From 20th - 22nd March 2013, a regional consultation meeting was held in Brazzaville, Congo, between the partners of neglected tropical diseases (NTDs). Organized by the Regional Office of the World Health Organization for Africa (WHO/AFRO), the meeting focused on the topics of building efforts jointly and harmonizing the use of resources in order to accelerate the elimination of NTDs on the continent by 2020. This meeting followed the one held in Accra, Ghana, in June 2012, which contributed to getting the commitment of all stakeholders in intensifying NTD control and elimination activities.

Thus in Brazzaville, more than sixty participants from endemic countries, donor agencies, pharmaceutical industry, national and international NGOs and WHO, as well as experts from other institutions took stock and advocated for a rapid establishment of the NTD general mapping. To this end, they hoped that WHO will continue to play the role of facilitator in the dialogue between various parties. The estimated budget is $1.8 billion or 55 cents per sick person for the period starting from 2013 to 2020. To this end, it was agreed that the governments of the 36 endemic countries in Africa, in which NTD multiannual plans were available, and also donors and implementing agencies should strive for a greater mobilization of resources.

It should be noted that throughout the world, at least one (1) billion people are confronted with NTDs, that is to say, one person out of seven. Africa alone carries more than 50% of the burden. These diseases are mainly leprosy, schistosomiasis, Guinea worm, sleeping sickness, lymphatic filariasis, onchocerciasis, trachoma, Buruli ulcer and soil-transmitted helminths such as hookworm, ascariasis and whipworm, and leishmaniasis. APOC was represented in this meeting by its Director, the heads of the SDD and the Epidemiology and Vector Elimination Units.

**Summary by Thérèse Belobo**

### Table of contents

<table>
<thead>
<tr>
<th>Topic</th>
<th>Pages</th>
</tr>
</thead>
<tbody>
<tr>
<td>The NTDs in Brazzaville: Call for policy harmonization</td>
<td>1</td>
</tr>
<tr>
<td>Consultation in Abuja: Get NTDs become priority tropical diseases</td>
<td>2</td>
</tr>
<tr>
<td>Atlanta: NGO in new dynamics towards the elimination of NTDs</td>
<td>2</td>
</tr>
<tr>
<td>Ouagadougou: A workshop on the finalization of the protocol of the independent evaluation of the therapeutic coverage</td>
<td>3</td>
</tr>
<tr>
<td>DRC: DRC: Pre-control data collection on onchocerciasis endemicity in Ituri Sud</td>
<td>3</td>
</tr>
<tr>
<td>Ethiopie: TCC and APOC supporting the National Onchocerciasis control</td>
<td>4</td>
</tr>
<tr>
<td>Portrait</td>
<td>4</td>
</tr>
<tr>
<td>Marie Emilie Zougmore, Assistant managing two passions</td>
<td></td>
</tr>
</tbody>
</table>
Experts gathered in Abuja, Nigeria to get NTDs become «Priority Tropical Diseases»

Experts committed in NTD control

from 4th – 8th February 2013 were held in Abuja, Nigeria, three meetings on Neglected Tropical Diseases (NTDs). The topics of these meetings were as follows: (i) Developing national plans for NTD control, (ii) the workshop on NTD mapping in Nigeria / the NTD Steering Committee meeting, and (iii) NTD control and elimination partners’ lunch-debate, jointly organized by Nigeria and AFRO. The first two meetings were held simultaneously from 4th – 8th February 2013 and the last took place on 8th February 2013.

Representatives of the Federal Ministry of Health and those from areas in charge of NTDs, officials responsible for the NTD programmes of the 36 states and the federal capital, as well as those from various national and international NGDOs took part in the domestication of the national master plan for NTD control. The meeting was facilitated by representatives of WHO / AFRO, APOC, members of the National NTD Steering Committee. These meetings aimed at developing State NTD plans based on the national NTD plan. The main recommendation was the establishment by the Ministry of Health of a fund for NTD control activities at the launch of a multi-year NTD master plan scheduled for 19th February 2013.

The meeting on NTD mapping aimed at identifying the shortcomings in mapping all chemotherapy preventive NTDs, developing mapping plans and finalizing budget mapping. Participants worked on three specific groups of diseases: Onchocerciasis - LF - Loa Loa, Schisto - soil-transmitted helminthiases, and trachoma. At the same time, the NTD Steering Committee held its meeting during which the main rules of Onchocerciasis control in Nigeria were established to avoid duplication of efforts and make synergies profitable. An ad hoc committee was also established to strengthen local capacity in data processing to help make timely decisions.

In the lunch-debate, each partner has briefly presented his/her organization, its financial commitment to the NTD plans in terms of mapping and implementation and completed a form entitled “Partners’ inventory and Contribution form” that was distributed. From these discussions, APOC will support capacity building on the CDI strategy, data management and GIS in addition to its contribution to completing the mapping of the five priority chemotherapy preventive NTDs and loiasis in the 36 States and the federal capital.

Emma Kalsany, Secretary/COP/APOC and Honorat Zouré, Biostatistics and Mapping Officer

NGDOs in Atlanta: new dynamics towards elimination

A meeting of the coordination group of non-governmental development organizations (NGDOs) hosted, on 26th and 27th February 2013 in Atlanta, United States, 22 participants with some of them representing NGDOs and other associate members, joined by an observer. The secretariat was provided by WHO / PBD and APOC.

The sessions focused on various topics such as developing onchocerciasis advocacy messages in accordance with the London Declaration in the background, the objective of eliminating NTDs by 2020, the necessity to make correct predictions in applying for ivermectin for the treatment of onchocerciasis and lymphatic filariasis, the necessity to achieve a comprehensive planning of meetings and visits to in-country partners, the necessity to strengthen national capacities in operational research on Onchocerciasis, the adoption of a new name for the group known as “The NGDO Coordination Group for Onchocerciasis Elimination”, the review of special cases regarding Angola, the Central African Republic, the Democratic Republic of the Congo, Ethiopia and South Sudan, where great efforts should be made to catch up the delays caused in these countries by past armed-conflicts or by the prevailing insecurity.

Regarding the 42nd session, the participants agreed to meet in Brighton, UK, from 16th – 26th September 2013. It should be noted that the Programme was represented at this meeting by the Head of the Sustainable Drug Distribution Unit.

Summary by Thérèse Belobo

APOC NEWSLETTER N°006 - February/March 2013
A finalization workshop organized by APOC in Ouagadougou from 18th – 20th February 2013 aimed at refining the assessment of the methods of treatment coverage in Onchocerciasis control. In the 108 projects existing in 16 countries supported by APOC, the main strategy applied is Community-directed Treatment with Ivermectin (CDTI).

According to the results published by the "Weekly Epidemiological Record" No. 49/50 of December 2012, the treatment of onchocerciasis with ivermectin was administered to 98 million people in 24 endemic countries in 2011. This is equivalent to a therapeutic coverage of 97.4%. These figures, in themselves, could constitute the hope of a rapid elimination of the disease within communities that are affected, if some significant differences did not occur between the rates noted in the evaluations of treatment coverage and those reported by the countries.

Therefore, in order to minimize these differences, the Technical Consultative Committee (TCC 35), held in September 2012, recommended the "development of mechanisms that would contribute to carrying out an independent monitoring of treatment coverage and to building capacity at national and local levels for its implementation". In response to this request, two external experts, including an epidemiologist and a statistician, and the Programme professional staff have reviewed and adjusted an in-house drafted evaluation guide.

Thereafter, the new version has been submitted for consideration by the Technical Consultative Committee (TCC 36) held in Ouagadougou from 11th – 14th March 2013. It appears that some improvements still need to be provided to the text, particularly those that aim at reducing the process of independent evaluation of treatment coverage. 

Thérèse Belobo

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**Sustainable Drug Distribution Unit (SDD)**

**Therapeutic coverage of onchocerciasis control: an independent evaluation tool under preparation**

A challenge in the equatorial forest for skin snip

**Epidemiology and Vector elimination unit (EVE)**

**DRC: Pre-control data collection on onchocerciasis endemicity in Ituri Sud**

Twenty-one projects of community directed treatment with ivermectin should be implemented in DRC. It was only in 2012 that the 21st project (Ituri Sud) in DRC was submitted and approved to receive funding from the APOC Trust Fund. Given the partial mapping of onchocerciasis in the project area, the Secretariat of the National Onchocerciasis Task Force (NOTF) proposed to conduct an epidemiological survey to collect pre-control data on Onchocerciasis dermic microfilariae (microfilariae prevalence of Onchocerciasis) in 22 villages in Ituri Sud, using the technique of bloodless skin snip.

In each of the villages concerned, the epidemiological team will also assess the prevalence of onchocerciasis, based on nodule palpation on a sample of 50 people who would have lived in the village for at least 10 years. This exercise, which began on 21st February 2013, is ongoing despite security issues and the difficulties of geographical accessibility, as shown in the photograph below, taken in December 2012 in the Uélés, an area which shares the same bio-ecological characteristics with the Ituri district.

Dr Noma Mounkaila, Chief, Epidemiology and elimination of Vector Unit/APOC
Seeing her off on 1st November 1997 at the Leopold Sedar Senghor Airport in Dakar, her dear mother felt one of her eight children, responding to a job offered to her in Bobo Dioulasso, was escaping from her. A year later, this feeling was justified: the little Marie Emilie told her husband and her that she had found the man of her life in Burkina Faso.

Since then, the young Goudiaby known as Mrs. Zougmoré has gone through several stages in her private and professional lives. Hired in 2003 after completion of probation, the full days of the current Assistant to the Director are well-regimented. Got up at 5:00 in the morning, she is first concerned with the family well-being including preparing breakfast and snacks for her young offspring that she drives to school.

Gone down to the office among the earliest employees, she sees to it that the managerial area is clean and properly managed. In addition to that, she ensures the meticulous management of the physical and electronic mail, welcomes visitors and gently reminds the Director of his appointments and commitments.

Standing an imposing 1.70 m tall, with a smile on her face, Marie Emilie has struck the right balance between a profession she had often dreamed of, namely working in an international organization or a large bank, because of the human relationships one can develop in such institutions, and proper family life. Her position at APOC keeps her immersed in a multicultural and multilingual context she likes very well. On the other hand, her supervisors allow her time to enjoy office breaks and weekends with her three children whose education and human values are patiently monitored by her. All this happens at the great satisfaction of her children’s grandmother who welcomes them every two years to her home in Ziguinchor.

Prior to travelling to the field to support the regional level of the NOCP, the joint delegation held working sessions with the WHO Country Office and the Division of the Ministry of Health in charge of neglected tropical diseases, and the Carter Center, the NGDO partner.

Marie Emilie managing two passions: professional and family lives