

## **High disease burden could cost Africa the MDGs - President Museveni**

**09 December 2008/Kampala, Uganda** - President Yoweri Museveni opened the 14<sup>th</sup> session of the governing board of the World Health Organization (WHO) African Programme for Onchocerciasis Control (APOC) here Monday, warning that high disease burden could prevent Africa from achieving the Millennium Development Goals (MDGs) set by world leaders in 2000 to reduce poverty and improve the well-being of the poor.



H.E. President Yoweri Museveni of Uganda, (middle) Dr Uche Amazigo, Director APOC (to his left), African Health Ministers, Reps of UN agencies, donor community and global health systems support groups at the official opening ceremony of the 14th session of WHO/APOC at the Kampala Imperial Royale Hotel - Monday 08 December 2008.

**Africa with about 11% of the World's population bears about 90% of the burden of Neglected Tropical Diseases (NTD) also known as the diseases of the poor.**

**Declaring open the four-day meeting of the Joint Action Forum (JAF) of WHO/APOC, at the Kampala Imperial Royale Hotel, Monday, President Museveni said "all MDGs are directly or indirectly linked to health and agriculture," so Africa and its development partners must address the NTDs.**

**He disclosed that Uganda had successfully eliminated Guinea worm through community mobilization and empowerment, and great support by the Carter Center. The same**

strategy should be extended to other diseases, said the president, adding that safe water was crucial to the elimination of Guinea worm in his country.

According to him, sleeping sickness in animals was also conquered using a safe insecticide to kill tsetse flies and by so doing controlled other biting flies including mosquitoes.

The President assured JAF of Uganda's technical and political commitment to the elimination of river blindness a parasitic filarial worm disease transmitted by black flies to humans.

In her message to the meeting attended by more than 200 participants including six health ministers, representatives of the donor community, as well as APOC and former Onchocerciasis Control (OCP) countries, WHO Director General Margaret Chang noted that the goal of the OCP in West Africa, which wound up in 2002, was "to eliminate the disease as public health problem and mitigate its negative impact on the socio-economic development of affected communities."

"Today, the strategic objective of APOC, is to protect permanently the remaining 120 million people at risk of this debilitating and disfiguring disease in 19 countries of Africa through the establishment of community-directed treatment with ivermectin (CDTI), which is sustainable by communities after APOC financing has ended," the WHO DG added.

In the message read on her behalf by the WHO Country Representative in Uganda, Dr Joaquin Saweka, Dr Chang noted that "the successes of onchocerciasis control in Africa have increased accessibility to fertile land and agricultural productivity, reduced poverty, improved health outcomes and removed two significant public health problem – onchocercal blindness and skin disease."

But she said Africa "needs to maintain the gains made" in the control programmes and "continue reducing the impact of the disease as a pressing public health problem and an impediment to social and economic advances." As a response to the geographical overlap of diseases, whereby people are affected by more than one disease simultaneously, the WHO boss said "a primary health-care approach is essential to ensure that activities are better integrated."

Outgoing JAF Chair, Dr Dani Ceuninck of Belgium, outlined the Forum's progress and achievements in the last one year, including the providing more than 10 million people with multiple health interventions, rapid epidemiological mapping of 108 villages in Angola and 97 villages in Mozambique.

The JAF also oversaw the integrated mapping of five NTDs in Equatorial Guinea with partners, for the first time under APOC's new mandate. The Programme's trademark CDTI strategy was also expanded for the treatment of some 54.6 million people in 116,000 communities in 2007, showing an increase of 12.5% over the 48 million treated in 2006.

**APOC Director Dr Uche Amazigo, who also represented the WHO Regional Director for Africa, Dr Luis Gomes Sambo, said for the first time in the 33 years of river blindness control in Africa, the Kampala meeting would receive scientific evidence of the elimination of transmission of river blindness in Mali, Senegal and most recently Kaduna State in Nigeria, using ivermectin treatment alone delivered by African communities themselves.**

**The results, she said; “proves that the strategy of APOC – empowering communities to take charge of managing their own health works; and provides the scientific evidence to health systems to seriously consider the adoption of people-driven initiatives to achieve the MDGs.”**

**According to the APOC director, “evidence of the commitment of African governments in the elimination is extremely important to retain the interest of our traditional donors and build new partnerships to survive the changing health environment.”**

**She made a strong appeal for the hundreds of thousands of African children who “are urinating blood and out of school because of bilharzia” to be provided access to free praziquantel, get well and return to schools.”**

**Participants at the opening ceremony were treated to a variety of Ugandan traditional music and dances and ceremonial band music. They also watched a documentary on APOC activities in Uganda and Equatorial Guinea, specifically on the success of vector elimination, and heard moving testimonies from community members who were once afflicted by onchocerciasis.**

**One of them, 84-year-old Mugwano Mustapha from Maale District, Bufumbo South County, Eastern Uganda, said he had left town in the 1980s for the forest to farm, leaving behind three wives and six children. But after a few years, black flies invaded his farm and Mr Mustapha was infected with onchocerciasis and was forced back to the city in 2004.**

**The unrelenting scratching and skin de-pigmentation resulted in stigmatization. Mr Mustapha’s three wives deserted him. Fortunately for him, he has been cured after taking doses of ivermectin and he now wants to remarry.**

**After the opening session, Uganda’s Minister of Health Dr Stephen Malinga was elected by acclamation as the Chair of JAF for the next one year taking over from Dr Ceuninck of Belgium. The African Development Bank (AfDB) was elected Vice-chair.**