates government's dedication to protecting the health of its citizens but also sets the stage for sustained progress and long-term success achieved (Wang, Wang, Ma, Fang & Yang, 2019).

Furthermore, government commitment fosters partnerships and collaboration among various stakeholders. Olateju, Peters, Osaghae and Alonge (2022), affirmed that the eradication of polio requires a multi-faceted approach, involving government agencies, healthcare professionals, community leaders, non-governmental organizations (NGOs), and international bodies such as the World Health Organization (WHO), UNICEF, and Rotary International all play a pivotal role in the success of polio eradication effort across the globe. Governments plays a crucial role in coordinating diverse entities, facilitating information sharing, and mobilizing resources to achieve common goals (World Health Organization, 2020).

Government commitment is also instrumental in addressing barriers and challenges identified in each country or region toward achieving success in the polio eradication program (Mendenhall, De Santo, Nyman & Tiller, 2019). Polio eradication efforts faced myriad of obstacles, including inadequate healthcare facilities that sometimes remote, obsolete and inaccessible in certain areas, socio-cultural beliefs, conflicts, and vaccine hesitancy. Governments navigate on all these complexities and tailored toward certain strategies that can rightly address those challenges effectively. Privor-Dumm and King (2020), opined that by working closely with communities,

religious leaders, and healthcare professionals, governments can design a targeted interventions, engage in advocacy efforts, and addresses misconceptions in order to build trust and ownership of polio immunization.

Moreover, government commitment extends beyond national borders (Schneider & Scherer, 2019). Polio eradication is a global initiative, and international cooperation is essential in achieving success. Governments contribute to this global effort by sharing on best practices, supporting researches, innovations and participating in international conferences or forums through provision of adequate financial support to global polio eradication programs (World Health Organization, 2020). Their commitment also is quite essential in maintaining momentum, sustaining funding, and collectively addressing challenges that transcend national boundaries.

The study would provide answers to the following research questions

1. What role does political will have on polio eradication programme in Kano State, Nigeria?
2. What effect does resources mobilization have on polio eradication programme in Kano State, Nigeria?
3. What role does fostering partnerships have on polio eradication programme in Kano State, Nigeria?
4. What role does driving for more international cooperation have on polio eradication programme in Kano State, Nigeria?

## **LITERATURE REVIEW**

### **Theoretical Framework**

#### **Political Will Theory**

The Political Will Theory by Post, Raile and Raile (2010), emphasizes the importance of strong political commitment and leadership in driving policy decisions and implementation. In the context of polio eradication, this theory suggests that government commitment through demonstrated political will plays crucial role in shaping policies, mobilizing resources, and coordinating efforts to achieve the goal of polio eradication on target set out by WHO. The theory posits that when governments prioritize and commit enough political will specifically on public health agenda, such as polio eradication, it sets the stage for a sustained effort and avenue for successful implementation of strategies (Asempah & Wiktorowicz, 2023).

Applying the Political Will Theory to the study, researchers can examine how government commitment influences the prioritization of polio eradication program, the allocation of resources, and the establishment of right policies and strategies to achieve success. Also, it will provide platform for effective analysis of the correlation between the level of political will demonstrated by governments and the overall progress and success recored over a period of given time for the polio eradication program, (Le & Ozturk, 2020).

## **Public Policy Theory**

Public Policy Theory by Adler and Seligman (2016), examines the processes through which governments develop and implement policies to address societal problems. In the context of polio eradication, this theory can be applied to understand how government commitment influences the formulation and implementation of policies related to immunization campaigns, resource allocation, and provision of healthcare facilities.

Under this theory, researchers can analyze the role of government commitment in shaping policy decisions surrounding polio eradication. They can examine the factors that influence government prioritization of the program, such as political will, public health agendas, and support from international organizations (Holt-Lunstad, 2022). Additionally, the theory allows for an examination of the policy-making process, including the involvement of various stakeholders, the use of evidence-based approaches, and the efforts made between different government agencies and departments.

Through the application of Public Policy Theory, researchers can gain insights into how government commitment affects policy outcomes in the polio eradication program (Aslam, Babar, Madni, Asghar & Yue, 2022). They can assess the effectiveness of policies implemented, identify gaps or challenges in policy formulation and implementation, and provide recommendations for improving policy process in order to enhance its impact on the polio eradication efforts.

## **Conceptual Review:**

### **The Concept of Polio**

According to Castilletti and Capobianchi (2023), polio is a highly infectious disease, that causes paralysis and in some cases death. There are three types of polio virus: type-1, type-2, and type-3. Polio virus is a disease that enters the body through the mouth, multiplies in the oropharynx, intestine or in the feces of an infected child, which then spread rapidly among children in a community, especially in areas with poor hygiene or sanitation. The virus usually invades the lymph tissues of a child less than five years of age through the gastro-intestinal tract, enters the bloodstream and spread to the central nervous system of an infected child. The virus may also spread to the central nervous system through the peripheral nerves and over 90% of children infected with poliovirus either does not or show just a mild symptoms, which can easily go unnoticed. The initial symptoms of polio virus are as follows; severe fever, fatigue, headache, vomiting, and stiffness on the neck, pain in the limbs and 1 in every 200 infections leads to the irreversible paralysis usually on the legs. Among those paralyzed, 5% to 10% died when they stop breathing and their muscles become immobilized. Polio mainly affects children under the age of five years and there is no single known cure of the disease, but can be prevented through multiple vaccinations on children under the age five years (Al Awaidey & Khamis, 2020; World Health Organization, 2020).

Polio is a virus known to affect children at their tender age and it is capable to causing different kinds of paralysis. Polio is a short word for poliomyelitis or infantile paralysis (Kim, Piamonte, Allen & Thakur, 2023). It is an infectious disease caused by the poliovirus. In about 0.5 percent of cases, there is muscle weakness resulting in an inability to move. This can occur over a few hours to a

few days. Brewer (2023) observed that Polio (poliomyelitis) is a viral disease transmitted through contaminated food, water or faeces, in its severest form; it attacks the nervous system leading to paralysis. Nigeria is one of only four countries that have never interrupted poliovirus transmission (the others are Afghanistan, India, and Pakistan). With resurgence in wild poliovirus (WPV) transmission due to a loss of public confidence in oral poliovirus vaccine (OPV) and suspension of supplementary immunization activities (SIAs) in several northern states (Ayaz, 2020; Olufowote & Livingston, 2022). Subsequently, WPV spread within Nigeria and ultimately into 20 previously polio-free countries during 2003-2006 (Wilder-Smith, 2021). Even after national SIAs resumed, limited acceptance and ongoing operational problems resulted in low polio vaccination coverage and continued WPV transmission (Olufowote & Livingston, 2022). In addition, type 2 vaccine-derived poliovirus emerged in 2005-2006 and continued to circulate in northern Nigeria, causing a total of 103 vaccine-derived polio cases in 2008, in addition to the 841 confirmed WPV cases, and despite multiple trivalent oral polio vaccine (tOPV), SIAs (Wilder-Smith, 2021; Ayaz, 2020).

After the introduction of multiple oral polio vaccine (mOPV1) and Immunization Plus Days (IPDs) in early 2006, some progress was made in Nigeria toward the goal to interrupt WPV1 transmission (Olufowote & Livingston, 2022). Community acceptance of OPV in response to the IPDs seemed to improve: the proportion of zero-dose children in high-incidence states decreased, and the number of WPV1 cases and affected districts at the end of 2006 and during 2007 decreased substantially (Ayaz, 2020). Also the routine vaccination coverage and political accountability for implementation was truncated despite willingness of Nigerian government and its immunization partners.

### **Polio Eradication Programme**

Polio eradication programme was introduced in 1988 by World Health Organization (WHO), as a global healthcare initiative to fight against polio virus declared as pandemic in over 125 countries and affecting about 350, 000 children every year. In Nigeria the programme was domesticated under National programme of Immunization, which was an Agency under the federal ministry of health with mandate to ensure total prevention of all child killer diseases in the country, including disability and death and vaccines preventable diseases among children (World Health Organization, 2021). The agency also design programmes or policies that reach all target groups as enshrined in the 2018 National Polio Eradication Emergency Plan. From this plan and states also develop their own policy plan, depending on the risk status of each state (Tao, Chen & Pan, 2019). Before the inception of the polio eradication programme in 1988, over 350,000 children were infected annually in more than 125 endemic countries globally, but after the introduction of the global polio eradication initiative, the annual global polio transmission index totally reduced by 99%, in the year 2000, which was the year set aside by the WHO to eliminate the virus globally (World Health Organization, 2020). However, global polio eradication initiative faced number of challenges since its inception 1988 with view to eradicate polio virus by the year 2000. Polio eradication programme involves halting the incidence of both transmission and total eradication of the virus globally (Chumakov, Ehrenfeld, Agol & Wimmer, 2021). Therefore, to ensure total eradication within the African region, the World Health Organization (WHO) introduced number of strategies following the resolutions of its regional committee for Africa in 1995 and the organization for African Unity (OAU) meeting of 1996. As result of all these



remarkable efforts to reduce the high morbidity and mortality rate among children under the age of five years from child killer diseases, an initiative was introduced in 1988 by world health organization called global polio eradication initiative (GPEI), (Black, Fontaine, Lamberti, Bhan, Huicho, El Arifeen & Merson, 2019). According WHO record, as at 2014 only 3 countries in the world had polio virus and out of these 3 remaining countries each had strains of wild polio virus type 1, and type 2 that was totally eradicated in 1999 and type 3 that was also successfully eliminated from their countries in 2012. However, in 1994 the American region was certified polio-free zone, followed by western pacific region in 2000 and European region in 2002, while in 2014, the South-East Asian region was certified polio-free. This indicated that the transmission of wild polio virus has been interrupted through integrated approach among all the blocks in the world, except within African countries.

This wonderful achievement marks a significant milestone in the global fight against polio virus, with 80% of the world population living in fully certified polio-free regions. Consequently, as a result of this global initiative more than 10 million people earlier endangered by the scourge of the virus were saved and leaving healthy life in polio-free nations. Another estimated number of more than 1.5 million children under the age of five years who would have been dead due polio virus, were also successfully saved through the application of Vitamin A dosages used during each round of polio immunization activities (World Health Organization, 2021). These strategies on polio eradication had seriously succeeded, considering the remarkable achievements made in the campaign globally. Polio eradication programme involves halting the incidence of both transmission and total eradication of the virus globally (Chumakov, Ehrenfeld, Agol & Wimmer, 2021). Therefore, to ensure total eradication of polio within the African region, the World Health Organization (WHO) introduced number of strategies following the resolutions of its regional committee for Africa in 1995 and the organization for African Union (OAU) meeting of 1996. As result of all these political will to reduce high morbidity and mortality rate among children under the age of 5 years against child killer diseases, an initiative was introduced in 1988 by world health organization called global polio eradication initiative (GPEI), (Black, Fontaine, Lamberti, Bhan, Huicho, El Arifeen & Merson, 2019). According World Health Organization's record of 2015, as at 2014, only 3 countries in the world had polio virus and out of these 3 remaining countries each country contained a strains of wild polio virus type 1, and type 2 that was totally eradicated in 1999 and type 3 that was also successfully eliminated from their countries in 2012.

### **Government Commitment**

The concept of government commitment refers to the dedication, determination, and active involvement of governments in addressing a specific issue or pursuing a particular goal (Zhang, Li, Olanipekun & Bai, 2019). It entails a strong political will and sustained effort by government authorities to prioritize, allocate resources, and implement policies and strategies aimed at achieving a desired outcome. Government commitment is essential in driving meaningful change and progress in various domains, including public health, education, infrastructure development, environmental conservation, and social welfare (van Hoof, Marston, Kazak & Buffel, 2021). It serves as a catalyst for action, shaping policies, mobilizing resources, and coordinating efforts to address societal challenges and improve the well-being of citizens (Keller & Virág, 2022).

In the context of public health, government commitment plays a crucial role in tackling diseases, implementing vaccination programs, and promoting overall healthcare. It involves governments making health-related issues a top priority, advocating for policies that prioritize prevention and treatment, and allocating sufficient resources to support healthcare infrastructure and service delivery (Afshari, Teymurlouy, Maleki & Asadi-Lari, 2023).

**Government commitments involve the following dimensions:**

### **Political Will**

Political will encompasses the determination, leadership, and resolve of political authorities to address specific issues and achieve desired outcomes (Kabeyi, 2019). It is a reflection of the government's willingness to take action, make tough decisions, and prioritize the allocation of resources towards the identified goals. Political Will involves a clear recognition of the problem at hand, an understanding of its significance, and a commitment to mobilize the necessary resources and support to address it effectively (Sandberg & Alvesson, 2021). It requires political leaders to champion the cause, engage in advocacy, and demonstrate a sense of urgency in driving policy changes and implementing initiatives. Political Will is often accompanied by effective communication, public engagement, and the ability to navigate political challenges and resistance to ensure the sustained commitment and progress towards the desired outcomes (Boin, McConnell & t Hart, 2021).

Kabeyi, (2019) suggested that political will plays a significant role in shaping policy agendas, driving reforms, and overcoming obstacles that may hinder progress. It provides the necessary impetus for policy and legislative changes, resource allocation, and the establishment of effective implementation mechanisms. Fernández and Valiente (2021) posit when political leaders demonstrate a strong commitment to addressing a specific issue, it sends a powerful signal to the public, stakeholders, and international partners, mobilizing support and resources towards the cause. Political Will can foster collaboration among government departments, civil society organizations, and other stakeholders, enabling coordinated efforts and effective implementation of interventions. It also helps create an enabling environment for innovative approaches, research, and experimentation, as political leaders are more likely to take risks and invest in novel solutions when they are committed to achieving the desired outcomes (Guinan, Parise & Langowitz, 2019). Overall, Political Will serves as a driving force that propels government commitment forward and contributes to the success of initiatives and programs aimed at addressing complex societal challenges.

This gives rise to the following hypothesis:

HO<sub>1</sub>: Political will does not significantly make any impact on polio eradication programme in Kano State, Nigeria.

### **Resources Mobilization**

Resources Mobilization is focused on the allocation and mobilization of financial, human, and material resources to support initiatives and programs aimed at addressing specific goals or challenges (Kanda, del Río, Hjelm & Bienkowska, 2019). It entails the ability of the government to

secure and effectively utilize resources to implement policies, projects, and interventions. Resource mobilization reflects the government's commitment to providing the necessary funding, personnel, and infrastructure to ensure the success of the targeted initiatives. Bhat, Sudhakar, Kurien and Rao, (2022) posit this dimension involves strategic planning, budgetary allocations, partnerships with donors and international organizations, and efficient utilization of resources to achieve desired outcomes. Government commitment to resource mobilization involves prioritizing the allocation of financial resources towards the identified goals. This may include increasing budgetary allocations to sectors related to the issue at hand, such as health, education, or infrastructure. Governments may also explore innovative financing mechanisms, public-private partnerships, and engage in fundraising efforts to secure additional resources. Human resources play a critical role as well, and committed governments invest in the recruitment, training, and deployment of skilled personnel to implement and monitor the initiatives (Haldorai, Kim & Garcia, 2022).

Additionally, resource mobilization involves ensuring the availability of essential materials, equipment, and technology necessary for the successful implementation of programs. Effective resource mobilization is crucial for the sustainability and impact of government commitments (Benzidia, Makaoui & Bentahar, 2021). It enables governments to enhance service delivery, improve infrastructure, and provide necessary support to the targeted populations. Adequate resources facilitate the implementation of evidence-based interventions, research and development, capacity building, and monitoring and evaluation processes. Shao (2023) has shown that governments that prioritize resource mobilization demonstrate a strong commitment to addressing the identified challenges, as they recognize the importance of providing the necessary means for effective program implementation and achieving desired outcomes.

This gives rise to the following hypothesis:

HO<sub>2</sub>: Resources mobilization does not significantly make any role on polio eradication programme in Kano State, Nigeria.

### **Fostering Partnerships**

Governments that demonstrate commitment actively engage and build relationships with civil society organizations, international bodies, communities, private sector entities, and other relevant actors. Arslan, Golgeci, et al, (2021) suggested fostering partnerships enables governments to leverage diverse expertise, resources, and networks to enhance the effectiveness and reach of their initiatives. This dimension involves creating platforms for dialogue, joint planning, and collaborative decision-making, as well as establishing mechanisms for ongoing engagement and coordination. By fostering partnerships, governments can tap into the knowledge, skills, and resources of different stakeholders. Collaboration with civil society organizations allows for community engagement, mobilization, and grassroots support, enhancing the effectiveness and acceptance of government initiatives (Jacobsson & Korolczuk, 2020).

Partnerships with international organizations facilitate knowledge sharing, technical assistance, and access to global best practices and funding opportunities (He, Zhang & Li, 2021). Engaging



the private sector can bring innovation, resources, and expertise to complement government efforts. Fostering partnerships also fosters transparency, accountability, and inclusivity in decision-making processes, ensuring that diverse perspectives and voices are considered (Kayyali, 2023). Governments committed to fostering partnerships prioritize building trust, mutual respect, and shared goals with stakeholders. They invest in regular communication, coordination mechanisms, and joint planning to align efforts and maximize impact. Effective partnerships contribute to the sustainability of initiatives by leveraging additional resources, sharing responsibilities, and creating a collaborative environment that promotes long-term engagement (Ren & Jackson, 2020). By embracing partnerships, governments can harness collective efforts and expertise, ultimately enhancing the outcomes of their commitment and driving positive change in addressing societal challenges.

This gives rise to the following hypothesis:

HO<sub>3</sub>: Fostering partnerships does not significantly impact on polio eradication programme in Kano State, Nigeria.

### **Driving International Cooperation**

Chua, Verma, Hsu and Legido-Quigley (2021), affirmed that governments committed to driving international cooperation actively engage with other nations, international organizations, and global initiatives to foster collaboration, share best practices, and mobilize resources towards common goals. This dimension recognizes that many challenges, such as disease eradication, climate change, or security issues, transcend national borders and necessitate coordinated efforts at the international level. Governments committed to driving international cooperation participate in multilateral forums, negotiate agreements, and contribute to international initiatives and funds. They actively share their experiences, successes, and lessons learned to facilitate knowledge exchange and capacity building among nations (Woodward, Hill, Harkness & Archer, 2020).

This involves diplomacy, advocacy, and negotiation to promote consensus and collective action on global issues. Lie and Miller (2021) posit committed governments also allocate resources and provide financial support to global initiatives, demonstrating their commitment to shared responsibility and solidarity in addressing common challenges. Driving international cooperation allows governments to leverage the expertise, resources, and support of other nations and international organizations. It enables the pooling of knowledge, research, and technical expertise to develop innovative solutions and strategies. By fostering collaboration, committed governments enhance the effectiveness of their own efforts by tapping into global networks, leveraging funding opportunities, and accessing critical resources (Reinsberg, 2021). Additionally, driving international cooperation enhances diplomatic relations, builds trust, and strengthens partnerships with other nations, ultimately contributing to a more interconnected and collaborative global community.

This gives rise to the following hypothesis:

HO<sub>4</sub>: Driving international cooperation does not make significant effect on polio eradication programme in Kano State, Nigeria.

### Conceptual Framework

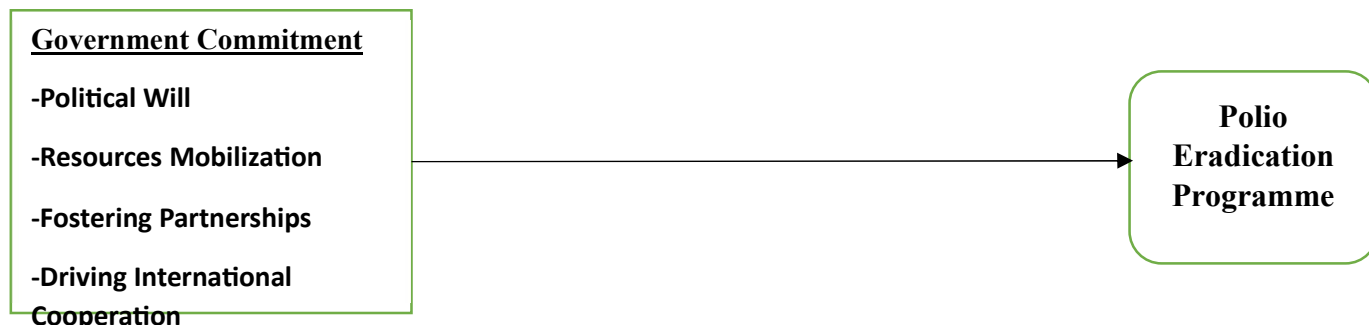


Figure 1: Conceptual framework showing the relationship among the variables in the study

Source of Data: Research survey, 2015

### METHODOLOGY

The generation of the data for the study was made through cross-sectional survey method. The population of the study comprises of all elements within the area of the research and Kano state being the state under the study, has a total population of Nine Million, Four Hundred and One Thousand, Two Hundred and Eighty Eight based on 2006 census (9,401,288), (Isah, Raimi & Sawyerr, 2021). The minimum returning sample size for a given population was calculated using Krejcie and Morgan (1970) table and the sample size of the population was three hundred and eighty four (384). Purposive sampling technique was used in the study, with the help of SPSS Package version 23, while descriptive statistics and Spearman's rank correlation methods were employed for data analysis and the testing of our hypotheses.

### DATA PRESENTATION AND ANALYSIS

#### Bivariate Analysis

Linear regression was used to analyze the primary data obtained at 95 percent confidence level. The tests specifically address the null forms of the hypotheses and all of which were bivariate. The probability of accepting the null hypothesis at ( $p > 0.05$ ) or rejecting the null hypothesis at ( $p < 0.05$ ) was determined through the use of 0.05 significance level as the criterion.

Table 1: Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.985 <sup>a</sup>	.970	.969	.17205

a. Predictors: (Constant), Driving International Cooperation, Political Will, Resources Mobilization, Fostering Partnerships

In the model summary table provided, the R value was .985, which indicated a very strong correlation between the predicted and observed values of the dependent variable. The R Square value was .970, which indicated that the model explained 97% of the variance in the dependent variable. The Adjusted R Square value was .969, which was very close to the R Square value, indicating that the model was not over fitting the data. The Std. Error of the Estimate was .17205, which was a relatively low value. Overall, the model summary table indicated that the model fits the data very well. The model was able to explain the large proportion of the variance in the dependent variable, and the predictions that were close to the actual values.

**Table 2: ANOVA<sup>a</sup>**

Model	Sum of Squares	df	Mean Square	F	Sig.
1 Regression	157.557	4	39.389	1330.591	.000 <sup>b</sup>
Residual	4.855	164	.030		
Total	162.412	168			

a. Dependent Variable: Polio Eradication Program

b. Predictors: (Constant), Driving International Cooperation, Political Will, Resources Mobilization, Fostering Partnerships

In the table above, the p-value for the model is .000, which is less than .05. This means that the model is statistically significant and that the independent variables can predict the dependent variable. The F-statistic is 1330.591, which is a very high value. This indicates that there is a very strong relationship between the independent variables and the dependent variable. In the context of polio eradication and the ANOVA table suggests that the four independent variables (Driving International Cooperation, Political Will, Resources Mobilization, and Fostering Partnerships) are all significantly associated with the polio eradication programme as dependent variable. This means that these four factors are important for the success of polio eradication efforts.

**Table 3: Co efficients<sup>a</sup>**

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
	B	Std. Error	Beta		
1 (Constant)	-.510	.074		-6.860	.000
Political Will	.442	.031	.366	14.264	.000
Resources Mobilization	.055	.025	.061	2.183	.030
Fostering Partnerships	.385	.044	.404	8.804	.000
Driving International Cooperation	.257	.038	.265	6.800	.000

a. Dependent Variable: Polio Eradication Programme

The unstandardized coefficients indicate that one-unit increase in political will is related to 0.442 unit increase in the polio eradication programme, holding all other independent variables constant. One-unit increase in Resources Mobilization is associated with a 0.055 unit increase in the polio eradication programme, holding all other independent variables constant. A one-unit

increase in Fostering Partnerships is associated with a 0.385 unit increase in the polio eradication programme, holding all other independent variables constant. A one-unit increase in Driving International Cooperation is associated with a 0.257 unit increase in the polio eradication programme, holding all other independent variables constant.

The above result indicates that all the null hypotheses previously stated were rejected and the alternate hypothesis was accepted and this means:

- HI<sub>1</sub>: Political will significantly has impact on polio eradication programme in Kano State, Nigeria.
- HI<sub>2</sub>: Resources mobilization significantly has impact on polio eradication programme in Kano State, Nigeria.
- HI<sub>3</sub>: Fostering partnerships significantly has impact on polio eradication programme in Kano State, Nigeria.
- HI<sub>4</sub>: Driving international cooperation significantly has impact on polio eradication programme in Kano State, Nigeria.

### **Conclusion and Recommendations**

The polio eradication programme has made significant progress in recent time, but there are still challenges to be overcome. The impact of government commitment on the polio eradication programme is quite critical and Governments can play a key role in polio eradication by- showing more political will through quality leadership, resources mobilization, fostering effective partnerships and driving enough international cooperation. The results of this study suggest that government commitment is a significant predictor for the success of the polio eradication programme. Consequently, Governments that show enough commitments toward polio eradication program are more likely to achieve success in polio eradication programme objectives and by extension realize more effective and sustainable public healthcare service delivery among its people within a target period.

The following recommendations were made

- 10) Strengthen political will and leadership at all levels of government. This includes; making polio eradication a top priority, allocation of adequate resources to the programme, and ensuring that there is strong support for polio eradication from the highest levels of government.
- 11) Mobilize resources for polio eradication, including financial, human, and technical resources. This includes ensuring that there is adequate funding for polio eradication activities, such as immunization campaigns, surveillance, and outbreak response.
- 12) It also includes ensuring that there is a sufficient number of trained personnel to implement the polio eradication programme.

- 13) Foster partnerships with civil society organizations, the private sector, and other stakeholders. Partnerships can play a vital role in polio eradication by helping to mobilize resources, reach communities, and raise awareness of polio.
- 14) Drive international cooperation and support for polio eradication. This includes working with other governments, international organizations, and donors to ensure that there is a coordinated global effort to eradicate polio.

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