

WORLD HEALTH ORGANIZATION
Regional Office for the Eastern Mediterranean
ORGANISATION MONDIALE DE LA SANTE
Bureau régional de la Méditerranée orientale



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المكتب الإقليمي شرق المتوسط

In the name of God, the Compassionate, the Merciful

Message from

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REGIONAL DIRECTOR

WHO EASTERN MEDITERRANEAN REGION

to the

**FOURTH SUB-REGIONAL MEETING ON THE TUBERCULOSIS
ELIMINATION INITIATIVE IN THE MEMBER STATES OF THE
GULF COOPERATION COUNCIL**

Kuwait, Kuwait, 16–18 November 1999

Distinguished Guests, Dear Colleagues and Friends,

It gives me great pleasure to welcome you all to this Fourth Sub-regional Meeting on the Tuberculosis Elimination Initiative in the Member States of the Gulf Cooperation Council. I wish first to acknowledge with great appreciation the role of the Government of Kuwait in hosting this important meeting. My special gratitude is due to His Excellency the Minister of Public Health of Kuwait and the staff of the Ministry of Public Health for their support and the excellent arrangements for this meeting.

Dear Colleagues,

Almost all of us who are here today have attended the previous meetings on this subject, and therefore I am sure that you all agree on the importance of the Tuberculosis Elimination initiative in the Member States of the Gulf Cooperation Council. This is the first joint elimination initiative in the field of tuberculosis control in the world. All six Member States of the Gulf Cooperation Council met at the first meeting of the Initiative in Muscat, Oman, in December 1996. The strategic plan for the tuberculosis elimination was set and, accordingly, national plans of action were developed by the participants.

As you are well aware, since its start in 1996, the Tuberculosis Elimination Initiative has made good progress. There has been strong political commitment to the Initiative from the participating Member States, as well as from the Executive Committee of the Health Ministers Council for the Gulf Cooperation Council States. Tuberculosis elimination is now the national policy on tuberculosis control throughout the Member States of the Gulf Cooperation Council. DOTS ALL OVER, which was recognized as the first and most important step in the Initiative, has become the national strategy of tuberculosis control and all the countries in the Initiative have rigorously been implementing this strategy.

However, review of the implementation of the strategic plan shows that DOTS ALL OVER has only been accomplished by Oman, in 1996 and by Bahrain and Qatar, in 1997. In other words, only three countries accomplished the interim target of DOTS ALL OVER before the target year, namely 1997. Kuwait achieved it in 1998. Saudi Arabia and the United Arab Emirates had not achieved DOTS ALL OVER as of last year's meeting of the Initiative, which was in November 1998. I do hope to hear good news from Saudi Arabia and the United Arab Emirates in this meeting.

According to the information given at last year's meeting of the Initiative, Oman and Qatar have achieved a cure rate of more than 90%. The remaining four countries, Bahrain, Kuwait, Saudi Arabia and the United Arab Emirates are expected to achieve a 90% cure rate before the end of this year.

Also according to the information collected in the last year's meeting, all participating countries have reduced the incidence of smear-positive cases to a range of 4 to 7 per 100 000 population among nationals. This is good progress. However, we have to consider the possibility of under-reporting of tuberculosis cases, particularly in view of the presence of different partners in the field of tuberculosis control. In other words, we have to critically review whether all partners in tuberculosis control notify tuberculosis cases to national tuberculosis programmes.

Dear Colleagues,

This review shows that the Initiative has made some progress, however, the speed of progress is not as fast as expected. DOTS ALL OVER should have been accomplished throughout the participating countries by now. Cure rate and treatment success rate need to be increased to 90% throughout the participating countries. We have to make sure that tuberculosis is under real control throughout the Member States of the Gulf Cooperation Council. As we know, tuberculosis does not respect any man-made borders. There is no room for complacency in our activities for tuberculosis control.

The fourth meeting on the Tuberculosis Elimination Initiative has therefore been organized with three technical objectives to achieve. First is to monitor the implementation of the national plans of action for the initiative prepared during the last meeting. Second is to monitor the implementation of the recommendations of the last meeting. Third is to prepare plans of action for further promotion of the tuberculosis elimination initiative in 2000 and 2001. We also need to establish effective intersectoral collaboration for tuberculosis control throughout the participating countries. As I stated in previous meetings, these objectives will never be achieved solely through the efforts of national tuberculosis control programmes.

More important is the need to discuss the integration of the Initiative in the existing institutionalized mechanism of health policies and services in the Member States of the Gulf Cooperation Council. This issue was raised more than once in previous meetings, and it was agreed that a Tuberculosis Elimination Coordination

Committee needs to be established under the Executive Committee of the Health Ministers Council for the Gulf Cooperation Council States. I am very pleased to see the representative of the Executive Committee in the meeting and hope that we can elaborate on this point during the next three days. This is very important in order to ensure the ownership and sustainability of the Initiative.

Dear Colleagues,

I am aware that, in order to be able to carry out these important tasks, you all have a full programme ahead of you. I look forward to receiving your recommendations and it only remains for me to wish you a productive session and a pleasant stay in Kuwait.