

## Conditions in the Most Endemic Countries

**Angola** is one of the most leprosy endemic countries in the WHO Africa Region, with a prevalence rate of 3.64 cases per 10,000 inhabitants and many highly endemic and difficult to access provinces. The general populations in these areas have little awareness of leprosy, which contributes to maintaining the stigma attached to the disease.

Several factors would help in achieving the goal of elimination, including the end of civil strife, greater government involvement in reconstruction and development efforts — including improved technical training of human resources in the health sector and greater financial input toward control and elimination of diseases.



Children in Camakupa, Bie Province, Angola

The most remarkable achievement in Angola is the geographic coverage of the program. In 1999, this coverage was less than 25 percent due to war and the absence of political commitment. Within two years, the program has accomplished a great deal, training all health staff at provincial and municipal levels, and organizing leprosy case-management activities at all public and private health facilities.

The first concrete result of this achievement has been an increase in detection, from 1,840 in 1999, to 4,272 new cases in 2002, resulting in a detection rate of 29.63/100,000.

**Madagascar** has some of the most difficult to access areas in the WHO Africa Region. Some 60 percent of the country remains relatively isolated due to mountains, an absence of roads and the rainy season.

The health system is built around 2,500 peripheral health centers, which are divided among 111 health districts.

The program was largely suspended for four years due to difficulties in collaborating with the Ministry of Health. Despite the presence of NGOs during this period, little progress has been achieved.

With the resumption of collaboration with WHO,

an appropriate plan for the elimination of leprosy has been established. Priority is given to human resources and clarification of the leprosy situation in the country. Much has been done in the past year in terms of the clearing of leprosy registers, training of health workers and reorganization of case management activities and reports.

**Mozambique** is the third most endemic country in the WHO Africa Region. At the end of 2002, the prevalence rate was 3.63/10,000.

In the provinces, MDT (Multi-Drug Therapy) coverage is low, primarily due to the lack of general health system coverage.

Mozambique will likely achieve elimination in time if higher priority is given to case management activities. The high level of political commitment the program benefited from last year must be maintained.

Mozambique registered a relapse-rate of 63 percent last year. This situation needs more assessment. The experience of village health workers who deal with leprosy needs to be evaluated and the way forward defined in order to improve the implementation of leprosy elimination activities in highly-endemic areas.

**Perspective** — The elimination of leprosy at a national level in all countries throughout the WHO African Region is achievable by the year 2005. The recent visits to Angola and Madagascar jointly organized by the WHO Regional Director, Yohei Sasakawa, and the president of the Association Francaise Raoul Follereau have been very helpful in strengthening the political commitment to the elimination effort.

Better coordination among partners to boost isolated efforts will speed the achievement of the elimination of leprosy. □



Many public buildings lay in ruins in the aftermath of Angola's civil war. (Kuito City, Bie Province)