THE SNAKEBITE BURDEN
Snakebite envenoming kills 81,000–138,000 people every year and permanently disables 400,000 more. Women and children account for 30–45 percent of snakebite cases, and rural workers in impoverished rural communities in sub-Saharan Africa, Latin America and Asia are at greatest risk.

The majority of snakebite victims have poor access to health services. Because antivenom is often unavailable at healthcare facilities, its price is so high, and its quality often dubious, many snakebite victims seek alternative treatment from traditional healers, although it is ineffective. Snakebite patients who do receive proper medical treatment with antivenom are often forced further into poverty, even destitution, to pay for treatment.

The costs to the individual, their families, their communities and their countries are staggering.

KEYS TO REDUCING THE SUFFERING
Reducing the global burden of snakebite envenoming is possible with concerted global action. The greatest needs in low- and middle-income countries are to:

1. **Gather evidence** on snakebite incidence rates, which are believed to be massively under-reported, along with data on the price, availability and affordability of snakebite treatment, including antivenom.

2. **Improve health-seeking behaviours, prevention and first-aid treatment** by educating communities and normalising the use of snakebite prevention tools, like bed nets and footwear.

3. **Improve treatment and strengthen health systems** by ensuring consistent access to safe, effective, affordable, appropriate and quality-assured antivenom and other medical treatments.

PHOTOS: LILLIAN LINCOLN FOUNDATION/WWW.MINUTESTODIE.COM
WHAT WHO MEMBER STATES CAN DO
We encourage Member State delegations to take action on snakebite envenoming in the following ways:
1. Support the Snakebite Envenoming Resolution.
2. Write to the WHO Director-General, Dr Tedros Ghebreyesus, to ask for his commitment and strong WHO leadership to tackle snakebite envenoming.
3. Coordinate briefings with country-level stakeholders, particularly your Ministry of Health, on recent advancements on snakebite envenoming at the WHO and the WHA.
4. Advocate for a centrally-coordinated national snakebite control programme in your country.

NEED FOR THE SNAKEBITE ENVENOMING RESOLUTION
While the WHO’s action, to date, is encouraging, more must be done to ensure the prioritisation of snakebite envenoming. The 71st World Health Assembly (WHA) will be presented with the Draft Resolution on Addressing the Burden of Snakebite Envenoming. This Resolution, sponsored by the Governments of Costa Rica and Colombia in consultation with other Member States and civil society, is supported by more than 25 other countries.

Health Action International encourages Member States to pass the Snakebite Envenoming Resolution because it:
1. Urges Member States to recognise snakebite as a significant public health burden and provides them with clear guidance on how to effectively control the disease in a way that will significantly reduce national and global death and disability.
2. Clearly mandates the WHO, Member States and the international community to take coordinated action, linked with current work streams, to effectively control snakebite envenoming and catalyse action at national, regional and global levels.
3. Acknowledges the WHO’s action to address snakebite envenoming, including its decision to add snakebite envenoming to the ‘Category A’ list of NTDs and its ongoing work to develop, implement and evaluate a global Snakebite Roadmap.
4. Catalyse global health donors to allocate resources to all elements of the WHO’s Snakebite Roadmap—and to programmes, including those for civil society, to scale up snakebite envenoming research, prevention, treatment and rehabilitation.

GLOBAL ACTION ON SNAKEBITE
The World Health Organization (WHO) added snakebite envenoming to its ‘Category A’ list of neglected tropical diseases (NTDs) in 2017. Since then, the WHO’s Departments of Control of NTDs and Essential Medicines and Health Products have assembled a working group of snakebite experts and, with this group, are leading the ongoing development of a multi-stakeholder, comprehensive global strategy (known as the ‘Snakebite Roadmap’) to minimise and control snakebite death and disability around the world, particularly in low- and middle-income countries.

HEALTH ACTION INTERNATIONAL’S ROLE IN THE FIGHT AGAINST SNAKEBITE
Health Action International’s Snakebite Programme is mobilising global, national and local action on snakebite envenoming. We successfully campaigned for the inclusion of snakebite envenoming on the WHO’s ‘Category A’ list of NTDs in 2017.

Currently, we are providing technical support to the WHO in the development of its Snakebite Roadmap and to WHO Member States regarding
the Draft Resolution on Snakebite Envenoming. In sub-Saharan Africa, our Programme is developing a much-needed evidence base on snakebite incidence rates and the price, availability and affordability of antivenom by gathering data from healthcare facilities. Through the formation of multi-stakeholder groups, comprised of healthcare professionals, herpetologists, toxicologists, pharmacists and civil society representatives, this research will provide health authorities with recommendations for effective snakebite management, particularly in rural communities. Further to this, we are equipping civil society with advocacy tools based on the research evidence so they can press for greater action on snakebite. We are also raising awareness and knowledge about snakebite prevention, first-aid and treatment in snakebite-affected communities and among civil society and healthcare workers.

FOR MORE INFORMATION, CONTACT:

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Read our action plan on snakebite at bit.ly/hai-snakebite.

Find the Snakebite Resolution at bit.ly/snakebite-resolution.

HEALTH ACTION INTERNATIONAL IS AN INDEPENDENT NON-PROFIT ORGANISATION. WE ADVANCE POLICIES THAT ENABLE ACCESS TO MEDICINES AND RATIONAL MEDICINES USE THROUGH RESEARCH AND ADVOCACY.