PRESS RELEASE

Health Ministers, Donors and Partners Tackle River Blindness Scourge in Africa

4 December 2010/Abuja, Nigeria - H.E. President Goodluck Jonathan, Federal Republic of Nigeria will on Tuesday 7th December at the Transcorp Hilton, Abuja, open a three-day governing board meeting of the World Health Organization African Programme for Onchocerciasis Control (River blindness) Control (WHO/APOC). It is the first time that Nigeria is hosting the annual session of the Joint Action Forum (JAF), the governing board, which comprises Health Ministers from 19 participating countries, representatives of 20 donor countries and institutions, 15 non-governmental development partners, UN agencies including UNICEF, UNDP the World Bank, as well as the African Development Bank and the pharmaceutical company, Merck & Co Inc. Some of the 11 former Onchocerciasis Control Programme in West Africa (OCP) countries, including four receiving funding from APOC have also been invited.

The sixteenth session of the JAF being hosted by Nigeria under the theme “Join forces to make river blindness history” is a double anniversary for the world health community which in 1995 set up APOC to eliminate river blindness as a public health and socio-economic problem from Africa. The Programme is marking its 15-year anniversary which also coincides with 10 years after the declaration of the Millennium Development Goals (MDGs) by World leaders at the UN summit of September 2000 in New York.

As a result of substantial achievements made during the past 15 years (86% reduction in severe itching, 33% reduction in prevalence of the disease, prevention of more than 500 000 cases of blindness and an estimated Economic Rate of Return of 17% on invested funds), WHO/APOC continues to enjoy sustained donor support.

With five years to the projected attainment of the MDGs by 2015, the JAF session in Nigeria presents health Ministers with an opportunity to chart a way forward towards the elimination of river blindness as one of the Neglected Tropical Diseases, which cause reduction in agricultural productivity, exacerbate poverty and impede development.

River blindness is a parasitic worm disease transmitted to humans by black flies that breed in fast-flowing rivers and in valleys in the remote communities inhabited by the poor.
The disease is endemic in 30 African countries where 120 million people are at risk, including an estimated 31 million people in 31 of Nigeria’s 36 States as well as the Federal Capital Territory.

Since 1997, Nigeria’s Federal, State and local government authorities in collaboration with international partners, including WHO/APOC and NGDOs have been controlling the disease using the programme’s cost-effective Community-Directed Treatment with Ivermectin (CDTI), now treating more than 26 million people annually and thereby reducing the prevalence of the disease in the country and with the possibility of eliminating it in some foci.

More than 146,000 communities are currently using the CDTI strategy, also known as the Community-Directed Intervention (CDI) approach to treat 68 million people annually in 15 African countries through a network of about one million trained community directed distributors, who deliver ivermectin, a safe drug for the treatment of disease, donated by Merck & Co Inc.

Encouraged by the tremendous results, WHO/APOC and partners are promoting the wide use of the CDI strategy, which does not only empower communities to take care of their own health but also strengthens health systems. Research results have indeed shown that the CDI strategy, as a key element of Primary Health Care can contribute to the attainment of the health-related MDGs, by serving as a tool for the delivery of multiple health interventions, such as home management of malaria, distribution of insecticide-treated bed nets, Praziquantel, Albendazole and vitamin A supplementation.

In response to the advocacy efforts by WHO/APOC and partners, 34 universities, medical and nursing schools across Africa have agreed to incorporate CDI strategy in their curricula, as a way of producing more health professionals with the requisite expertise to take the CDI approach forward, and towards freeing Africa of its huge disease burden.

The 15th JAF session was hosted by a donor institution, the African Development Bank, in line with the APOC protocol that stipulates the rotation of the hosting of the governing board meeting between donor institution/countries and participating countries.

For more Information see WHO/APOC website @ www.who.int/apoc