



PARALLEL SESSION 2.5

REDUCING THE GAP: ADDRESSING NEGLECTED DISEASE; NEGLECTED POPULATIONS



| BACKGROUND

Preventable, endemic diseases are rarely prioritized for surveillance as they do not pose a risk of epidemic or pandemic outbreak. This is a failing on two levels: (1) the presence of preventable diseases acts an indicator of the overall state of the health system; and (2) the knowledge of 'usual' allows for detection of the unusual. Strengthening surveillance and other systems for endemic diseases, infectious or otherwise, provides necessary infrastructure to combat the existing and target the emerging. In addition, most of these subsisting populations live in close proximity with their animals and experience a double burden, disease in their animals and disease in their families and communities. A pro-poor initiative on a massive scale, control of NTDs has much to offer in terms of what can be adapted, innovated and built in low-resource settings most burdened by NTDs in an agenda that makes poverty alleviation its overarching objective and aims to leave no one behind.



The success celebrated for some of the NTDs shows that it is possible to build private-public partnerships that lead to concrete results, such as the Global Partners' Meeting on NTDs based on the theme "Collaborate. Accelerate. Eliminate". This encapsulates an exemplary informal collaboration that marks a 'turning point' in global efforts to control and eliminate poverty-related diseases.

The discussion will center on forging cross-sectoral partnerships to tackle NTDs and "diseases of poverty", and will include a range of elements crucial to an effective collaboration across sectors such as financing, research and development, production and delivery of vaccinations and treatment, disease surveillance, role of local communities and other actors on the field. It will elucidate the incentives of building effective cross-sectoral and public-private partnerships by using the case of NTDs. Lessons may be derived from the NTD experience to other areas requiring cross-sectoral partnerships in health where a population-based intervention is appropriate.

| OBJECTIVES

Marginalized and neglected populations bear the epidemic risk of infectious diseases especially neglected tropical diseases. They are more exposed to disease vectors as well as have less access to effective and timely health care. Without addressing prevention, detection and response among this segment of the population, the world cannot be safe from infectious disease. This session aims to discuss successful examples of cross-sectoral partnerships across human and animal health sectors to tackle "diseases of poverty" including financing, vaccine development, and distribution as well as delivery. It will also address how to target this neglected segment of the population against the threat of infectious diseases. Intervention based approaches through specific diseases can be discussed as well as tackling access and inclusion into the health system through a social determinants approach. Tackling NTDs is addressing the causes of poverty and the pathways to reach the poorest and most vulnerable in society those that will have slower access to universal health coverage and would be a pathway to strengthen health systems, human, animal and environmental.





Panelist

Amila Gunesequera

Medical Officer in charge of Rabies Treatment

National Hospital of Sri Lanka
Sri Lanka

Amila Gunesequera, MD from Colombo, Sri Lanka. Graduated from Vinnitsa National Medical University of Ukraine. Early career was started as a health administrator and Medical officer of preventive health. Working as a lecturer in National Institute of Health Sciences being the premier public health training Institute of Sri Lanka developed a passion for rabies prevention following an own bitter experience. First ever clinical unit dedicated to rabies post exposure treatment was designed and established alone with a single nurse in 2005, which became the model unit in the country and training centre for rabies prophylaxis. President's award for rabies research was awarded in 2009. Rabies post exposure software was created with a software experts which supports real time data sharing with other such clinics throughout the country. Experience and the knowledge is shared as an expert in WHO and in other health Institutions in other countries. Knowledge can save a life is the motto of professional carrier which is dedicated to health education of staff and public. Currently working as the program officer in the rabies control in the Ministry of Health, Sri Lanka