



Accelerating the eradication of dracunculiasis (Guinea-worm disease)

The Executive Board, having considered the report by the Director-General,¹

Decided to recommend to the Seventy-eighth World Health Assembly the adoption of the following resolution:

The Seventy-eighth World Health Assembly,

Having considered the report by the Director-General;

Recalling previous resolutions WHA39.21 (1986), WHA42.29 (1989), WHA44.5 (1991), WHA50.35 (1997), WHA57.9 (2004) and WHA64.16 (2011) on the elimination and eradication of dracunculiasis;

Noting the significant progress made towards the eradication of dracunculiasis, with human cases reduced from an estimated 3.5 million in 1986 to only 13 in 2024 (provisional) – a reduction of over 99% since the global initiative began;

Acknowledging that, due to the detection of animal infections, the definition of worldwide eradication of dracunculiasis was revised in 2023 by the International Commission for the Certification of Dracunculiasis Eradication to be the confirmed absence of the emergence of adult female worms in humans and animals for three consecutive years or longer at the global level;

Noting that the emergence of dracunculiasis in animals, especially domestic dogs, since 2012 has complicated eradication efforts, but that infections in dogs have declined annually since 2019;

Appreciating the role of health ministers in coordinating successful efforts to eliminate dracunculiasis from 17 countries and to obtain the certification of elimination from 200 countries, areas and territories, including 188 WHO Member States, with only six countries still to be certified to date;

¹ Document EB156/9.

Acknowledging the commitment by countries in which dracunculiasis is endemic, including the Abu Dhabi Declaration on the Eradication of Guinea Worm Disease (2022)² and the N'Djamena Declaration on interrupting the transmission of dracunculiasis;³

Recognizing that dracunculiasis persists due to infections in animals and a lack of access to safe water and healthcare services, which is further aggravated by other factors such as health and humanitarian emergencies and cross-border movement, and that this, together with insufficient surveillance and community ownership, poses a potential risk to eradication goals;

Reaffirming WHO's commitment to achieving the complete eradication of dracunculiasis, in line with the global targets of control and elimination set by the road map for neglected tropical diseases 2021–2030;

Recognizing that strong cross-border collaboration, coordination and information-sharing among Member States, including the effective implementation of a multisectoral approach, are essential to interrupting the transmission of dracunculiasis,

1. ENDORSES the strategy for Member States in which dracunculiasis is endemic:

- (1) to maintain community-based surveillance, especially in endemic and at-risk communities;
- (2) to carry out proactive tethering of domestic animals in endemic communities;
- (3) to bury aquatic waste in endemic and at-risk communities to prevent consumption by animals and resulting infections;
- (4) to effectively treat drinking-water by distributing cloth and pipe filters and support education in endemic and at-risk communities;
- (5) to apply temephos on a monthly basis to unsafe sources of drinking water in endemic communities;
- (6) to provide sources of safe drinking water to affected communities;
- (7) to ensure that Guinea worm specimens are laboratory confirmed and that rewards for reporting human dracunculiasis cases and for reporting and tethering infected animals are paid promptly;
- (8) to require human and animal dracunculiasis to be an immediately reportable disease and reports to be submitted from all endemic areas on at least a monthly basis;

² [NTDs and milestones: World NTD Day 2023](#). In: WHO/Home/News [website]. Geneva: World Health Organization; 2025.

³ [Three Central African countries commit to global eradication of Guinea-worm disease](#). In: WHO/Campaigns [website]. Geneva: World Health Organization; 2025.

2. URGES Member States, taking into account, and in line with, national context and priorities:
 - (1) to recommit to the eradication of Guinea worm, regardless of host, by incorporating dracunculiasis, where appropriate, into national, regional and local surveillance systems in affected countries;
 - (2) to offer political support to the remaining countries in which the disease is endemic;
 - (3) to continue providing and advocating for financial and technical support;
3. CALLS ON Member States with endemic or at-risk populations:
 - (1) to conduct ministerial visits to endemic communities to assess programme performance;
 - (2) to intensify cross-border collaboration, including joint surveillance, coordination, and information-sharing mechanisms, particularly in regions with highly mobile populations;
 - (3) to collaborate with regional and international partners to address challenges related to political instability, animal infections and resource constraints;
 - (4) to prioritize safe water access and hygiene education, in coordination with UNICEF and other partners, in endemic areas and areas at risk for dracunculiasis transmission;
 - (5) to enhance capacity-building at the national and subnational levels to ensure rapid detection and response to human and animal infections, including through a multisectoral approach;
4. CALLS ON past, present and new donors to continue to provide financial assistance to the eradication efforts;
5. REQUESTS the Director-General:
 - (1) to continue to provide technical support, and facilitate financial assistance, to Member States in their eradication efforts;
 - (2) to support the coordination of cross-border initiatives to rapidly detect and eliminate remaining dracunculiasis, including through a multisectoral approach;
 - (3) to continue to submit annual reports to the Health Assembly on the progress made and remaining challenges in the eradication of dracunculiasis;
 - (4) to present certification of eradication certificates to the remaining endemic countries when eligible at future sessions of the Health Assembly.