

UNIVERSAL HEALTH COVERAGE: ME TOO!

| **Dr. AKPAKA A. KALU** |
WHO REPRESENTATIVE FOR ETHIOPIA

FIRST INTERNATIONAL PODOCONIOSIS CONFERENCE

23 SEPTEMBER 2018
ADDIS ABABA, ETHIOPIA

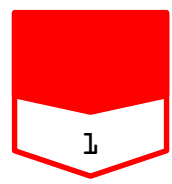


**World Health
Organization**

OUTLINE

- Introduction
- Ethiopia as a Global Leader Contribution to podioconiosis research
- Translating research into implementation & Ethiopia contribution
- Universal Health Coverage: Embedding podioconiosis into Universal Health Coverage



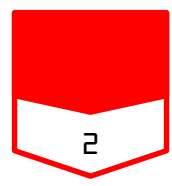


INTRODUCTION

What is Podocniosis

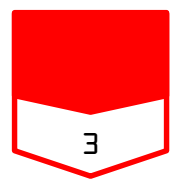
**“The angry mossy
feeted man should
stamp his feet on the
ground”
(Nigerian proverb)**

- Implies Social Stigma of irreversible Incapacity
- Neglected among neglected diseases
- Disease of the poorest of the poor – the shoeless



**SDGs GRAND NORM:
MULTISECTORIAL ACTION TO
LEAVE NO ONE BEHIND!**



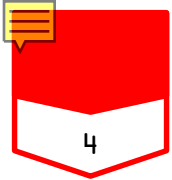


NTD

a proxy for disadvantage

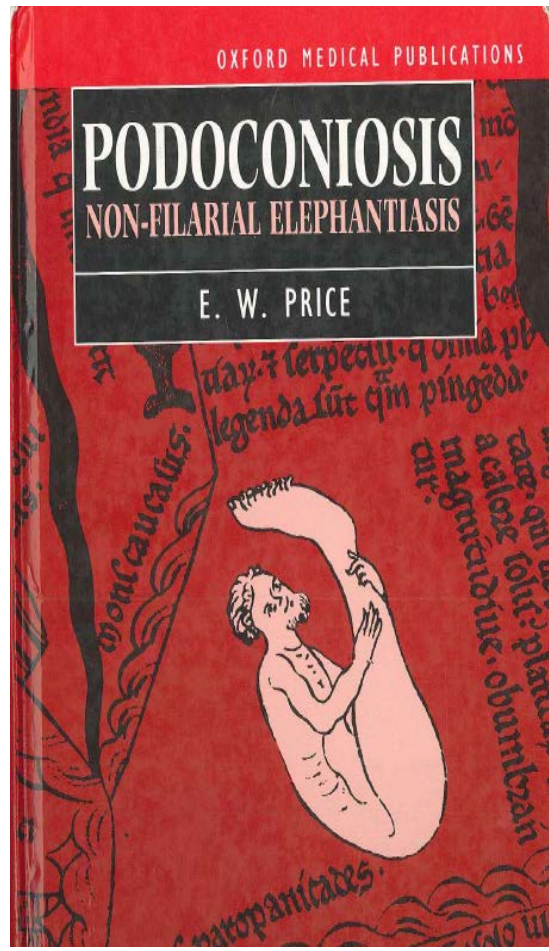
- Preventable yet prevalent
- Affect populations with little voice
- Are hidden
- Carry stigma and discrimination
- Cause morbidity and mortality
- Control challenged by circumstance
- Limited data and research
- Ethical obligation for universal health coverage!

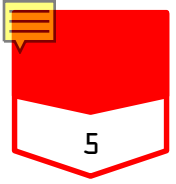




PODOCONIOSIS

- Better described in Ethiopia than anywhere else in the world.
- Dr. Ernest Price's investigations the 1970s and 1980s provided evidence for epidemiology, ecology, pathology and natural history of the disease- named "podioconiosis in 1984
- Inadequate research but progress & current evidence informs action





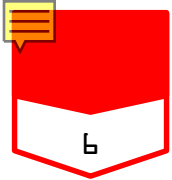
WHAT IS PODOCONIOSIS?

An inflammatory reaction to mineral particles in red clay soils.

Found in genetically susceptible people (not everyone exposed to the soil).

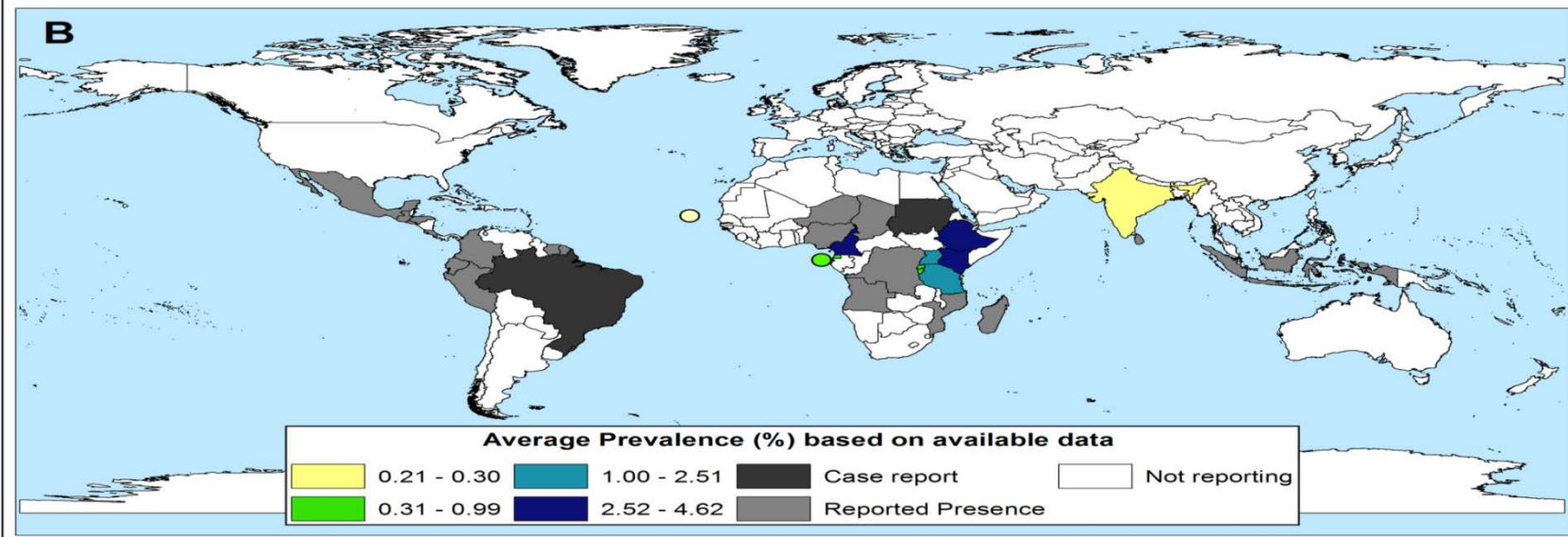
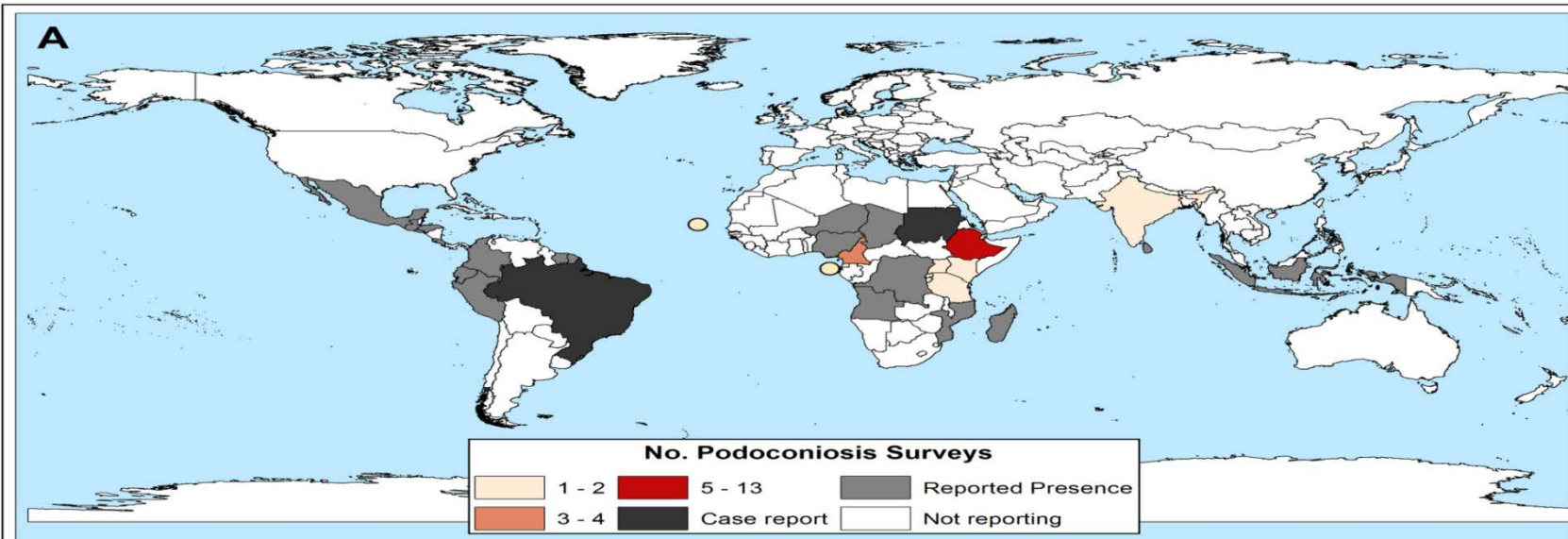
was identified by WHO as a neglected tropical disease in 2011

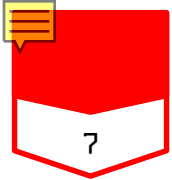




PODOCONIOSIS

Prevalence and Distribution



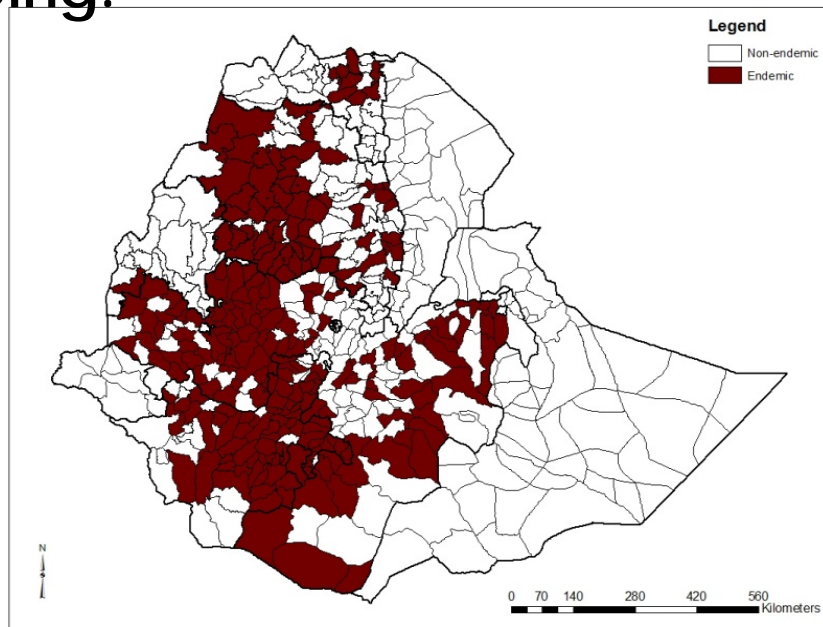


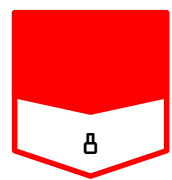
PODOCONIOSIS

Prevalence and Distribution

- The evidence on Global prevalence and distribution of podoconiosis remains sketchy.
- Ethiopia the first country in the Africa Region to undertake nationwide podoconiosis mapping.
- Updated evidence on the incidence and prevalence of podoconiosis is essential for guiding and informing global, regional, and national health policies & plans.

1.6 million
Ethiopians
affected





WHAT ARE THE CONSEQUENCES?

Disability

(frequent acute painful attacks);

Huge stigma

(consequences for school, marriage, community events);

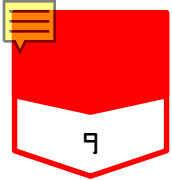
Low quality of life;

Mental health problems;

Economic burden

Annual cost:
>\$200
million





DISEASE MANAGEMENT

what can be done?

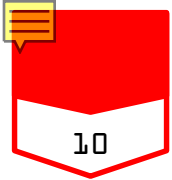
PREVENTION:

Regular use of protective shoes;
Daily washing of feet;
Cover floors of houses.

TREATMENT:

Soaking/washing;
Ointment;
Bandages;
Socks & shoes;
Exercises & elevation

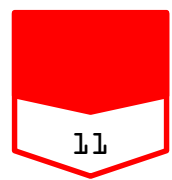




TRANSLATING RESEARCH INTO ACTION

- In 2011, WHO included podoconiosis on the NTD List
- The international community has responded.
- there is a growing political and community commitment from several endemic countries-

Ethiopian Government developed National network, identified podoconiosis among its eight priority NTDs and integrated in the 2013 – 2015 & 2016 - 2020 NTD master plan



TRANSLATION OF RESEARCH National & International Advocacy

FEB
2011

- Podoconiosis included in WHO list of NTDs.

MAR
2012

- Launch of *Footwork*, the International Podoconiosis Initiative.

OCT
2012

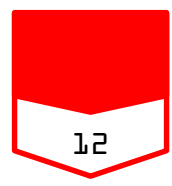
- Registration of National Podoconiosis Action Network (NaPAN) in Ethiopia.

JUNE
2013

- Podoconiosis one of 8 NTDs prioritised in Ethiopian Master Plan for NTD Control.

OCT
2017

- NaPAN's Preventing Podo Project treated 70,000 patients.



UNIVERSAL HEALTH COVERAGE

Pododermatitis Prevention

- Consistent use of shoes, regular foot hygiene and covering floors are the key preventive strategies against pododermatitis.
- Simple, But financial constraints, lack of appropriate shoes sociocultural factors are barrier to consistent use
- innovative approaches are needed to make shoes affordable and used as health interventions.



UNIVERSAL HEALTH COVERAGE

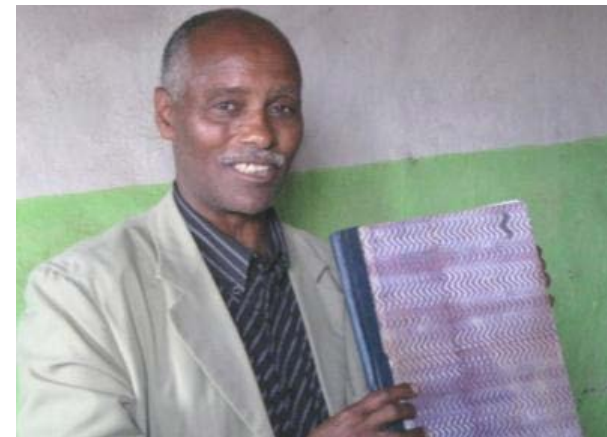
Podocniosis Treatment

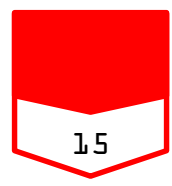
- Clinical services are currently provided by just a few faith-based and nongovernmental organizations
- Provision of free-of-charge/low-cost prevention and treatment, through government-led programmes is critical for those in need
- Endemic countries/communities must have health providers skilled in podioconiosis Management



UNIVERSAL HEALTH COVERAGE Capacity

- Universities and Medical Training should develop capacity to study endemic disease, including podioconiosis Civil Society Organisations should get involved in control of endemic diseases including podoconiosis
- In Ethiopia, Addis Ababa Public Health students and Mossy Foot Association participate in prevention/treatment service provision and research





- Endemic countries and partners must launch multisectorial to prevent and treat podioconiosis
- WHO will be there to provide support in the implementation multisectorial actions and strategies



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