

PRESS RELEASE

African Health Ministers, donors re-commit to elimination of Onchocerciasis

12 December 2008/Kampala, Uganda - African countries, the donor community and development partners have re-affirmed their commitment to free the continent of Onchocerciasis (river blindness) and other Neglected Tropical Diseases (NTDs).

The governing board of the World Health Organization (WHO) African Programme for Onchocerciasis Control (APOC), at its 14th session here approved a Budget of US\$20.5 million for the programme for 2009. The Forum also approved an Addendum to the Plan of Action and Budget for the Phase II and phasing-out period of the programme (2008-2015), with supplementary financial commitment of US\$36 million.

The World Bank, the fiscal agent of APOC, projected the programme's Budget for the period 2008-2015 at US\$114 million with a funding gap of about US\$20 million.

In spite of the global financial crisis, donors and other partners made additional financial pledges, while the Non-Governmental Development Organizations Group as implementing partners, also reiterated their continued commitment to the river blindness control programme.

The supplementary budget and new donor pledges, which demonstrate renewed confidence in the programme would also strengthen APOC to carry out its expanded mandate, with the focus gradually shifting, based on emerging scientific evidence, from control to elimination of river blindness from Africa.

A communiqué at the end of the 8-11 December 2008, 14th JAF session, welcomed this historic development that, there was now emerging scientific evidence to show that under certain circumstances, elimination of transmission of onchocerciasis was possible in the continent, using ivermectin treatment alone delivered by African communities themselves over an unbroken period as demonstrated by a multi-country study in Mali, Senegal and Nigeria.

The JAF, which groups 19 APOC countries, UN agencies, Non-Governmental Development Organizations, the private company donating the drug for the treatment of onchocerciasis, as well as donor countries and institutions which have steadfastly supported river blindness control in Africa over three decades, also underscored the urgency in tackling NTDs in Africa.

President Yoweri Museveni of Uganda, who officially opened the meeting on Monday, warned that high disease burden could prevent African countries from achieving the Millennium Development Goals (MDGs), set by world leaders in 2000 to reduce poverty and improve the well-being of the poor.

The JAF acknowledged APOC's commitment to support countries in the integration of onchocerciasis control into health systems and co-implementation of CDTI with other NTDs, including some components of malaria control. To strengthen these efforts, it was recommended that countries should develop a national policy on co-implementation for better coordination and maximum benefit to communities.

"It is gratifying to note that reports indicate that river blindness is progressively being reduced to elimination levels," declared Uganda's Minister of Health Dr. Stephen Mallinga, who chaired the 14th JAF session. He said the meeting was an opportunity for Africa "to advocate not only for (river blindness) control, but also the control of (other) NTDs."

Onchocerciasis, one of the NTDs, is endemic in 30 African countries where more than 120 million people are at risk of contracting the parasitic filarial worm disease transmitted by black flies to humans. Building on the remarkable achievements of the Phase I Onchocerciasis Control Programme (OCP) in West Africa, which wound up in 2002, WHO and partners through APOC have recorded unprecedented successes in the control of river blindness in sub-Saharan Africa, where the exodus of trained health workers has compounded the poor infrastructure and weak health systems in countries.

Founded in 1995, APOC has since 1997 been using its trademark Community-Directed Treatment ComDT) approach for the control of river blindness with ivermectin, and at the same time empowering communities and strengthening health systems. The programme is also encouraging the use of the strategy for the delivery of multiple health interventions, especially those targeting neglected tropical diseases.

At the meeting attended by more than 200 participants, including seven Ministers and Deputy Ministers of Health of APOC and OCP countries, three members of onchocerciasis endemic communities in Uganda gave testimonies on the debilitating effects and the socio-economic burden associated with the disease, and how ivermectin had been effective in reversing their suffering.

To mitigate the plight of thousands of African children suffering from bilharzia, JAF also urged African Ministers to explore local and international mechanisms for obtaining the treatment drug, praziquantel.

APOC Director, Dr Uche Amazigo, on behalf of the beneficiary communities and the APOC management, expressed her profound gratitude to the donor community and partners for their unflinching support and the new pledges. She reassured them that this unwavering support and investments would motivate APOC and disease control managers in countries to do more.

Dr. Malinga, the Ugandan Minister of Health was elected Chair of JAF for the next one year. He took over from Dr Dani Ceuninck from Belgium, who was praised for his leadership as Chair of JAF13, and his home country the Kingdom of Belgium for its long-standing support to river blindness control in Africa. The 15th session of JAF will be hosted by the African Development Bank in Tunis, Tunisia in December 2009.