

DJIBOUTI

Neglected tropical disease treatment report 2017



NEGLECTED TROPICAL DISEASES

Neglected tropical diseases (NTDs) are a group of preventable and treatable diseases that affect 1.6 billion of the world's poorest people – 40% of whom live in Africa. They cause disfigurement, disability and even death. They stop children from going to school and rob millions of adults of their most productive years, depriving developing economies of billions of dollars in income.

Defeating NTDs is not just the right thing to do. It is a social justice issue and will be essential to deliver the Sustainable Development Goals (SDGs) and Agenda 2063, which amongst other things aims to free Africa of its heavy burden of disease, disability and premature death.



“In 2018 we became the first sub-Saharan African country to eliminate blinding trachoma. A painful and disabling disease. We cannot achieve the SDGs without addressing the needs of the poorest members of our society who are disproportionately affected by neglected tropical diseases. I urge my fellow African leaders to prioritise ending these diseases of poverty on the continent. We have shown that it can be done.”

Nana Akufo-Addo
President of the Republic of Ghana

DJIBOUTI

This country profile provides an overview of Djibouti’s progress in reaching everyone in need of treatment for the five most common NTDs, based on 2017 data reported to the World Health Organization (WHO) by the country. This information is used to calculate the NTD index that appears in the African Leaders Malaria Alliance (ALMA) Scorecard for Accountability and Action, and is used for SDG 3.3 and Universal Health Coverage (UHC) reporting.



NTD mass treatment coverage index



	People who received treatment	People who did not receive treatment
2017	Not reported	Not reported
	2016: 0 million people	2016: 0.11 million people

ELEPHANTIASIS	BLINDING TRACHOMA	INTESTINAL WORMS	BILHARZIA	RIVER BLINDNESS
Not applicable	Not applicable	Not reported	Not applicable	Not applicable

*This includes all countries in Africa that are endemic for at least one of the five NTDs

ABOUT THE DISEASES



ELEPHANTIASIS (LYMPHATIC FILARIASIS)

This is a mosquito-transmitted disease that attacks the blood circulation system. It causes fever and, in time, severe swelling of the lower limbs and, in men, swelling of the scrotum. Elephantiasis is painful, disfiguring and can lead to stigma. It also limits mobility.



BLINDING TRACHOMA

This is an eye disease caused by bacteria, which causes the eyelashes to grow inwards, causing painful scratching and ultimately blindness. Infection spreads through personal contact (via hands, clothes or bedding) and by flies that have been in contact with discharge from the eyes or nose of an infected person.



INTESTINAL WORMS

A parasitic disease that causes worms to multiply inside the intestines. The worms feed on nutrients from food consumed by people, so causing malnutrition or stunted growth. Intestinal worms are spread by human waste, but also through soil or water where people go to the toilet in the open. The disease is known to scientists as soil-transmitted helminths.



BILHARZIA

This disease is sometimes known as snail fever or schistosomiasis. It is caused by waterborne snails carrying parasites. The parasites penetrate the skin and can cause distended bellies, malnutrition, and, if untreated, can damage women's reproductive organs, tripling the risk of contracting HIV.



RIVER BLINDNESS

This is an infection from parasitic worms spread by blackflies, which are found near fast-flowing rivers and streams. It causes disfiguring skin conditions and sight loss. The disease is known to scientists as onchocerciasis.

ELEPHANTIASIS	2017		2016
	PEOPLE NEEDING TREATMENT	PEOPLE RECEIVING TREATMENT	
	Not applicable	Not applicable	Not applicable

BLINDING TRACHOMA	2017		2016
	PEOPLE NEEDING TREATMENT	PEOPLE RECEIVING TREATMENT	
	Not applicable	Not applicable	Not applicable

INTESTINAL WORMS	2017		2016
	CHILDREN NEEDING TREATMENT	CHILDREN RECEIVING TREATMENT	
	0.11m	Not reported	Not reported

BILHARZIA	2017		2016
	PEOPLE NEEDING TREATMENT	PEOPLE RECEIVING TREATMENT	
	Not applicable	Not applicable	Not applicable

RIVER BLINDNESS	2017		2016
	PEOPLE NEEDING TREATMENT	PEOPLE RECEIVING TREATMENT	
	Not applicable	Not applicable	Not applicable

COUNTRY COVERAGE INDEX

COUNTRY	2016	2017	▲▼
Algeria	Not applicable	86	
Angola	7	10	▲
Benin	58	77	▲
Botswana	2	2	=
Burkina Faso	88	88	=
Burundi	16	17	▲
Cabo Verde	61	No report	
Cameroon	58	83	▲
Central African Republic	32	1	▼
Chad	10	1	▼
Comoros	0	79	▲
Congo	16	30	▲
Cote d'Ivoire	69	75	▲
Democratic Republic of the Congo	44	54	▲
Djibouti	0	No report	
Egypt	10	10	=
Equatorial Guinea	0	No report	
Eritrea	31	64	▲
eSwatini (Swaziland)	90	92	▲
Ethiopia	51	73	▲
Gabon	1	No report	
Gambia	8	72	▲
Ghana	70	37	▼
Guinea	65	86	▲
Guinea-Bissau	1	20	▲
Kenya	43	40	▼
Lesotho	0	80	▲
Liberia	62	71	▲
Libya	Not applicable	Not applicable	

COUNTRY	2016	2017	
Madagascar	56	9	▼
Malawi	89	91	▲
Mali	35	90	▲
Mauritania	0	3	▲
Mauritius	Not applicable	Not applicable	
Morocco	Not applicable	Not applicable	
Mozambique	65	12	▼
Namibia	1	No report	
Niger	0	64	▲
Nigeria	48	60	▲
Rwanda	3	78	▲
Sao Tome and Principe	8	No report	
Senegal	44	66	▲
Seychelles	Not applicable	Not applicable	
Sierra Leone	81	85	▲
Somalia	0	40	▲
South Africa	3	2	▼
South Sudan	3	1	▼
Sudan	19	12	▼
Togo	77	84	▲
Tunisia	Not applicable	Not applicable	
Uganda	64	68	▲
United Republic of Tanzania	47	88	▲
Zambia	51	56	▲
Zimbabwe	44	12	▼

Not applicable	No report	Not on track	Progressing	On track
Mass treatment not required	No report submitted	Less than 25% coverage	25% to 74% coverage	75% or more coverage

AFRICA CAN LEAD THE FIGHT AGAINST NTDS

Call to the African Union

1 Establish a task force on NTDS at the African Union

The goal of the Africa Health Strategy (AHS) 2016–2030 is to ensure healthy lives and promote the well-being for all in Africa, in the context of ‘Agenda 2063: The Africa We Want’ and the SDGs. Increasing investments in health and reducing the burden of disease are key objectives in the AHS. Seeking to end NTDS is seen as a priority to achieve the strategy.

This task force will facilitate knowledge sharing across the continent, whilst ensuring that drug commitments from pharmaceutical companies are fully utilised every year and that global elimination targets are met.

2 Set a specific target for Africa towards WHO’s goal of eliminating at least one NTD in 30 countries

194 member states have agreed to WHO’s 5-year strategic plan. This sets a target to eliminate at least one NTD in 30 countries between 2019 and 2023, globally. The African Union can show leadership and support SDG 3.3 by setting a specific target for Africa towards this global goal, which can be resourced and monitored.

3 Commit African Union member states to provide domestic health financing towards their NTD programmes

NTD treatment and prevention is highly cost-effective. The most common NTDS can be mass treated at a cost of less than US\$0.50 per person, per treatment.

Most drugs required for NTD treatment are donated by the pharmaceutical industry. This generous support is valued at US\$17.8 billion to 2020, and was recognized with a Guinness World Record in January 2017. Yet not everyone who needs treatment receives it. For every US\$1 invested in delivery, US\$26 of drugs are donated.

4

Recognize and celebrate countries as they achieve elimination goals

A number of countries have demonstrated that eliminating NTDs is not just a pipe dream.

- Ghana is the latest country in Africa to have achieved elimination of trachoma as a public health problem, joining Morocco, which was validated in 2016
- Togo and Egypt have been validated by WHO as having eliminated elephantiasis as a public health problem, the only two countries on the continent to have achieved this goal
- Kenya was validated by WHO for the elimination of Guinea worm disease, joining Cote D'Ivoire, Niger, Nigeria and Ghana

Priorities for progress in Djibouti

- Djibouti should take steps to confirm the epidemiological situation of intestinal worms and bilharzia, in order to determine the extent to which interventions for preventive chemotherapy are required.
- Should Djibouti wish to submit a dossier to be validated as having eliminated trachoma as a public health problem, it should begin compiling data using the WHO Dossier preparation guidelines.
- Support the Expanded Special Project for Elimination of Neglected Tropical Diseases (ESPEN) established by WHO AFRO region for the elimination of these five diseases.

CALCULATING THE INDEX

The index provides an average of coverage across the five diseases amenable to mass treatment. It has been calculated using the geometric mean, which prevents high coverage of one disease from compensating for very low coverage in other diseases. The aim is to provide countries with a sense of how well they are delivering integrated treatment across diseases. This is a common method used to measure a country's progress across multiple elements, including the Human Development Index.

The geometric mean cannot be calculated if an element is zero. We use the following values to deal with this:

- If a disease has 0% treatment coverage in a country, it is calculated as 0.1%
- If a country has not reported coverage for a disease, it is calculated as 0.1%
- If a country has eliminated a disease, it is calculated as 100%
- If a disease is labelled as not applicable for a country, it is not used in the calculation

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UNITING TO COMBAT NTDS

A coalition of private and public sector organisations working together to beat neglected tropical diseases and improve over a billion lives.

EXPANDED SPECIAL PROJECT FOR ELIMINATION OF NTDS (ESPEN)

In an unprecedented organizational move to reduce the burden of NTDs, the World Health Organization Office for Africa created ESPEN in order to mobilize political, technical and financial resources to meet the London Declaration targets in Africa.

LEARN MORE ABOUT THE NTD COUNTRY PROFILES

Contact Uniting to Combat NTDs for more information:
www.unitingtocombatntds.org/africa
info@combatntds.org
[@combatNTDs](https://twitter.com/combatNTDs)



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Africa



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