Key Facts About Guinea Worm Disease

- Only transmitted by contaminated drinking water
- Crippling: health, agriculture, education
- Seasonal
- One year incubation period
- No vaccine or cure
- No animal reservoir
- Prevention: health education, filters, ABATE®, wells
Impact on School Attendance

% of pupils absent from school
(mean ± S.E.; N=13)

Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec

Guinea-worm season
Vacation
Vacation

1979
Guinea Worm: Interventions

Pipe Filters

Cloth Filters

Safe Water Sources

Health Education

ABATE®

E. Staub
Early Phase of Global GWEP

- 1980 Campaign conceived at CDC
- 1981 Endorsed by IDWSSD, WHO
- 1982 Conference in Washington
- 1983 India launches program
- 1985 First Nigerian National Conference
### Table 1. Reported Cases of Dracunculiasis by Year, Africa and Asia, 1980–1984

#### AFRICA

<table>
<thead>
<tr>
<th></th>
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</tr>
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<tbody>
<tr>
<td>Benin</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>4362</td>
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<tr>
<td>Burkina Faso</td>
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<td>Cameroon</td>
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<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Chad</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Ethiopia</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Gambia</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Ghana</td>
<td>2703</td>
<td>853</td>
<td>3413</td>
<td>3040</td>
<td>4244</td>
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<td>Guinea</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ivory Coast</td>
<td>6712</td>
<td>7978</td>
<td></td>
<td>2259</td>
<td></td>
</tr>
<tr>
<td>Kenya</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mali</td>
<td>816</td>
<td>777</td>
<td>401</td>
<td>428</td>
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<tr>
<td>Mauritania</td>
<td>651</td>
<td>663</td>
<td>903</td>
<td>1612</td>
<td></td>
</tr>
<tr>
<td>Niger</td>
<td>1906</td>
<td>2113</td>
<td>1530</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nigeria</td>
<td>1693</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Senegal</td>
<td>161</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sudan</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Togo</td>
<td>1748</td>
<td>951</td>
<td>2592</td>
<td></td>
<td></td>
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<tr>
<td>Uganda</td>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>

#### ASIA

<table>
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<tr>
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<th></th>
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<tbody>
<tr>
<td>India</td>
<td>2729</td>
<td>5406</td>
<td>42926</td>
<td>44819</td>
<td>40443</td>
</tr>
<tr>
<td>Pakistan</td>
<td>14155</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Saudi Arabia</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yemen</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Evidence Base at Start of Guinea Worm Eradication Program (1980)

• Knew diagnosis easy, humans only reservoir.
• Knew Soviet Union eliminated Guinea worm disease in 1930s.
• Knew big impact of high prevalence and long disability on health, agriculture, school attendance (Belcher et al. in Ghana 1975; Kale in Nigeria 1977).
• Geographic extent of disease, number of cases remaining both unknown.
Evidence Base (cont’d)

• Nigeria village 60% >> 0% prevalence in 2 years *(water supply)*. (Muller, 1971)

• India villages 97% reduction in cases 1 year after *ABATE* used (Sastry *et al*, 1975).

• Nigeria documented impact of *health education* in villages after 3 years (Akpovi *et al* 1981).

  35% (30-70%) prevalence ➞ <10% filtering and boiling water
  ➞ <20% avoidance contamination
Rural Disease and Under-Reported

GHANA GWEP - 1982 - 1989
Number of Reported GWD Cases by year

Cases (thousands)

1982: 3413
1983: 3358
1984: 3394
1985: 4435
1986: 5269
1987: 18398
1988: 70059
1989: 179483

CDC
CENTERS FOR DISEASE CONTROL
1986 : Pivotal Year

- **MAY**  World Health Assembly Resolution
- **JULY**  First African Regional Conference
- **NOVEMBER**  First Carter Center Consultation
## Dracunculiasis Eradication Campaign Program Start-Ups

<table>
<thead>
<tr>
<th>Year interventions started</th>
<th>Country</th>
<th>Active Programs (cumulative)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1983</td>
<td>India</td>
<td>1</td>
</tr>
<tr>
<td>1988</td>
<td>Pakistan</td>
<td>2</td>
</tr>
<tr>
<td>1989</td>
<td>Nigeria, Ghana</td>
<td>4</td>
</tr>
<tr>
<td>1991</td>
<td>Cameroon</td>
<td>5</td>
</tr>
<tr>
<td>1992</td>
<td>Togo, Burkina Faso, Senegal, Uganda</td>
<td>9</td>
</tr>
<tr>
<td>1993</td>
<td>Benin, Mauritania, Niger, Mali, Cote d’Ivoire</td>
<td>14</td>
</tr>
<tr>
<td>1994</td>
<td>Sudan, Kenya, Chad, Ethiopia</td>
<td>18</td>
</tr>
<tr>
<td>1995</td>
<td>Yemen</td>
<td>19</td>
</tr>
</tbody>
</table>
Evidence of Eradicability
Evidence of Eradicability

Ghana Guinea Worm Eradication Program
Impact of Water Supply on GW Incidence
Nanumba District, Northern Region

- Passive Reporting
- Sample Survey
- National Search

JICA Water Project: 159 Wells
Jan. 88 - March 89

77% Reduction

Japanese International Cooperation Agency
Health Education and Community Mobilization

- Guinea worm cloth; T-shirts; posters
- Radio; video; theaters; paintings
- Worm Weeks
- Village volunteers; schools; religious, traditional, and political leaders
Village Volunteers:  
• do surveillance,  
• health education,  
• render first aid,  
• and distribute filters.
Importance of Political Mobilization

President Jerry Rawlings of Ghana, 1988

Former US President Jimmy Carter
Former Nigerian Head of State
Gen. Yakubu Gowon

President Amadou Toumani
Toure of Mali
Geneva Declaration
World Health Assembly
May 2004
Annual Program Reviews

- Review progress
- Discuss problems
- Make recommendations
- Peer pressure
- Quality of presentations
Technical Assistance
We Use Data to Make the Right People Uncomfortable

**PERCENTAGE OF VILLAGES WITH ENDEMIC DRACUNCULIASIS HAVING ONE OR MORE CONTROL INTERVENTIONS**

(MAY 1994)

<table>
<thead>
<tr>
<th>Country</th>
<th>Total Endemic Villages</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pakistan</td>
<td>36</td>
<td>100%</td>
</tr>
<tr>
<td>India</td>
<td>576</td>
<td>100%</td>
</tr>
<tr>
<td>Nigeria</td>
<td>4087</td>
<td>100%</td>
</tr>
<tr>
<td>Ghana</td>
<td>81</td>
<td>100%</td>
</tr>
<tr>
<td>Cameroon</td>
<td>584</td>
<td>98%</td>
</tr>
<tr>
<td>Togo</td>
<td>621</td>
<td>96%</td>
</tr>
<tr>
<td>Burkina Faso</td>
<td>2621</td>
<td>93%</td>
</tr>
<tr>
<td>Benin</td>
<td>3782</td>
<td>90%</td>
</tr>
<tr>
<td>Mauritania</td>
<td>1834</td>
<td>86%</td>
</tr>
<tr>
<td>Niger</td>
<td>1608</td>
<td>79%</td>
</tr>
<tr>
<td>Senegal</td>
<td>1510</td>
<td>74%</td>
</tr>
<tr>
<td>Chad</td>
<td>106</td>
<td>74%</td>
</tr>
<tr>
<td>Cote D'Ivoire</td>
<td>3614</td>
<td>74%</td>
</tr>
<tr>
<td>Ghana</td>
<td>2280</td>
<td>74%</td>
</tr>
<tr>
<td>India</td>
<td>186</td>
<td>74%</td>
</tr>
<tr>
<td>Nigeria</td>
<td>698</td>
<td>74%</td>
</tr>
<tr>
<td>Togo</td>
<td>1158</td>
<td>74%</td>
</tr>
<tr>
<td>Niger</td>
<td>118</td>
<td>74%</td>
</tr>
<tr>
<td>Mauritania</td>
<td>452</td>
<td>74%</td>
</tr>
<tr>
<td>Uganda</td>
<td>2677</td>
<td>74%</td>
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<tr>
<td>Mali</td>
<td>1295</td>
<td>74%</td>
</tr>
<tr>
<td>Benin</td>
<td>2307</td>
<td>74%</td>
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<tr>
<td>Ethiopia</td>
<td>2307</td>
<td>63%</td>
</tr>
<tr>
<td>Senegal</td>
<td>165</td>
<td>63%</td>
</tr>
<tr>
<td>Sudan</td>
<td>285</td>
<td>63%</td>
</tr>
<tr>
<td>Kenya</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Total</td>
<td>18,404</td>
<td>63%</td>
</tr>
</tbody>
</table>

**PERCENTAGE OF VILLAGES WITH ENDEMIC DRACUNCULIASIS HAVING ONE OR MORE CONTROL INTERVENTIONS**

(OCTOBER 1993)

<table>
<thead>
<tr>
<th>Country</th>
<th>Total Endemic Villages</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pakistan</td>
<td>7</td>
<td>100%</td>
</tr>
<tr>
<td>India</td>
<td>249</td>
<td>100%</td>
</tr>
<tr>
<td>Nigeria</td>
<td>5476</td>
<td>100%</td>
</tr>
<tr>
<td>Ghana</td>
<td>4576</td>
<td>100%</td>
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<tr>
<td>Cameroon</td>
<td>18</td>
<td>100%</td>
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<tr>
<td>Togo</td>
<td>893</td>
<td>100%</td>
</tr>
<tr>
<td>Senegal</td>
<td>83</td>
<td>100%</td>
</tr>
<tr>
<td>Uganda</td>
<td>183</td>
<td>100%</td>
</tr>
<tr>
<td>Mali</td>
<td>90%</td>
<td>100%</td>
</tr>
<tr>
<td>Niger</td>
<td>1235</td>
<td>100%</td>
</tr>
<tr>
<td>Mauritania</td>
<td>511</td>
<td>100%</td>
</tr>
<tr>
<td>Cote D'Ivoire</td>
<td>2767</td>
<td>100%</td>
</tr>
<tr>
<td>Ghana</td>
<td>113</td>
<td>100%</td>
</tr>
<tr>
<td>India</td>
<td>3762</td>
<td>100%</td>
</tr>
<tr>
<td>Nigeria</td>
<td>116</td>
<td>100%</td>
</tr>
<tr>
<td>Togo</td>
<td>203</td>
<td>100%</td>
</tr>
<tr>
<td>Niger</td>
<td>370</td>
<td>100%</td>
</tr>
<tr>
<td>Mauritania</td>
<td>112</td>
<td>100%</td>
</tr>
<tr>
<td>Uganda</td>
<td>114</td>
<td>100%</td>
</tr>
<tr>
<td>Mali</td>
<td>207</td>
<td>100%</td>
</tr>
<tr>
<td>Benin</td>
<td>317</td>
<td>100%</td>
</tr>
<tr>
<td>Ethiopia</td>
<td>544</td>
<td>100%</td>
</tr>
<tr>
<td>Senegal</td>
<td>1688</td>
<td>100%</td>
</tr>
<tr>
<td>Sudan</td>
<td>168</td>
<td>100%</td>
</tr>
<tr>
<td>Kenya</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Total</td>
<td>21,039</td>
<td>100%</td>
</tr>
</tbody>
</table>

* Provisional results, national case search underway.
** Only one village with endemic dracunculiasis (2 cases) remained in Pakistan in 1993.

6/02/94
We Use Data to Inspire Competition
GUINEA WORM RACE: 2010

* Indigenous Cases only

Sudan (1698)

* Indigenous Cases only
Number of Reported Cases of Dracunculiasis by Year: 1989 - 2010

Cases ~ 3,500,000 → 1,797

Internationally 154 → 4

GWD-Endemic Villages
   23,735 → 260

GWD-Endemic Exported Cases
   20 → 4
Guinea Worm Reduction Over Time
Distribution of 969 Indigenous Cases of Dracunculiasis Reported during 2011*

* Provisional. Numbers in parentheses indicate months for which reports have been received, e.g. (8) = January-August.

Excludes 2 cases imported into Ethiopia from South Sudan.

^ Year last indigenous case reported.

As of August 2011 South Sudan reported 98% of all cases of Guinea worm disease in the world.
Mali Guinea Worm Eradication Program*
Reported Cases of Dracunculiasis From Kidal Region During 2006-2009 Resulting From One Case, Imported From Gao District; Annual Number of Villages Reporting Cases; and Cumulative Number of Cases During 2007-2009 Accruing From the Imported Case.

<table>
<thead>
<tr>
<th>Year</th>
<th>Number of Cases</th>
<th>Number of Villages</th>
<th>Cumulative Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>2006</td>
<td>1</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>2007</td>
<td>1</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>2008</td>
<td>2</td>
<td>86</td>
<td>87</td>
</tr>
<tr>
<td>2009</td>
<td>1</td>
<td>35</td>
<td>353</td>
</tr>
</tbody>
</table>

* Excludes 4 cases from Kidal Region exported to Algeria in 2007, 23 in 2008, and zero in 2009.
MALI GUINEA WORM ERADICATION PROGRAM
Villages Reporting Cases in 2010 and in 2009-2010

\[\text{Diagram of Mali and Guinea showing villages reporting cases in 2010 and 2009-2010.}\]

- Red circles = Villages reporting cases in 2010
- Blue circles = Villages reporting 2009-2010
Ethiopia Dracunculiasis Eradication Program
Villages under Active Surveillance and Villages Reporting Cases of
Dracunculiasis in 2010 and/or 2011*

Villages under surveillance (N = 73)
Villages reporting cases in 2010 and/or 2011* (N = 9)

* Provisional Jan. – April, 2011
GHANA GUINEA WORM ERADICATION PROGRAM
NUMBER OF CASES OF DRACUNCULIASIS REPORTED BY YEAR: 1989-2009*

NUMBER OF CASES

Official Target Dates for GW Eradication in Ghana


^ National case search
* Provisional
Distribution of 179,556 Cases of Dracunculiasis in 1989 and 3,172 Cases of Dracunculiasis between Jan. and July 2007*
Why Ghana?

- Geology
- Meterology
- Geography
- Ecology
- Strong traditional beliefs
- Ethnic friction

- Political and economic neglect of north
- Resistance to foreign help
- Unresponsive bureaucracy/no accountability
- Dishonesty

- Poor supervision
- Passive surveillance
- Flawed interventions
- Absent political will
Distribution of Villages Reporting Cases of Dracunculiasis in Southern Sudan: 2009 and Jan. – May 2010

- Lakes State
- Eastern Equatoria
- Central Equatoria
- Warrab State
SUDAN GUINEA WORM ERADICATION PROGRAM
CASES OF GUINEA WORM DISEASE REPORTED: 1994 - 2010

Number of cases

GW Cease Fire

7.8 million pipe filters distributed

Transmission interrupted in northern states

Comprehensive Peace Agreement

SSGWEP Formation


0 10,000 20,000 30,000 40,000 50,000 60,000 70,000 80,000 90,000 100,000 110,000 120,000 130,000

53,271 64,608 118,578 66,097 54,890 49,471 41,493 20,299 20,582 5,815 3,618 2,733 1,698
**SOUTH SUDAN GUINEA WORM ERADICATION PROGRAM**
**STATUS OF INDICATORS IN ENDEMIC VILLAGES (EVS) DURING 2006, 2008, and 2010**

<table>
<thead>
<tr>
<th>Year</th>
<th>2006</th>
<th>2008</th>
<th>2010</th>
</tr>
</thead>
<tbody>
<tr>
<td>Villages reporting indigenous cases</td>
<td>3,137</td>
<td>947</td>
<td>227</td>
</tr>
<tr>
<td>No of endemic villages</td>
<td>3,137</td>
<td>2,301</td>
<td>676</td>
</tr>
<tr>
<td>No. of cases</td>
<td>20,582</td>
<td>3,618</td>
<td>1,698</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Year 2006</th>
<th>Year 2008</th>
<th>Year 2010</th>
</tr>
</thead>
<tbody>
<tr>
<td>% Cases Contained</td>
<td>49</td>
<td>49</td>
<td>74</td>
</tr>
<tr>
<td>% EVS Reporting</td>
<td>63</td>
<td>87</td>
<td>98</td>
</tr>
<tr>
<td>% EVS Health Ed.</td>
<td>71</td>
<td>96</td>
<td>90</td>
</tr>
<tr>
<td>% EVS cloth Filters</td>
<td>47</td>
<td>79</td>
<td>98</td>
</tr>
<tr>
<td>% EVS with 80% pipe filter coverage</td>
<td>25</td>
<td>52</td>
<td>65</td>
</tr>
<tr>
<td>% EVS Vector Control</td>
<td>6</td>
<td>34</td>
<td>60</td>
</tr>
<tr>
<td>EVS 1+ safe water</td>
<td>16</td>
<td>15</td>
<td>22</td>
</tr>
</tbody>
</table>
South Sudan Guinea Worm Eradication Program
Number of Reported Cases of Dracunculiasis: 2010 - 2011*

*Provisional.
Chad Guinea Worm Eradication Program

**Reported Cases of Dracunculiasis by Date of Guinea Worm Emergence: 2010-2011**

2010 = 10 cases; None contained  
2011* = 8 cases; 3 contained (1 in February, 1 in July, and 1 in August).
Number of Indigenous Cases Reported During the Specified Period in 2010 and 2011*, and Percent Change in Cases Reported

<table>
<thead>
<tr>
<th>Country</th>
<th>Indigenous Cases Reported</th>
<th>% Change 2010 - 2011*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ghana (8)</td>
<td>8</td>
<td>-100%</td>
</tr>
<tr>
<td>Ethiopia (8)</td>
<td>16</td>
<td>-63%</td>
</tr>
<tr>
<td>South Sudan (8)</td>
<td>1396</td>
<td>-32%</td>
</tr>
<tr>
<td>Mali (8)</td>
<td>13</td>
<td>-31%</td>
</tr>
<tr>
<td>Chad (8)</td>
<td>8</td>
<td>13%</td>
</tr>
<tr>
<td>Total</td>
<td>1441</td>
<td>-33%</td>
</tr>
<tr>
<td>All countries, excluding Sudan</td>
<td>45</td>
<td>-51%</td>
</tr>
</tbody>
</table>

* Provisional. Excludes one case imported into Ethiopia from South Sudan in March.
(8) Indicates months for which reports were received, i.e., January - August.
Countries not certified free of dracunculiasis

Countries certified free of dracunculiasis

Global Status of Dracunculiasis, 2010
Changes in Strategy

1980 → 1989 → 2000

IDWSSD
Water
(village based)

Filters
Health Education
ABATE
(village based)

Pipe Filters
Case Containment
(patient based)
Benefits of Guinea Worm Eradication Program

- Reduced Guinea worm disease by >99%
- Improved agricultural production and school attendance
- Estimated economic rate of return: 29%
- Indirect improvement in infant nutrition, care, immunization
Benefits of Guinea Worm Eradication Program

• Increased provision of clean water
• Established community-based health education, mobilization and surveillance by village volunteers
• Engendered four month “Guinea Worm Cease-Fire” in Sudan
• Changed attitudes
Remaining Challenges

• 1 year incubation period
• Reproductive potential
• Insecurity
• Fundraising
Guinea Worm Disease: Reproductive Potential

- Eritrea 1968 – 1 imported case → 58 documented + 40 suspected cases next year
- India 1989 – 1 imported case → 91 cases next year
- Mali 2006 – 1 imported case → 86 cases next year
Insecurity

• 1995 Guinea Worm Cease-Fire **SUDAN**
• 1994-1995 Ethnic fighting  **GHANA**
• 1991-2003 Lord’s Resistance Army  **UGANDA**
• 2002 Civil War begins  **COTE D’IVOIRE**
• 2009 32 incidents disrupt program  **SOUTHERN SUDAN**
• 2007-2010 Tuareg/Al-Qaeda  **MALI**
Funding

• The Carter Center raised $275 million in donations since 1986, including three Gates Foundation grants totaling $88.6 million awarded in between 2000 and 2010.

• Estimated $25 million needed to finish the job by 2012.
Coalition of Organizations and Agencies Supporting the Global Campaign to Eradicate Dracunculiasis, 1986-2010*

Major Partners
Ministries of Health
The Carter Center
UNICEF
U.S. Centers for Disease Control and Prevention
The World Bank
World Health Organization

Foundations
Khalifa Bin Zayed Al Nahyan Foundation
Amgen Foundation
Atlanta Women’s Club
Hugh J. Andersen Foundation
Blackie Foundation
Boston Foundation
Howard G. Buffett Foundation
Carani Charitable Foundation
Christian Church Foundation
Community Foundation of the National Capital Region
Crabby Beach Foundation
Diebold Foundation
Bill & Melinda Gates Foundation
W.B. Haley Foundation, Inc.
Harris myCFO Foundation
Emery C. Jr. and Nancy F. Herman Fund
Conrad N. Hilton Foundation
John C. and Karyl Kay Hughes Foundation
International Humanitarian Foundation
John P. Hussman Foundation
The Kendeda Fund
A.G. Leventis Foundation
Lored Foundation
Morningside Foundation
Salus Mundi Foundation
National Christian Charitable Foundation
Osprey Foundation of Maryland
P Twenty-One Foundation
Mary Lynn Richardson Fund
Seyfarth Shaw Charitable Foundation
United Nations Foundation
Woodbury Foundation

Other
American Red Cross
Atlanta Peachtree Rotary Club
Health & Development International
Mid-Continent University
National Democratic Institute for International Affairs
Nigerian Women Association of Georgia
Nippon Keidanren
Simply Living and Calumet Natural Foods Co-operative
U.S. Peace Corps
Voice of America

United Nations
Office for the Coordination of Humanitarian Affairs
UNDP
World Food Programme

Governments
Arab Fund for Economic and Social Development
Canadian International Development Agency (CIDA)
Denmark
Finland
Japan
Japan International Cooperation Agency (JICA)
Kuwait Fund for Arab Economic Development
Luxembourg
The Netherlands
Nigeria
Oman
OPEC Fund for International Development
Qatar
Saudi Arabia
Saudi Fund for Development
United Arab Emirates
United Kingdom Department for International Development (DFID)
United States Agency for International Development (USAID)

Corporations
AGCO Corporation
American Cyanamid
BASF Corporation
BellSouth Corporation
Chevron Corporation
Computer Associates International
Defined Health
Delta Air Lines, Inc.
Delta Medical Supplies
E.A. Juffali & Brothers
E.I. du Pont de Nemours
Environmental Systems Research Institute, Inc.
Evergreen International Aviation, Inc.
Franklin Mint
Georgia-Pacific Corporation
Global Aero Logistics / North American Airlines
Google.org
ITOCHU Corporation
Johnson & Johnson
Kimberly-Clark Corporation
Legendary Films (formerly Ad-Rem Concepts)
Precision Fabrics Group, Inc.
Ravenswork
Selig Enterprises
Society of Plastic Engineers, Inc.
Trek Bicycle Corporation
Tsunami Films
UBS Wealth Management Magazine
Vestergaard Frandsen
Wyeth (formerly American Home Products)
YKK Corporation

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“The public interest requires doing today those things that men of intelligent good will would wish, five or ten years hence, had been done.”

– Edmund Burke (1729-1797)