

Review

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WHO global campaigns: A way forward in addressing public health importance of common neurological disorders

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Fostering collaboration between scientific and professional groups that contribute to the advancement of global public health is one of the main constitutional responsibilities of the World Health Organization (WHO) [1]. In line with this responsibility, WHO has organized fifteen annual meetings with numerous non-governmental organizations (NGOs) concerned with prevention and treatment of neurological disorders and created a unique international forum for the exchange of knowledge and information on public health aspects of neurological disorders. These WHO/NGO annual gatherings have also provided a useful platform for initiating international collaborative projects including two global campaigns on neurological disorders, which mobilized health professionals, governments and general public in numerous countries the world over [2].

The first large international collaborative activity on neurological disorders carried out by WHO and NGOs was a Global Initiative on Neurology and Public Health. This joint project began in early 1990s aiming to draw attention of health professionals, health administrators and general public to the frequency, severity and consequences of common neurological disorders and to have them acknowledged as public health problems by the Ministries of Health of some 190 WHO Member States. In order to achieve these objectives, the Global Initiative promoted the existing possibilities for the prevention of neurological disorders on a large-scale basis and emphasized that neurological treatment and care should be provided at all levels of health care and especially in primary care settings, where a great majority of patients with neurological disorders in different parts of the world receive their treatment and care [2]. In the context of this Global Initiative,

WHO and NGOs jointly organized a series of symposia at numerous international and national conferences covering a plethora of public health aspects of neurological disorders such as epidemiology; assessment of costs and needs; organization of services; reduction of family and community burden; education and training; research on risk factors; and planing of programs and policies for control of neurological disorders [3]. It is interesting to note that this Global Initiative had no WHO or other budget behind it and was mainly running on the enthusiasm of its coordinators and participants. Nevertheless, the project achieved its objectives and served as a springboard to another WHO/NGO global public health endeavor, which came at the time of change in the leadership of WHO.

The appointment of Dr Gro Harlem Brundtland as WHO Director-General in 1998 brought a significant change to the orientation of WHO programs and activities. Instead of dealing simultaneously with a variety of global issues of public health importance, the WHO units were asked to prioritize ongoing projects and focus their activities on a limited number of major public health problems including serious and disabling disorders that clearly require WHO action and where such an action can bring about a global change in not too distant future [4,5]. Following this new orientation and approach, the WHO Unit on Neurological Disorders and Neuroscience decided to put an emphasis on public health aspects of epilepsy, seeing it as the most common serious neurological disorder and a public health problem affecting all ages, races, social classes and countries. In partnership with the International League Against Epilepsy (ILAE, a global professional NGO) and the International Bureau for Epilepsy

(IBE, a global lay NGO), WHO launched a Global Campaign Against Epilepsy under a symbolic title "Out of the Shadows". The rationale for this joint WHO/ILAE/IBE initiative has been based on the following public health facts: (i) there are currently 50 million people with epilepsy and the newly registered cases of epilepsy increase this number by two million every year; (ii) 85% of people with epilepsy live in developing countries and 90% of them receive no diagnosis or treatment; (iii) epilepsy is not difficult to diagnose if health personnel have received minimum level of training and it can be effectively treated with safe and inexpensive medications (e.g., in many countries, the main antiepileptic drug phenobarbiton can be produced and supplied for as little as \$5 per person per year); (iv) people with epilepsy are still viewed with fear, suspicion and misunderstanding and are also subject to horrendous stigma; and (v) epilepsy imposes enormous physical, psychological, social and economic burdens on individuals, families and communities all over the world [5].

In order to address this grim public health picture, the WHO/ILAE/IBE Global Campaign Against Epilepsy has set the following objectives: (i) to increase public and professional awareness of epilepsy as a universal and treatable neurological disorder; (ii) to raise epilepsy on to a new plane of acceptability in the public domain; (iii) to promote public and professional education about epilepsy; (iv) to identify the needs of people with epilepsy on a national and regional basis; (v) to encourage Governments and Departments of Health to address the needs of people with epilepsy, including awareness, education, diagnosis, treatment, care, services and prevention [6].

The First Phase of the Global Campaign was focused on raising general awareness and understanding of epilepsy and this was done through organization of several regional conferences, which issued regional declarations on epilepsy and involved about 50 developing and developed countries across Europe, Africa, South-East Asia and North and South America. The Second Phase of the Global Campaign is underway and is aiming to initiate and implement a series of regional and national demonstration projects that would create models of good practice in providing services to people with epilepsy worldwide.

In launching the Second Phase of the Global Campaign, Dr Gro Harlem Brundtland, at that time the WHO Director-General made the following statement: "The collaboration between the International Bureau for Epilepsy, the International League Against Epilepsy and WHO has shown that when people with different backgrounds and roles come together with a shared purpose, creativity is released and expertise is used in innovative and constructive ways" [7]. Indeed, it seems that WHO/NGO partner-

ship offers a model of successful international collaboration in dealing with problems and disorders of global public health importance. In May 2003, WHO got a new Director-General (Dr Lee Jong-wook) and it remains to be seen if and when will this so far impressively successful example of WHO/NGO global partnership be extended on to other common and disabling neurological disorders and what mechanisms and criteria will be used for their selection and prioritization.

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