

countries most affected, such as China and India. More countries are asking us to be more active, not only in Asia, but also in Africa, such as Kenya and Sudan.

Q: The tobacco control convention has come into force. What needs to be done now to make sure that countries adopt and enforce it?

A: We still need to convince countries which have not yet ratified the convention to do so. We need to have countries that have ratified the convention implement it. This convention is a great achievement, but there is still a lot of work to do. Countries are developing their national tobacco control policies. Developing countries are taking this very seriously.

Q: Are you making any headway persuading governments to adopt a more inclusive approach to disabled people, including the mentally ill?

A: This is a very important part of our work. Many countries are already willing to reintegrate people with mental illness into the community, such as Lesotho and Thailand. First you need the political will and commitment.

Then, you need to make things happen, develop a national policy and implement it.

Q: What does the cluster hope to achieve by publishing a global report on Preventing chronic diseases later this year?

A: This is to give a strong advocacy instrument to ministers of health and other stakeholders in other ministries. You can't have a more appropriate diet if you don't have an integrated approach to nutrition, agriculture and trade. We also need to involve other stakeholders, such as the private sector. This report will be part of our strategy and will really help us strengthen the importance of taking action now.

Q: What can we learn from the developed world about fighting chronic disease?

A: We have learned that prevention works and that it is crucial to invest in it. We should not neglect the management

and treatment of chronic diseases. We already have many people suffering from these conditions in developing countries, so access to effective and affordable treatment is becoming more and more urgent. We would like to scale up access to treatment for chronic diseases in countries facing a huge problem with them. An integrated approach is important, so that a number of diseases such as cancer and diabetes can be addressed by tackling common risk factors.

Q: Which countries have tackled these issues and which have been successful?

A: No one country has been a leader in fighting all chronic disease; however, we have some very positive examples of efforts in Cuba, Finland, and Poland.

One of the challenges is to make things happen at the country level. That's where we are focusing all our efforts at the moment by building capacity in countries. www.who.int/nmh ■

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Recent news from WHO

- Bill Gates, Co-Founder of the Bill and Melinda Gates Foundation, was guest speaker at the opening of the 58th World Health Assembly (WHA) on **16 May**. For full coverage of the WHA see next issue of the *Bulletin* on 1 July.
- Six million doses of polio vaccine arrived in Yemen during the week beginning **16 May** in an emergency effort to stop a polio outbreak there. Ten WHO experts were working with national authorities to finalize plans for the immunization campaign and to train vaccinators and supervisors. For more information see: www.polioeradication.org
- A conference on disaster response in the wake of the 26 December 2004 earthquake and tsunami concluded that the international community needs to define clear responsibilities and operating procedures for military and civilian organizations so that they can provide a more effective response to disasters. The conference in the Thai resort of Phuket on 4–6 May called for clear procedures to respond to psychological trauma and mass fatalities caused by disasters. <http://www.who.int/hac/events/tsunamiconf/en/>
- The Stop TB Partnership unveiled a new plan to halt Africa's spiralling tuberculosis epidemic, at a meeting in Addis Ababa, Ethiopia, on 4 May. At the launch, African and international health and development officials called for more political commitment to fight the scourge and to make tuberculosis control an integral part of the regional health and development agenda. <http://www.stoptb.org/>
- WHO, the IAEA (International Atomic Energy Agency) and other agencies participated in a high-profile preparedness exercise by simulating an accident at a nuclear power plant in Romania on 11–12 May. It was the second exercise of this kind since the 1986 Chernobyl disaster.
- Professor Lincoln Chen, founder of the Global Equity Initiative at Harvard University, was appointed as WHO's Special Envoy on Human Resources for Health on **11 May**. Professor Chen co-chaired the Joint Learning Initiative on Human Resources for Health. Its landmark report, *Human resources for health: overcoming the crisis*, highlights the dire shortage of health workers in sub-Saharan Africa as a major obstacle to development. Human resources for health will be the subject of World Health Day and the *World health report* in 2006.
- WHO published a new report on **6 May** that estimates that 10 key risk factors account for more than 40% of the 57 million deaths that occur worldwide annually and one-third of global loss of healthy life years. The report, entitled *Comparative quantification of health risks*, lists these as: childhood and maternal underweight; unsafe sex; high blood pressure; tobacco; alcohol; unsafe water, sanitation and hygiene; high cholesterol; indoor smoke from solid fuels; iron deficiency and overweight/obesity. www.who.int/publications/cra
- International experts gathered at a meeting **27–29 April** at WHO in Geneva, to review all the available scientific and other evidence on hand hygiene and were invited to contribute to the preparation of the draft *WHO guidelines on hand hygiene in health care*.
- The *World malaria report 2005* was launched on **25 April** with a call for better cooperation between agencies, donors, governments and nongovernmental organizations to tackle the scourge that affects mainly Africa. The report found that malaria became more prevalent in Africa in the 1980s and 1990s due to increasing parasite resistance to common antimalarial drugs. Over the last decade, the disease also reemerged in south-east Asia, as well as parts of Central Asian and Transcaucasian countries. It is the Rollback Malaria Partnership's first comprehensive report on progress in malaria control in 107 countries and territories. <http://rbm.who.int/wmr2005/>

For more about these and other WHO news items please see: <http://www.who.int/mediacentre/news/en/>