



ANNUAL MEETING OF NATIONAL NTD PROGRAMME MANAGERS IN THE WHO AFRICA REGION

“Stepping up Country Ownership to Accelerate Programmatic Action”

29 November – 1 December 2023

REPORT, ACTION POINTS AND RECOMMENDATIONS

WORLD HEALTH ORGANIZATION		AFRO TVD/ESPEN	
ANNUAL MEETING OF NTD NATIONAL PROGRAMMME MANAGERS “Stepping up Country Ownership to Accelerate Programmatic Action”			
Dates: 29 Nov. – 1 Dec. 2023		Venue: Conference room 1, WHO-AFRO, Brazzaville	
Total number of participants: 140 (129 in-person and 11 online) <ul style="list-style-type: none">• 35 National NTD Programme Coordinators and Managers• 35 NTD Partners and stakeholders• 3 RPRG members• WHO Secretariat from HQ (7); AFRO (26); MCATs (6) and WCOs (28)			
Summary report			
Background <p>NTDs are already neglected in various aspects, and recently, funding for NTDs has become significantly challenging. This situation is likely to hinder our ability to achieve the targets outlined in the Global NTD Framework and make a meaningful contribution to the attainment of Sustainable Development Goal 3.3. It is crucial that we urgently intensify advocacy efforts to secure resources and review current national plans to realign and prioritize activities that will have a more positive impact on public health. Furthermore, country ownership and mobilization of domestic funding empower countries to address NTDs in a sustainable, targeted, and accountable manner. It enables them to allocate resources according to their specific needs, engage local communities, and strengthen health systems. This holistic approach is essential for long-term success in the fight against neglected tropical diseases. The purpose of this meeting is to provide guidance and cross-learning through guided discussions and data sharing, to accelerate the implementation progress of the WHO NTD Roadmap 2021-2030 in the WHO African Region. The theme of the meeting was “Stepping up Country Ownership to Accelerate Programmatic Action”.</p>			
Specific objectives of the meeting <ol style="list-style-type: none">1. Share experiences, opportunities, and challenges in the implementation of the WHO road map and NTD master plans (impact of the interventions using the NTD Heatmap, the preventive chemotherapy NTDs Joint application package (JAP), Trachoma elimination monitoring form (TEMF), CM NTD report, etc.)2. Provide technical updates and innovations from WHO and progressed countries on integration, resource mobilisation and mainstreaming of NTD interventions within national health systems.3. Highlight strategies to strengthen country ownership - and mechanisms for ensuring effective coordination and collaboration.4. Support operational planning of NTD work at country level in line with the Global NTD roadmap and regional framework for integrated control, elimination and eradication of tropical and vector borne diseases.			
See Annex 1: Agenda			

Outcomes from Sessions

Session 1: The opening session, moderated by Santa-Mika Ndayiziga, ESPEN Advocacy, Partnership and Mentorship Officer, and introduced by Dr Elizabeth Juma, ESPEN Team Leader, comprised four opening remarks from Dr Benido Impouma, Director UCN; Dr Tuduetso Molefi, Kikundi CoP Chair, representing NTD National Programme Managers, Dr Rachel Bronzan from BMGF on behalf of the NTD partners and Dr Albis Gabrielli on behalf of WHO/HQ NTD Programme Director, Dr Socé Fall. From these remarks and speeches, we can retain three key messages as follows:

- Working together (countries, partners and WHO) to mobilize more resources, including domestic funds,
- Collaborating with other sectors for one-health approach to stop transmission of NTDs, and
- Sharing experiences and adopting innovative approaches to achieve goals of NTD roadmap 2021-2030 and SDGs related to health.

Session 2: 2023 NTD Review

2.1. Global update on progress NTD 2021-2030 roadmap

Progress is being made in line with milestones and targets of WHO NTD Global Roadmap 2021-2030 for both CM and PC NTDs. Although more needs to be achieved, progress is being made also in the African Region towards achieving the targets of NTD 2021-2030 roadmap.

2.2. NTD Roadmap 2021-2030: disease specific updates – Towards achievements of targets and sub-targets for each PC-NTDs and CM-NTDs

ESPEN is supporting countries on planning and implementing one health approach for zoonotic NTDs, starting with the Schistosomiasis/Taeniasis co-endemicity nexus. More countries (10+) are validated for achieving elimination as PHP of at least one NTD: HAT (7), LF (2) and Trachoma (6). Forty-two countries are certified free of Guinea worm disease, twelve countries are suspected to be free of yaws (never endemic). Some countries are targeted for elimination as stopping the transmission of HAT-g and leprosy.

See report on Session 2 as annex 2.

Session 3: NTD country programmes joining forces, Kikundi Community of Practice (CoP)

3.1. Kikundi CoP is NTD NPMs' initiative supported by a development team (University of Washington & University of Global Health Equity) and funded by BMGF, to which all NTD NPMs and those responsible for NTDs are invited to join the Kikundi CoP.

3.2. Since its inception, the platform has grown to include 72 NTD staff from 39 countries. Over the past two years, 32 NTD programme managers completed six courses, receiving a total of 68 certificates. This progress underscores Kikundi's commitment to fostering collaborative decision-making and addressing common NTD implementation and management challenges.

See report on Session 3 as annex 3

Session 4: Monitoring NTD resources and funding gaps

- 4.1. Ongoing efforts to track funding availability for NTD interventions show specific funding gaps for diseases like lymphatic filariasis, onchocerciasis, soil-transmitted helminthiasis (STH), and schistosomiasis for the years 2023 and 2024. For 2024, a significant portion (94M) of the population in need for preventive chemotherapy for NTDs in various countries have been identified potentially at risk of missing their treatments due to these funding gaps.
- 4.2. WHO Sustainability Framework for NTDs (2021-2030) aims to integrate NTD services into national health systems, strengthen political and financial commitment, and enhance coordination and collaboration across sectors. It emphasizes outcome measurement over inputs, systems over diseases, and the inclusion of NTD interventions in National Health Sector Strategic Plans (NHSP).

See report on Session 4 as annex 4.

Session 5: The NTD Master plans, M&E tools and Annual Work-plans

- 5.1. Countries are using NTD Masterplans to mobilize resources including domestic funding for NTD response. In this area, country political commitment makes huge impact on progress toward meeting NTD Roadmap targets. Community engagement and multi-sectoral collaboration can accelerate NTD programme implementation. Furthermore, annual work-plans must be extracted annually from the multi-year master plans for implementation as micro-plans at health district level.
- 5.2. However, some countries have not developed or finalized their NTD Master Plans and funding gap is noted globally and nationally. Human resource is limited for effective programme management, especially on data and supply chain management.

See report on Session 5 as annex 5.

Session 6: Presentations of different available tools and new ones to be put in place to monitor the achievements towards control and elimination of NTDs.

- 6.1. Various presentations were made on: ESPEN Portal and its inter-operability with Country Health Information Platform (CHIP); ESPEN Collect; Joint Application Package and Global NTD Annual Reporting Form (GNARF) built on DHIS-2
- 6.2. As main conclusions, innovation for data management and surveillance system is greatly needed and, new robust tools are being developed and piloted. Data management tools must remain flexible, user-friendly, easily customizable to country health information systems and inter-operable with other digital platforms.

See report on Session 6 as annex 6.

Session 7: Partner updates

A total of 11 NTD partners made separate presentations providing their agency profiles, focus of NTD support, and sources of funding. The partners that provided updates are:

- 7.1. **Bill and Melinda Gates Foundation** – provides catalytic funding, salaries, support for service delivery, mentoring program for NTD program capacity strengthening, and support to country-led approaches such as advocacy and resource mobilization.
- 7.2. **Unlimit Health: Ending Parasitic Disease** – Established in 2002 as Schistosomiasis Control Initiative (SCI), later became SCI Foundation in 2018, and is now Unlimited Health. They are implementing a case study in Uganda for integrated Schistosomiasis and WASH interventions through a country-led, community-based initiative, using the “puzzle of Schistosomiasis” focused on Water, Sanitation, and Behaviour Change.
- 7.3. **Helen Keller International** – They presented as an example their support to the implementation Door-to-Door Strategy to accelerate Trachomatous trichiasis elimination in Mali, where the disease was endemic in 66 of 75 health districts. They conduct Mass Drug Administration to treat infection and reduce transmission in the community and perform surgery to alleviate suffering in affected people.
- 7.4. **Uniting to Combat NTDs** – High level political commitment, which leads to mandate for domestic financing of NTD interventions. Advocacy for development of political commitment instrument including the Kigali Declaration on NTDs and the Kigali Commitment Tracker.
- 7.5. **Act | West – Funded by USAID**, supports country-led LF elimination efforts targeting hotspots, in collaboration with fhi360. Implemented socio-anthropological studies in Sierra Leone and Burkina Faso to understand the factors linked to non-compliance.
- 7.6. **The END Fund** – From Commitment to Results. They mobilize resources and engage implementing partners through country-led initiatives, targeting the 5 PC NTDs and Visceral Leishmaniasis. Interventions are aligned with National NTD Program priorities, addressing gaps, and supporting development of sustainability plan for NDT Programs. Achievements in Rwanda, Nigeria, Senegal, and Ethiopia.
- 7.7. **ALMA** – Established in 2009, with 55 heads of African States and Governments, serves as a high-level monitoring forum for targets set by the African Union. Aims to sustain Malaria, RMNCAH, and NTD high on health development agenda. Published the Malaria Progress Report 2022 and ALMA Scorecard for Accountability and Action for RMNCAH.
- 7.8. **Act to End NTDs | East – Funded by USAID**. Provides support at sub-national levels. Responded to pre-TAS failures in Cross River State in Nigeria. Supported advocacy and mobilization financing in Tanzania and supply chain reform in Uganda.
- 7.9. **Clinton Health Access Initiative (CHAI)** – Engagement for Results. Established in 2002. Support data system strengthening and use of the data for decision-making. Implementing NTD projects in Burkina Faso, South Sudan, Senegal, Ethiopia, Kenya, and Nigeria.
- 7.10. **International Federation of anti-leprosy Associations (ILEP)** is grouping around 14 NGOs supporting mainly Leprosy programmes but also combined TB and Buruli ulcer programmes. ILEP members are supporting 55 countries out of which 28 are in Africa.
- 7.11. **Sasakawa Health Foundation (SHF)** which is linked to The Nippon Foundation (TNF), whose President, Mr Yohei Sasakawa, has been WHO Goodwill Ambassador for Leprosy Elimination since year 2000 and funding national leprosy programmes through the WHO Global Leprosy Programme, based in SEARO.

See report on Session 7 as annex 7.

Session 8: Supply chain management

Presentations were made describing challenges with the first mile and inventory management in countries. The available WHO resources to enhance capacity of countries were explained. These include online apps and mobile apps. Best practices and lessons from the Kenya and Rwanda supply chain mechanism were shared. The presentations revealed a well-functioning integrated supply chain system in Rwanda and an effective supply chain system in Kenya. Challenges with these systems were discussed. As conclusions, countries are responsible and accountable to the NTD Medicines Donation and needs to give priority for MDA reporting; WHO is available to support country procurement with funds pooled from domestic resources through the WHO catalogue, Negotiation of price is also possible with bulk procurement.

See report on Session 8 as annex 8.

Session 9: One-Health approach for NTDs

This session focused of the One-Health Approach for NTDs. There was a panel discussion on the regional progress update on the one-health approach with regards to Taeniasis, Rabies and Echinococcosis. Country experiences were shared with regards to Rabies control and one health in Burkina and Madagascar. Main conclusions were: 1) despite challenges in establishing coordination mechanisms, implementation of a one health strategy is feasible and 2) A multisector approach is required for an effective one health strategy implementation.

See report on Session 9 as annex 9.

Session 10: Country case studies on integration and collaboration

Cameroon experience on integrated control of skin NTDs. Developed and implemented an integrated surveillance system for 21 Health districts. This was done through development of guidelines and tools followed by training and an integrated surveillance model established.

Cote D'Ivoire experience on integration of 7 skin NTDs included advocacy, community mobilization, flyers, working with WHO to incorporate DHIS2, integrated training for health staff, management of DHIS reporting, supervision, campaign and mapping of skin NTDs.

Ethiopia experience on Intersectoral collaboration with WASH, Animal Health and Refugees services was a success story.

See report on Session 10 as annex 10.

MAIN CONCLUSIONS

- Progress is being made in line with milestones and targets of WHO NTD Global Roadmap 2021-2030 for both CM and PC NTDs. However, progress in the African Region is less marked compared to the global one.
- ESPEN is supporting countries on planning and implementing one health approach for zoonotic NTDs, starting with the Schistosomiasis/Taeniasis co-endemicity nexus. More countries are achieving elimination as PHP of LF and Trachoma, HAT, Leprosy and soon for SCH.
- CM-NTDs, now under TVD, include 10 main diseases: 2 targeted for eradication (GWD and Yaws), 3 for elimination (leprosy, HAT, VL) and 5 others for Control, in line with the Regional TVD framework 2022-2030. 42 countries certified free of GWD, 12 countries suspected free of Yaws (never endemic) to be officially certified, 7 countries validated for elimination of at least 1 CM-NTD as PHP
- Some countries are targeted for elimination as stopping the transmission (HAT-g, Leprosy)
- Kikundi CoP is NTD NPMs' initiative supported by a development team (UoW & UGHE) and funded by BMGF, to which all NTD NPMs and those responsible for NTDs are invited to join.
- Technical and Financial Partners and other Initiatives are supportive to National NTD Programmes, more for PC than CM NTDs. Improved coordination and collaboration could increase effectiveness, efficiency and avoid duplication for more impact.
- Some challenges remain for Sustainability of NTD Programmes, Coordination and integration into PHC, cross-sectoral collaboration, WASH, One-Health, Supply chain management, Resource mobilisation, including Domestic funding as well as digitalisation and use of NTD database in ESPEN portal and Global Health Observatory

ACTION POINTS FOR NPMs

- All countries in the Region to develop National Integrated NTD (CM and PC) Master Plans incorporating Sustainability considerations and aligned with SDGs, NTD Global Roadmap 2021-2030, Regional Framework for Control, Elimination and Eradication of TVD 2022-2030 and also considering, National Plans for Health Development Plans
- All countries with national NTD Master Plans to prioritize activities for each year through the use of annual workplans.
- All Countries to identify best approaches to foster country coordination of partnership, integration between PC-NTDs and CM-NTDs, cross-sectoral collaboration through the use of these annual workplans.
- All NPMs to support digitalisation of NTD data and their inclusion in NHIS and improve the use of ESPEN Portal
- All NPMs to strengthen or develop functional logistics and supply chain management for NTD health products with dedicated human resources.
- All NPMs to join the Kikundi Community of Practice

RECOMMENDATIONS

To Member States

- Confirm more political commitment by allocating more domestic funds and resources to control, eliminate and eradicate NTDs.
- Promote inclusion of NTD data into National Health Information System (DHIS2 and others) and provide Human Resources for Data and supply chain Management of NTD Programmes.
- Set-up country coordination mechanisms involving all NTD stakeholders and initiatives, including actors for zoonotic NTDs for One-Health approach.

To WHO (WCO, AFRO, HQ)

- WHO to continue support to the development of national NTD master plans ("what to do") and encourage reflections on sustainability ("how to do it") and integration between CM and PC NTDs
- In addition to 11 countries being currently supported by consultants, WHO should also support other countries in needs of developing NTD Master Plans or Disease specific elimination Plans (Guinea, South Africa).
- WHO to develop a template for annual workplans and recommend its use as a country coordination tool for all stakeholders.
- WHO to identify best ways to support country coordination and collaboration with all stakeholders.
- WHO to encourage and support countries for evaluation of National NTD Master Plans.

To Partners

- Continue supporting countries for planning, resource mobilization and implementation of their Integrated National NTD Master Plans
- Collaborate with WHO and other UN Agencies to support country ownership, coordination and implementation of cross-sectoral interventions, WASH and One-health in line with Country priorities and targets.
- Contribute with WHO to in-country monitoring and evaluation of National NTD Master Plans

Agenda and List of Session Reports in Annexes

Annex 1 – Agenda of the Programme Managers Meeting

Annex 2 – Report on Session 2: 2023 Review, Global update on progress NTD 2021-2030 roadmap and disease specific updates – Towards achievements of targets and sub-targets for each PC and CM-NTD

Annex 3 – Report on Session 3: NTD country programmes joining forces: Kikundi CoP

Annex 4 – Report on Session 4: Monitoring NTD resources and funding gaps

Annex 5 – Report on Session 5: The NTD Master plans, M&E tools, Annual Work planning and selected countries experiences in implementation of Master plans

Annex 6 – Report on Session 6: Presentations of different available tools and new ones to be put in place to monitor the achievements towards control and elimination of NTDs.

Annex 7 – Report on Session 7: Partner updates

Annex 8 – Report on Session 8: Supply Chain Management

Annex 9 – Report on Session 9: One-Health Approach for NTDs

Annex 10 – Report on Session 10: Country case studies and panel on integration and collaboration

Annex 1 – Agenda

ANNUAL MEETING OF NATIONAL NTD PROGRAMME MANAGERS IN THE WHO AFRICA REGION

“Stepping up County Ownership to Accelerate Programmatic Action”

29 November -1 December 2023

WHO/AFRO. Brazzaville, Republic of Congo

Day 1: Wednesday 29 Nov 2023 - Progress towards the control & elimination of NTDs in the WHO African region

Time UTC+1	Topic and session	Moderators & Presenters
08:30-09:00	Registration	ESPEN/TVD
09:00-09:10	Introduction to the meeting	Moderator: Santa-Mika Ndayiziga
09:10 -10:00	Session 1: Opening session Opening from UCN Director Remarks from NTD stakeholders Keynote Address WHO NTD Director	Presenters Dr Benido Impouma Kikundi CoP Chair* Partners’ representative Dr Socé Fall Moderator Dr Elizabeth Juma *Representing NTD Programme Managers
10:00 – 10:10	Security briefing	
10:10 – 10:15	PSEA (WHO principles on Prevention of Sexual Exploitation & Abuse)	Neville T. Asana
10:15-10:35	Group Photo session	Organizers
10:35 -11:00	Health break	
11:00-12:30	Session 2: 2023 Review Global update progress NTD 2021-2030 roadmap targets NTD Roadmap 2021-2030: disease specific updates – Towards achievements of targets and sub-targets for each PC-NTD and CM-NTDS	Dr Didier Bakajika Dr Andrew Korkor

Time UTC+1	Topic and session	Moderators & Presenters
12:30 - 13:00	Session 3: NTD country programmes joining forces: Kikundi CoP	Dr Amir Kello and the Kikundi Community of Practice leadership
13:00 - 14:00	Lunch break	
14:00 – 15:30	Session 4: Monitoring NTD resources and funding gaps Presentation on monitoring funding availability and ESPEN IU Planner Sustainability planning for NTD programmes Selected PMs sharing experiences on local Resource Mobilization and sustainability	Dr Jorge Cano Dave Melkman Dr Pamela Sabina Mbabazi Country representatives: Ghana, Mali & Rwanda
15:30-15:50	Health Break	
15:50 -16:30	Wrap Up and close of day 1	Ms Santa-Mika Ndayiziga

Day 2: Thursday 30 Nov 2023 - Operationalizing current NTD Master Plans and new tools for enhanced monitoring

Time UTC+1	Topic and session	Moderators & Presenters
08:30-10:30	Session 5: The NTD Master plans, M&E tools Annual Work planning Selected countries experiences in implementation of Master plans	Mr Titus Kioko Dr Pamela Sabina Mbabazi Dr Augustin Kadima Ebeja Dr Maria Rebollo Dr Albis Gabrielli Dr Denise Mpufasoni
10:30-11:00	Health break	
11:00 – 12:45	Session 6: Presentations of different available tools and new ones to be put in place to monitor the achievements towards control and elimination of NTDs).	Mr Zouré Honorat Mr Alex Pavluck Mr Andy Tate Ms Junerlyn F Virrey Agua
12:45 – 13:00	The integrated surveillance tool	PATH
13:00 – 14:00	Lunch break	

Time UTC+1	Topic and session	Moderators & Presenters
14:00-15:30	Session 7: Partner updates 5 to 6 partners and donors to present on work they are doing in countries (Selected based on thematic areas (NGOs, Donors etc)	Ms Santa-Mika Ndayiziga
15:30 – 15:45	Health break	
15:45-16:00	Wrap Up and close of Day 2	Moderator: Santa-Mika Ndayiziga

Day 3: Friday 1 Dec 2023 - Cross-cutting issues, integration, and mainstreaming

Time UTC+1	Topic and session	Presenters and Panelists
08:30-08:50	Introduction second day session	Moderators
08:50 – 09:00	Session 8: Supply Chain Management	Dr Afework H Tekle Mr Olatunde Oladimeji Dr Bocar Diop
09:10 -10:30	Session 9: ONE Health approach for NTDs	Dr Pauline Mwinzi Prof Takafira Mduluza Dr Meritchell Donadeu Dr Jose Nely
10:30-11:00	Healthy break	
11:00 – 13:00	Session 10: Country case studies on integration, collaboration – Cameroon and Cote d’Ivoire Panel discussion - progress in integration, challenges, gaps and solutions	Dr Andrew Korkor Dr Mahoutondji Yves Barogui
13:00-14:30	Lunch break	
14:30-15:00	Session 11: Final remarks Donors/Partners	Moderator: Santa-Mika Ndayiziga
16:00-16:30	Meeting Closure	WHO-AFRO

Annex 2

Date: 29/11/2023 Session 2	PRESENTATION on: Global update on progress NTD 2021-2030 roadmap
Rapporteurs: Spes Ntabangana, Dismas Baza, Aliyu Suleiman, Sharmila Lareef	
Summary of the Presentation Key issues: <ul style="list-style-type: none"> Significant progress has been made towards the achievement of the NTD 2021-2030 roadmap targets. This includes a decline of up to 25% of people requiring interventions against NTDs with about 80m persons not needing treatment between 2010 and 2021 (the target is -90% between 2010 and 2030). In addition, there has been a decline in DALYs related to NTDs by 11% between 2015 and 2019, and as of August 2023, 50 countries have eliminated at least one NTD. Pillar one achievements include the publication of nearly 120 normative guidance and tools, global advocacy including two declarations, capacity building through the Open-WHO platform, and intensified disease management Pillar two achievements include expansion of PC programmes to other diseases, integrated skin-NTD strategy, improved intersectoral collaboration with one health and WASH, and coordination of vector control through the Global Arbovirus Initiative and strengthening the NTD M&E framework. Pillar three achievements include the publication and promotion of use of the WHO sustainability framework in several countries, expansion of Global platforms for countries and the inclusion of NTD services into UHC/PHC and increased awareness on importance of essential services sustainable funding. 	
Challenges <ul style="list-style-type: none"> Disruption caused by COVID-19 Changing donor landscape Slow and/or uneven progress in countries & across diseases Program disruptions due to conflict, insecurity and political instability Underlying risk factors 	
Way forward: <ul style="list-style-type: none"> Addressing normative gap Mainstream NTD in UHC/PHC Foster integration/collaboration 	
Main conclusion: Although significant progress has been registered, there is a need to monitor countries in speeding up NTD implementation, given the approaching targets set from now till 2023.	
ACTION POINTS FOR NPMs	
<ol style="list-style-type: none"> Scale up implementation of the roadmap to recover from COVID-19 disruptions. Invest in strategies that foster integration and cross-sectional collaboration 	
RECOMMENDATIONS	
To Member States: Facilitate country ownership and mainstream NTD into UHC/PHC.	
To WHO <ol style="list-style-type: none"> Address normative gaps. Facilitate country ownership and sustainability of NTD programs 	

Date: 29/11/2023 Session 2 (Cont'd)	PRESENTATION on: Disease-specific updates towards achievements of targets and sub-targets for CM-NTDS
Rapporteurs: Spes Ntabangana, Dismas Baza, Aliyu Suleiman, Sharmila Lareef	
Summary of the Presentation Key issues <ul style="list-style-type: none"> • 19 NTDs targeted either for control, interruption of transmission, or elimination as a public health problem is present in the AFRO region. • 42 countries are certified for interruption of Guinea Worm Disease (GWD) and none for Yaws; 12 countries are suspected to be free of Yaws but are yet to be certified. • 46 counties attained the threshold for the elimination of leprosy, but no country has verified its elimination or validated the elimination of Visceral Leishmaniasis. • A total of 7 countries have validated/verified the elimination of HAT. Challenges <ul style="list-style-type: none"> • Inadequate government ownership and integration • Insecurity affecting effective implementation at the field level. • Inadequate human resources at the country level, with NTD staff handling NTDs and multiple other programmes 	
Main conclusion: AFRO Tropical and Vector-borne Disease integrated framework for 2022-2030 has clear targets for CM-NTDs in the region. Although there has been significant progress registered, there is a need for stronger country ownership with domestic funding and integrated approaches to programmatic delivery	
ACTION POINTS FOR NPMs	
<ol style="list-style-type: none"> 1. Development of Multi-year NTD master plans 2. Strengthening engagement of community health workers and communities in NTD activities 3. Adoption of one-health approach 4. Enhance partnership between communities and donors 	
RECOMMENDATIONS	
To Member States <ol style="list-style-type: none"> 1. Increase domestic funding for CM-NTDs 1. Support in the development of Annual plans & Budget 2. Adopt and adhere to WHO Guidelines 	
To WHO (WCO, AFRO, HQ) <ol style="list-style-type: none"> 1. Facilitate the development of multi-year NTD master plans. 2. Facilitate advocacy and resource mobilization for NTDs. 3. Provide technical Assistance and increase M& E activities. 	
To Partners <ol style="list-style-type: none"> 1. Facilitate advocacy and resource mobilization. 2. Harmonize interventions and utilize integrated approaches to implementation 	

Date: 29/11/2023 Session 2 (End)	PRESENTATION on: Disease-specific updates towards achievements of targets and sub-targets for PC-NTDS
Rapporteur: Spes Ntabangana, Dismas Baza, Aliyu Suleiman, Sharmila Lareef	
Summary of the Presentation Key issues <ul style="list-style-type: none"> • A total of six countries have been validated as having eliminated Trachoma as a public health problem; the elimination dossier for Burundi is currently under review, while Botswana and Mauritania are in the process of preparing their dossiers for submission. • Apart from Guinea and South Africa, SCH MDAs have started in endemic countries in the AFRO region. Algeria has stopped MDAs in at least one focus but needs reassessment. • All 47 countries in the African region are considered endemic for STH, but only 42 require PC except Algeria, Eritrea, Seychelles, Mauritius, and Mauritania • 27 countries are endemic for Taeniasis, and 11 are suspected to be endemic. • 34 endemic countries for LF in the region, but 25 need MDA; 2 countries have eliminated LF as PHP, 7 have stopped MDA in all endemic IUs, and 12 in at least one IU. • 28 countries in the region are endemic for Onchocerciasis; 2 are pending to start MDA, 3 to scale up MDA to all endemic areas, and 4 are scaling down; Niger has submitted its elimination dossier, but no country has been verified to have eliminated Onchocerciasis. Challenges <ul style="list-style-type: none"> • Hard-to-reach communities and insecurity contribute to persisting infections. • LF and Loiasis co-endemicity • Low coverage of PZQ in adults 	
Main conclusion: Several factors are required to enlist a new NTD among the already existing 20 NTDs.	
ACTION POINTS FOR NPMs	
<ol style="list-style-type: none"> 1. Impact assessment and scaling down MDA. 2. Integration of passive surveillance in routine surveillance system 3. Disease-specific assessments may be required in Zimbabwe, Gabon, and the Republic of Congo to ascertain the definitive epidemiological situation of onchocerciasis. 4. Reaching special population, vulnerable and hard to reach populations. 5. Cross border collaboration 6. Advocacy and resource mobilization is indicated in most countries to support PC NTDs 7. Support preparation of elimination dossiers, post validation surveillance 8. Support for surveillance of Taeniasis in Gabon and other eligible countries 	
RECOMMENDATIONS	
To Member States	
<ol style="list-style-type: none"> 1. Implement assessment surveys, post-MDA surveys, and impact mapping at the sub-district level. 2. Advocate for the inclusion of Loiasis in the list of NTDs 	
To WHO (WCO, AFRO, HQ)	
<ol style="list-style-type: none"> 1. Support the implementation of impact assessment surveys. 2. Provide technical support for mapping of Teniasis and Cysticercosis 3. Facilitate country high-level advocacy and resource mobilization mission for NTD. 4. Support countries for sub district stratification to better target treatment 	
To Partners: Support advocacy and resource mobilization	

Annex 3

WORLD HEALTH ORGANIZATION		AFRO TVD/ESPEN	
ANNUAL MEETING OF NTD NATIONAL PROGRAMMME MANAGERS			
Date: 29.11.2023		Session #3: NTD country programmes joining forces: Kikundi CoP	
Rapporteur: Amir B Kello			
<p>Summary of the session</p> <p>The objective of this session was to share the progress of Kikundi, the Community of Practice (CoP) for NTD Programme Managers, with participants and generate ideas to support NTD Programme Managers. The session aimed to highlight the main objectives achieved in the first phase of Kikundi since its launch, encouraging countries not yet on the platform to join and expanding Kikundi's partnership scope.</p> <p>Progress updates</p> <p>Kikundi serves as a CoP where African NTD Programme Managers can engage in in-person and online learning, collaborating to achieve national and global NTD benchmarks. The online platform provides access to up-to-date professional development and training resources, group problem-solving forums, direct messaging, and tools to advance technical and professional goals, particularly in preventive chemotherapy NTDs. Launched in 2021, Kikundi is governed by a Leadership Council, an Advisory Committee, and a Development Team from the University of Washington and the University of Global Health Equity, providing program management, technical, and operational support.</p> <p>Since its inception, the platform has grown to include 72 NTD staff from 39 countries. Over the past two years, 32 NTD programme managers completed six courses, receiving a total of 68 certificates. This progress underscores Kikundi's commitment to fostering collaborative decision-making and addressing common NTD implementation and management challenges.</p> <p>Key issues and gaps</p> <ul style="list-style-type: none">• Initial membership was restricted to the national NTD programme managers.• Currently 72 members from 39 countries only. Need to engage the remaining countries NTD programme managers to join the CoP. <p>Challenges</p> <ul style="list-style-type: none">• Not all NTD programme managers have joined the Kikundi CoP.• Training courses offered are currently limited to English.			

Main conclusions

- Membership of Kikundi is not limited to national NTD programme managers but also members of national NTD teams.
- Kikundi has enhanced collaboration among NTD programme managers in the African region.
- Kikundi has supported access to key NTD resources and capacity of NTD programme managers through online courses, webinars and peer learning.

ACTION POINTS FOR NPMs

- National NTD programme managers who are Kikundi members should encourage their colleagues to join the community.
- Reach out to other national NTD programme managers to join Kikundi and increase participation.
- Actively engage in Kikundi programmes and activities to benefit from the CoP offerings.

RECOMMENDATIONS

To Member States

- Encourage all NTD staff members to join Kikundi CoP.
- Provide support for Kikundi CoP.

To WHO (WCO, AFRO, HQ)

- Continue supporting Kikundi by engaging as a member of the Kikundi Advisory Committee.
- Encourage Kikundi members to increase their access and use of the ESPEN Portal for information and NTD resources.

To Partners

- Continue expanding access to training opportunities for NTD personnel nominated by Kikundi members.
- Provide increased support and access for joint endeavours with Kikundi.

Annex 4

WORLD HEALTH ORGANIZATION		AFRO TVD/ESPEN	
ANNUAL MEETING OF NTD NATIONAL PROGRAMMME MANAGERS			
Date: 29.11.2023		Session #4: Monitoring NTD Resources, Country Ownership, and Domestic Funding	
Rapporteurs: Jorge Cano & Pamela S. Mbabazi			
Summary of the session Country ownership and the sustainability of interventions are pivotal in the fight against neglected tropical diseases (NTDs). When countries take ownership of the health challenges they face, they are more likely to allocate the necessary resources, tailor strategies to local contexts, and integrate these efforts into their national health systems, ensuring that interventions are not only effective but also culturally and socially appropriate. Sustainable interventions require long-term commitment and adaptable strategies that can withstand political and economic changes. This sustainability is crucial for maintaining public health gains and preventing the resurgence of NTDs, which can quickly undermine decades of work if efforts are not continuous and supported by the domestic commitment. Moreover, country-led initiatives foster local expertise and strengthen health infrastructure, which are essential for the ongoing surveillance, treatment, and prevention of NTDs. In essence, the successful eradication, elimination, or control of these diseases hinges on the extent to which national governments can commit to and sustain the necessary interventions. The general objective of the session was to foster a comprehensive understanding of the current landscape of resource monitoring, country ownership, and domestic funding for the control and intervention of neglected tropical diseases (NTDs) in the African region, and to identify actionable strategies to close the funding gap and strengthen the sustainability of NTD programs.			
Progress updates Knowing and monitoring the availability of resources and funding to comply with planned interventions is crucial, as explained in detail in the background and justification section. Despite efforts to mobilize domestic investment for NTD interventions, many countries in the African region still heavily rely on financial and technical support from local and international partners. In the African region, there are 4,975 areas or implementation units that require interventions for at least one PC-NTD. In 2021, only 58.2% (2,894 areas) of these units were able to conduct interventions for at least one PC-NTD. Unfortunately, a significant portion of the remaining areas (42.8%) did not receive any interventions due to a lack of funding. A recent study conducted by ESPEN in 26 countries aimed to assess the availability of funding for planned MDA rounds scheduled in 2023. The study revealed that 12% of implementation units lacked funding to complete the required MDA rounds for LF, 11% for Oncho, 35% for STH, and 24% for SCH. To address this issue, ESPEN has partnered with organizations involved in the development and maintenance of the ESPEN Portal. Together, we have developed an online tool called the "IU Planner." This tool enables stakeholders to report and monitor the availability of funding and planned interventions. It serves as a centralized platform to track funding gaps and ensure transparency in resource allocation for PC-NTD interventions. By utilizing the IU Planner, stakeholders can better coordinate their efforts, identify areas in need of additional funding, and prioritize interventions accordingly.			

The document titled "Ending the Neglect to Attain the Sustainable Development Goals: A Sustainability Framework for Action Against Neglected Tropical Diseases 2021–2030" was launched as a companion document to the established roadmap for addressing neglected tropical diseases (NTDs) from 2021 to 2030. The successful implementation of the road map hinges on the continuous and effective execution of strategies targeting NTDs. The World Health Organization (WHO) has developed the NTD road map as guiding document and its related companion documents to assist Member States, various stakeholders, and partners in coordinating their strategies and identifying sustainable methods to achieve the targets set for 2030. In the African region, several countries such as Ghana, Togo, Rwanda, Senegal and Tanzania, have developed their sustainability plans in collaboration with in-country and international partners.

Key issues and gaps

- **Funding Gaps and Financial Sustainability:**

- ✓ Insufficient and Inconsistent Funding: Many countries reported significant funding gaps for NTD interventions, particularly for mass drug administration (MDA) and monitoring and evaluation (M&E) activities. This issue was prominent in specific diseases like lymphatic filariasis, onchocerciasis, soil-transmitted helminthiasis (STH), and schistosomiasis.
- ✓ Reliance on External Funding: There's a heavy dependence on external donors, which leads to uncertainties in long-term program sustainability.

- **Health System Integration and Capacity:**

- ✓ Limited Health System Integration: NTD programs often operate vertically with limited integration into the broader health system. This separation can hinder sustainable control efforts and efficient resource utilization.
- ✓ Capacity Constraints: Several countries face challenges in terms of human resources, technical expertise, and health infrastructure to effectively implement NTD programs.

- **Data Management and Surveillance:**

- ✓ Inadequate Data and Surveillance Systems: Weaknesses in data collection, management, and surveillance systems hinder effective monitoring and response to NTDs. This includes challenges in post-elimination surveillance to prevent disease resurgence.

- **Multi-Sectoral Collaboration and Coordination:**

- ✓ Need for Stronger Multi-Sectoral Approaches: Effective control of NTDs requires collaboration across various sectors (e.g., WASH, education, finance). However, there are gaps in coordination and effective multi-sectoral partnerships.

- **Community Engagement and Decentralization:**

- ✓ Insufficient Community Involvement: There's a need for greater community engagement and empowerment in NTD interventions, which can enhance program ownership and sustainability.

- **Policy and Advocacy:**

- ✓ Lack of Comprehensive NTD Policies: Some countries lack robust, integrated NTD policies aligned with international frameworks like the WHO NTD roadmap.
- ✓ Limited Advocacy and Awareness: There is a gap in advocacy efforts to raise the profile of NTDs and mobilize resources and political will.

- **Research and Innovation:**

- ✓ Need for Context-Specific Research: There is a lack of operational research addressing region-specific challenges and innovations in NTD control.

- **Equity and Access:**

- ✓ Inequities in Access to NTD Services: Marginalized and vulnerable populations often face barriers in accessing NTD services, highlighting a need for more equitable health interventions.

Challenges

- **Inconsistent and Insufficient Funding:**

- ✓ Reliance on External Donors: Many African countries heavily depend on international donors for NTD programs, leading to sustainability concerns.
- ✓ Unpredictable Funding Flows: Interruptions and inconsistencies in funding streams can significantly hinder ongoing NTD interventions.

- **Health System Limitations:**

- ✓ Resource Constraints: Limited healthcare infrastructure, workforce shortages, and inadequate technical capabilities pose significant challenges.
- ✓ Fragmented Health Services: The vertical nature of many NTD programs limits their integration into the broader health system.

3. Data Collection and Surveillance Deficiencies:

- ✓ Weak Surveillance Systems: Inadequate systems for disease monitoring and surveillance, particularly post-elimination, can lead to missed cases or disease resurgence.
- ✓ Inaccurate or Incomplete Data: Challenges in data accuracy and completeness impact the ability to assess disease burden and intervention effectiveness.

4. Multi-Sectoral Coordination and Collaboration:

- ✓ Limited Intersectoral Collaboration: Effective NTD control requires coordination across various sectors (e.g., water, sanitation, education), which is often lacking.
- ✓ Challenges in Partnership Management: Coordinating efforts and resources among multiple stakeholders, including NGOs, governments, and international organizations, can be complex.

5. Community Engagement and Empowerment:

- ✓ Low Community Participation: Inadequate involvement of local communities in NTD programs can affect the adoption and sustainability of interventions.
- ✓ Cultural and Social Barriers: Cultural beliefs, stigma, and lack of awareness about NTDs can hinder community acceptance and participation in control measures.

6. Policy and Advocacy Gaps:

- ✓ Absence of Comprehensive NTD Policies: Not all countries have robust, integrated NTD policies that align with global health frameworks.
- ✓ Limited Political Will and Advocacy: There is often insufficient political commitment and advocacy to prioritize NTDs in national health agendas.

7. Research and Development Challenges:

- ✓ Need for Context-Specific Solutions: There is a gap in operational research tailored to the specific challenges and conditions of the African region.
- ✓ Innovation and Technology Transfer: Limited access to innovative diagnostic and treatment technologies hampers effective disease management.

Addressing these challenges requires a concerted effort from governments, international organizations, donors, and communities, emphasizing sustainable financing, health system strengthening, enhanced surveillance, community involvement, and robust policy frameworks.

Main conclusions

- Ongoing efforts to track funding availability for NTD interventions, particularly mass drug administration (MDA) and monitoring and evaluation (M&E) activities, are implemented at the WHO African region. The continuous monitoring is showing specific funding gaps for diseases like lymphatic filariasis, onchocerciasis, soil-transmitted helminthiasis (STH), and schistosomiasis for the years 2023 and 2024. For instance, in 2024, 32% of implementation units for lymphatic filariasis lacked funding, and a similar trend was observed for other diseases.
- For 2024, a significant portion (94M) of the population in need for preventive chemotherapy for NTDs in various countries have been identified potentially at risk of missing their treatments due to these funding gaps.
- WHO Sustainability Framework for NTDs (2021-2030): This framework aims to integrate NTD services into national health systems, strengthen political and financial commitment, and enhance coordination and collaboration across sectors. It emphasizes outcome measurement over inputs, systems over diseases, and the inclusion of NTD interventions in National Health Sector Strategic Plans (NHSP).
- The framework supports an action-oriented approach to planning, which includes generating political momentum and enhancing resource mobilization. It also suggests the use of existing indicators and aligning with sector-wide and partner initiatives like those of USAID.
- Country-Specific Strategies and Challenges:
 - ✓ Rwanda's approach to NTDs was highlighted, focusing on decentralization, integration within community forums, schools, and routine supply chains, and leveraging high-level political advocacy. Rwanda demonstrated a commitment to eliminating NTDs by 2030 through 100% domestic financing for Mass Drug Administration (MDA) and incorporating NTD control into broader health and development programs.
 - ✓ Togo presentation emphasized the successful elimination of several NTDs and the integration of NTD programs into the national health system. Challenges included the need for continued support for morbidity management post-elimination and integrating surveillance of eliminated NTDs into the national health system. The approach in Togo showed the effectiveness of coordinated action and the importance of political commitment and financing in sustaining NTD interventions.
 - ✓ Ghana's presentation discussed its progress in NTD control, including the elimination of three NTDs and the integration of NTD control into the national health policy. The country emphasized the importance of multisectoral coordination, consistent drug donations, and partnership support. The session underscored sustainability as key to achieving Universal Health Coverage (UHC) and aligning with the Sustainable Development Goals (SDGs).
 - ✓ Senegal's experience demonstrates a strategic, multisectoral, and coordinated approach to establishing a sustainable plan for NTD control and elimination, with a focus on national ownership, stakeholder collaboration, and alignment with global health objectives.

In summary, the presentations from this session highlighted the critical importance of sustained funding, integrated health system approaches, and strong multisectoral coordination for the control and elimination of NTDs in the African region. The examples from specific countries like Rwanda, Togo, and Ghana provided valuable insights into effective strategies and challenges faced in implementing sustainable NTD interventions.

ACTION POINTS FOR NPMs

Synthesizing the experiences and strategies from Ghana, Rwanda, Togo, and Senegal, here are consolidated general recommendations applicable to all national programs for the control and elimination of neglected tropical diseases (NTDs):

1. Strategic Planning and Policy Integration:

- ✓ Develop Comprehensive National Plans: Create integrated NTD master plans that align with national health policies and adhere to the WHO roadmap.
- ✓ Incorporate NTDs into Broader Health Goals: Align NTD interventions with broader health initiatives, including Universal Health Coverage (UHC) and Sustainable Development Goals (SDGs).

2. Multi-Sectoral Collaboration and Coordination:

- ✓ Establish Multi-Sectoral Coordination Mechanisms: Facilitate collaboration across various sectors, including health, education, and water, sanitation, and hygiene (WASH).
- ✓ Engage High-Level Political Advocacy: Secure commitment and support from high-level government officials and policymakers for NTD interventions.

3. Financing and Resource Mobilization:

- ✓ Ensure Sustainable Financing: Prioritize domestic financing and seek consistent support from international donors and partners.
- ✓ Optimize Resource Allocation: Effectively utilize available resources through strategic planning and prioritization.

4. Community Engagement and Decentralization:

- ✓ Involve Local Communities and Authorities: Decentralize NTD interventions to involve local communities, schools, and village-level authorities in planning and implementation.
- ✓ Promote Community Ownership: Foster community engagement and ownership to enhance the effectiveness and sustainability of interventions.

5. Monitoring, Evaluation, and Adaptation:

- ✓ Implement Continuous Monitoring and Evaluation: Utilize tools for annual reporting and monitoring, adapting strategies based on data and evolving needs.
- ✓ Post-Elimination Surveillance: Develop ongoing surveillance and care strategies for post-elimination phases to prevent resurgence.

6. Health System Strengthening and Integration:

- ✓ Integrate NTD Services into Health Systems: Embed NTD programs within the national health system for more efficient service delivery.
- ✓ Build Operational Capacities: Strengthen health system capacities, including information systems, supply chain management, and human resources.

7. Knowledge Sharing and Learning:

- ✓ Learn from Best Practices: Share experiences and learnings between countries to adopt best practices and innovative approaches.

These recommendations combine the strengths and learnings from different country experiences. They emphasize the need for integrated, collaborative, and sustainable approaches in national programs for effectively combating NTDs.

RECOMMENDATIONS

To Member States

1. Policy Development and Strategic Planning:

- ✓ Integrate NTDs into National Health Policies: Develop and incorporate comprehensive NTD strategies within national health policies, ensuring alignment with international frameworks like the WHO NTD roadmap.
- ✓ Long-Term Strategic Vision: Establish a long-term vision for NTD control and elimination, with clear targets and milestones.

2. Governance and Multi-Sectoral Collaboration:

- ✓ Foster High-Level Government Commitment: Secure and maintain political will and support from the highest levels of government.
- ✓ Establish Multi-Sectoral Partnerships: Collaborate across various government sectors, including health, education, finance, and WASH, to ensure a holistic approach to NTD control.

3. Financing and Resource Allocation:

- ✓ Mobilize Sustainable Domestic Financing: Prioritize budget allocations for NTD programs and seek innovative financing mechanisms.
- ✓ Leverage International Aid and Partnerships: Actively engage with international donors and partners to supplement domestic funding and technical support.

4. Community Engagement and Decentralization:

- ✓ Empower Local Governments and Communities: Decentralize NTD management to local authorities and communities to enhance program ownership and sustainability.
- ✓ Strengthen Community Health Systems: Support community-based interventions and health services, ensuring they are well-resourced and integrated.

5. Monitoring, Evaluation, and Surveillance:

- ✓ Invest in Robust Monitoring and Evaluation Systems: Develop and maintain strong M&E frameworks for continuous assessment and adaptation of NTD strategies.
- ✓ Focus on Post-Elimination Surveillance: Ensure sustained surveillance and response mechanisms even after achieving elimination targets to prevent resurgence.

6. Health System Strengthening:

- ✓ Strengthen Health Infrastructure and Capacities: Invest in health system strengthening, including workforce development, supply chain management, and health information systems.
- ✓ Integrate NTD Services into Primary Health Care: Embed NTD interventions within the broader primary health care system for more effective and sustainable health outcomes.

7. Advocacy, Awareness, and Education:

- ✓ Promote Public Awareness and Education: Implement national campaigns to increase awareness about NTDs, their prevention, and treatment options.
- ✓ Build Partnerships with Civil Society and NGOs: Engage non-governmental organizations and civil society in advocacy, service delivery, and awareness campaigns.

8. Knowledge Exchange and Learning:

- ✓ Encourage Regional and Global Collaboration: Participate in international forums and networks to share experiences, learn from best practices, and adopt innovative approaches.

These recommendations are designed to guide governments in creating a conducive environment for the successful control and eventual elimination of NTDs, leveraging lessons learned from the experiences of Ghana, Rwanda, Togo, and Senegal.

Annex 5

WORLD HEALTH ORGANIZATION		AFRO TVD/ESPEN	
ANNUAL MEETING OF NTD NATIONAL PROGRAMMME MANAGERS			
Date: 30 November 2023		Session #5: The NTD Master plans, M&E tools and annual Workplans	
Rapporteur: Albis Gabrielli			
Summary of the session 36 countries have developed their NTD Master Plans and 11 remaining ones are going to be supported in their efforts to update theirs.			
Progress updates National NTD master plans have been developed by a large number of countries in the African region, with several countries having reached the 3 rd generation of plan. Sustainability is also given increasing attention: a few countries in the Region have a dedicated NTD sustainability plan or have included sustainability considerations in their national NTD planning and have established national coordination mechanisms. On the contrary, annual workplans are mainly developed by national NTD programmes as a tool to justify funding requests submitted to national budgets or to partners, but rarely exist as fully-fledged and budgeted planning tools resulting from a prioritizing exercise leading to the identification of key activities extracted from master plans, with well-defined roles, responsibilities, timeline and costs. A standard WHO template for annual workplans currently does not exist.			
Key issues and gaps It is important: <div><div>1. To encourage all countries in the Region to develop national master plans incorporating sustainability considerations.</div><div>2. To encourage all countries with a national master plan to plan and prioritize activities for each year through the use of annual workplans.</div><div>3. To develop a WHO template for annual workplans and recommend its use as a country coordination tool for all stakeholders.</div><div>4. To identify best approaches to foster country coordination through the use of annual workplans</div></div> Points 1 and 4 can be defined through an online questionnaire.			
Challenges <div><div>• Fragmentation of planning as a mere reflection of funding availability and not as an outcome of a prioritization exercise based on national health policies</div></div>			
Main conclusions <div><div>• WHO to continue support to the development of national NTD master plans (" what to do") and encourage reflections on sustainability ("how to do it")</div><div>• WHO to facilitate the development of an annual workplan template.</div><div>• WHO to identify best ways to support country coordination</div></div>			
RECOMMENDATIONS			
To WHO (WCO, AFRO, HQ) <div><div>• Please see main conclusions</div></div>			

WORLD HEALTH ORGANIZATION		AFRO TVD/ESPEN
ANNUAL MEETING OF NTD NATIONAL PROGRAMMME MANAGERS		
Date: 30 November 2023		Session 5 (Cont'd): Country experiences in planning and implementing NTD Master Plans
Rapporteur: Moses Kerkula JEURONLON		
<p>Summary of the session</p> <p>The session focused on country experience in planning and implementing NTD Master Plan and was Moderated by Dr Augustin KADIMA, Medical Officer NTD, AFRO. The scene was set by a presentation made by Titus KIOKO, Project Manager ESPEN, on the processes and status of NTD Master Plan development by countries since 2022, following the launch of the NTD Roadmap 2021-2030. He gave the 3 pillars of the NTD Road Map, to which NTD Masterplans should be aligned: 1) Accelerate programmatic action, 2) Intensify cross-cutting approaches, and 3) Change operating models and culture to facilitate country ownership.</p> <p>Dr Denise Mupfasoni contributed by outlining some of the importance use of the NTD Master Plan: Reference for engaging stakeholders to include NTDs in National Health Plans, resource mobilization, monitoring progress toward achieving targets for NTD elimination. She concluded that NTD Master Plans have not been evaluated to measure it concrete outcomes.</p> <p>Dr Mwinzi gave overview of WHO support to countries to adopt One Health approach to NTD response and introduced a consultant who supports countries to develop One Health approach for NTDs.</p> <p>The remarks were followed by separate presentations by Togo and Rwanda, in which they gave their experience in the NTD Masterplan development processes, implementation of the Masterplan, achievement, challenges, and lessons learned.</p> <p>The country presentations were followed by a presentation by Dr Pamela Sabina Mbabazi on overview of NTD Monitoring and Evaluation Framework 2021-2030. Gaps in required NTD resources were highlighted along with the aim of the framework to monitor progress towards achieve the targets set in the NTD Roadmap. Focusing on two of the six chapters in the framework, she gave overview on Quantitative Indicators and Qualitative Indicators. She provided the generic list of indicators to be monitored, which can be adapted to country contexts. She gave overview of NTD data pathways (Collection – Review – Reporting – Analysis – Use; from Community level → MOH → WHO, <i>with feedback loop</i>), for which inter-operability of the data management tools are important, and the WHO corporate vision for a single Repository for Health Data.</p> <p>A presentation on cascading from Multi-year Plan to Annual Work Plan (AWP) provided overview of its purpose and advantages, including serving as planning and budgeting tool based on strategic priorities in the Master Plan, addressing specific issues and gaps identified in program implementation, providing opportunity for tracking progress, serving as tool for coordination. The discussion points provided at the end of the presentation were:</p> <p>What participants think about the AWP model; Experience in developing and implementing AWP; What elements should be included to make AWP useful for planning, reporting, and M&E; What platform or mechanism could improve country-level coordination.</p>		

Progress updates

- Togo, Rwanda, Burundi, Namibia have developed and implemented first generation NTD Master Plans.
- Togo and Rwanda have also eliminated and are making progress to eliminate a number of NTDs targeted for elimination by 2030.
- A total of 31 countries in the African Region have developed NTD Masterplans.
- NTD Master Plans have been used to mobilize domestic financing for NTD response, with examples shown by Togo and Rwanda, which has contributed to strengthening NTD response, acceleration NTD elimination of targeted NTDs.

Key issues and gaps

- Some countries have not developed or finalized their NTD Master Plans.
- Funding gap is noted globally and nationally.
- Limited human resources for effective program management.
- Some countries do not properly document progress and evidence for NTD elimination.

Challenges:

- Supply chain challenges in the overall health system adversely affect the quality of NTD service delivery.
- Short shelf life of NTD supplies poses planning and implementation constraints to NTD Programs.
- Non-compliance among clients due to various factors.

Main conclusions

- Countries are using NTD Masterplans to mobilize domestic resource for NTD response.
- A number of countries are on track to elimination targeted NTDs.
- Political commitment makes huge impact on progress toward meeting NTD Roadmap targets.
- Community engagement and multi-sectoral engagement can accelerate NTD program implementation and meeting of targets.

Action Points for NPMs

- Prioritize the use of WHO technical support to develop NTD Masterplan and One Health Approach to NTD response.
- Strengthen coordination and collaboration with other MOH programs, particularly Malaria Programs for leverage resources and maximize synergies.
- Prepare and implement annual work plan from the NTD Master Plan.
- Generate evidence to use to advocate for domestic financing of NTD response.
- Improve data quality and submit reports to WHO.

Recommendations

To Member States

- Digitalize data management tools and ensure inter-operability of data management platforms and tools.
- Conduct internal and external evaluation with focus on logistics, financing, community engagement, and diseases burden.
- Strengthen cross-border collaboration and coordination for NTD response.

To WHO (WCO, AFRO, HQ)

- Continue to provide technical assistance to Member States.
- Continue advocacy for equitable investments for NTD response.
- Provide support to National Programs to develop advocacy tools for domestic financing.
- Provide technical assistance to National Programs to develop One Health approach to NTDs.

To Partners

- Promote country owner and support country-led processes.
- Align agency plans with national plans, priorities, and targets.
- Use evidence to determine intervention areas.
- Support coordination of interventions and allocation of resources.
- Support joint planning and coordination with National Programs.

Annex 6

WORLD HEALTH ORGANIZATION		AFRO TVD/ESPEN	
ANNUAL MEETING OF NTD NATIONAL PROGRAMMME MANAGERS			
Date: 30 November 2023		Session 6: Presentations of available tools and new ones to be put in place to monitor the achievements towards control and elimination of NTDs.	
Rapporteur: Moses Kerkula JEURONLON			
Summary of the session			
<p>The first presentation by Mr Honorat ZOURÉ focused on the ESPEN Data Portal and its inter-operability with the Country Health Information Platform (CHIP). Examples of how the platform can be used tracking progress on specific NTD and survey planning was provided, showcasing application of the tools by Ethiopia (LF and survey planning), Malawi (SCH, PC trends, and survey planning), and Burkina Faso (LF monitoring). Overview of ESPEN Collect for data collection and dashboard generation was provided.</p> <p>This presentation was followed by another presentation virtually delivered by Mr Alex PAVLUCK, providing detailed application of the CHIP platform. He provided overview on the Joint Application Package (JRSM, JRF, EPIRE). He introduced CHIP 2.0, which launched in January 2024. He demonstrated the LF page on the platform and provided overview of the new features of this version, including pointing out IUs below thresholds, Watchlist (trends and status of thresholds), Epidemiological survey results, and module for WASH facilities in each IU.</p> <p>Later, Farah AGUA made a virtual presentation on the importance of tracking progress on achieving targets in the NTD Roadmap, including clear direction on program implementation, tracking progress, accountability, efficient resource allocation, adaptive strategy, data-driven decision-making, global collaboration on NTD, and motivation and momentum. She introduced the Global NTD Annual Reporting Form (GNARF) built on DHIS-2. The country portal has charts, language option, status of submission, data quality check, and dashboard.</p> <p>The following presentation focused on the result on a survey conducted in 2022 to assess existing database and technical capacity at country level. A large proportion of data collection tools at health facility levels were paper based, with staff having limited technical capacity to operate database platforms. The survey demonstrated the need for capacity building for most of the NTD Programmes.</p>			

PATH introduced an integrated Post-Validation or Verification Planning toolkit for NTDs for integration of sustainable NTD surveillance that is undergoing development and will begin piloting in January 2024, with funding from the Bill and Melinda Gates Foundation.

Progress updates

New tools are being developed and existing tools are being upgraded to improve NTD data management.

Key issues and gaps

- Limited access to digital tools for data management at peripheral health facilities.
- Limited capacity of NTD Program to use the databases.

Challenges

- Slow uptake of the tools by countries.
- Some districts may not have required infrastructure (power supply, internet connection) to operate digital tools.

Main conclusions

- Innovation for data management and surveillance system – new robust tools are being developed and piloted.
- The data management tools are flexible and user-friendly.
- The data management tools can be customized to be inter-operable.

Action Points for NPMs

- Increase the uptake and utilization of the data management tools.

RECOMMENDATIONS

To Member States

- Provide infrastructure to support roll out of digital tools at peripheral health facilities.
- Invest in staff capacity building in operation of relevant database.

To WHO (WCO, AFRO, HQ)

- Continue innovation for new and robust, user-friendly tools for health data management.

To Partners

- Provide support to National Program to strengthen their capacity.
- Support innovation for new and robust, user-friendly tools for health data management.

Annex 7

WORLD HEALTH ORGANIZATION		AFRO TVD/ESPEN	
ANNUAL MEETING OF NTD NATIONAL PROGRAMMME MANAGERS			
Date: 30 th November 2023		Session 7: Partner case studies in countries <i>From Commitment to Results: Empowering Country-Led NTD Initiatives</i>	
Rapporteurs: Pauline Mwinzi, Mansour Ranjbar, Spes Ntabangana, Dismas Baza			
Summary of the session			
In order to deepen partners’ understanding of how commitment to country-driven methodologies and strategic partnerships translates into measurable results in the global efforts to eliminate, control, and manage Neglected Tropical Diseases, it is essential to engage them in exploring diverse collaborative models that showcase successful country-driven approaches within the NTD context. It is further critical to identify implementation challenges affecting country-led methodologies and partnerships to jointly find actionable solutions, as well as facilitate sharing of knowledge, best practices, and lessons learned from partner experiences in supporting and implementing country-led NTD initiatives. The session spotlighted the significant efforts of partners like Bill & Melinda Gates Foundation, Helen Keller Intl, Unlimit Health, ACT to End NTDs, Uniting to Combat NTDs, CHAI, ALMA, and The End Fund in contributing to NTD control and elimination in Africa.			
Progress updates			
<ul style="list-style-type: none">• BMGF doesn't provide direct funding to countries but monitors progress through implementation partners, human resources, and activity funding. This oversight extends to multi-partner platforms like ARISE, regional initiatives such as the Mwele Malecela Mentorship Programme for African women working in NTDs, and advocacy and resource mobilization efforts through Speak-Up Africa.• Unlimit Health innovatively addresses schistosomiasis control through a community-owned project, focusing on high-transmission areas and tailoring interventions to community-specific risk profiles. The organization strategically shifted from a vertical control approach to a comprehensive system approach, aligning goals with the WHO roadmap, as exemplified by initiatives like the Uganda SCH-WASH project, which integrates One-Health and WASH components while emphasizing resource mobilization.• The Hellen Keller International contributed to accelerating Trachoma elimination in Mali using a cost-effective door-to-door strategy, highlighting the importance of adaptable, context-specific approaches. With an elimination dossier submitted by Mali for nine endemic districts (<2% TT), the initiative underscores the importance of tailored elimination strategies, partner commitment, and government leadership.• Uniting to Combat NTDs: emphasizes the critical need for sustained buy-in and political commitment at the highest levels and from all relevant stakeholders. The Kigali Declaration on NTDs, endorsed by national governments, philanthropists, donor countries, multilaterals, academic and research institutions, industry partners, and NGOs, serves as a high-level, political leverage to accelerate progress and foster collaboration in the fight against NTDs.• ALMA actively promotes accountability and action through the implementation of scorecards, covering malaria, NTDs, and other health priority areas for Heads of State and Ministers of Health and Finance. This strategic approach, introduced as a tool to elevate the visibility of NTDs and enhance accountability at the country level, has proven effective, leading to increased resource allocations from both governments and partners.			

- **ACT to END NTDs** showcased the efficacy of its Lymphatic Filariasis project in enhancing Mass Drug Administration (MDA) processes through strategic planning, social mobilization, and thorough monitoring. The initiative emphasized the importance of continuous sub-district coverage analysis and involved stakeholders, local communities, and front-line staff. Furthermore, ACT to END NTDs East has played a pivotal role in developing sustainability plans in three countries and awarding 475 grants to local governments.
- **The End Fund** highlighted partner contributions, practical examples, success stories, and valuable lessons learned for African countries facing common challenges. Initiatives include financial support for country-led projects, establishing labs for Onchocerciasis elimination, adopting a country-led, community-owned approach to schistosomiasis, addressing Lymphatic Filariasis hotspots, and advocating for high political commitment and resource mobilization in NTD control/elimination.
- **CHAI (Clinton Health Access Initiative)** supports government NTD programs in 7 countries to enhance data quality, access, and utilization for accelerating the elimination of NTD-CPs (2021-2025). The organization also provides tools for cross-cutting approaches across countries and in specific regions.
- **International Federation of Anti-Leprosy Associations (ILEP)** works towards world free from leprosy. Has 14 member associations in 60 countries 28 of them in Africa working to stop leprosy, prevent disability and breaking stigma.
- **Sasakawa Health Foundation (SHF)** has been supporting the work of WHO on leprosy and various countries in their efforts toward the elimination of leprosy for several years.

Key issues and gaps

- Partner support to countries is uneven, leaving some countries neglected and in need.
- The key to success in Water, Sanitation, and Hygiene (WASH) efforts lies in active community participation.
- Addressing persistent Lymphatic Filariasis (LF) hotspots requires a multifaceted approach tackling high baseline prevalence, cross-border issues, low coverage, and inadequate supervision.
- Utilizing country-level scorecards can facilitate domestic resource mobilization.
- Yala LGA in Cross River State requires a qualitative study to identify challenges related to training, medicine sufficiency, and coverage.
- Recognizing the importance of micro-stratification and mapping of at-risk groups to design comprehensive, tailor-made interventions at the sub-district level, ensuring effective resource utilization.
- The importance of intensifying cross-cutting approaches to elimination and health system strengthening.

Challenges

- Insufficient alignment among partners and with national priorities, resulting in a lack of harmonization in approaches within countries.
- Persistent or hot spots in Lymphatic Filariasis (LF) attributed to low Mass Drug Administration (MDA) coverage, high non-compliance, and cross-border population movement.
- Varied environmental, social, and economic conditions between communities affecting NTD risk, requiring tailored context-specific solutions.

Main conclusions

The pivotal factor for NTDs control and elimination is country ownership, emphasizing the importance of shifting towards a more country-centric approach and fostering alignment among stakeholders. To expedite progress and adhere to value-for-money principles, there is a compelling need for a centralized fund to address gaps. Additionally, interventions by partners should align with government plans and priorities, incorporating elements such as microplanning, social mobilization, community dialogue, cross-border collaboration, strict supervision, and continuous sub-district coverage data analysis and response.

ACTION POINTS FOR NPMs

- Enhance visibility of frontline service providers and partner contributions in challenging terrains.
- Establish a mechanism to adopt global best practices, particularly from other African countries.
- Implement cost-effectiveness analysis and results-based management in NTD initiatives, focusing on resource mobilization through partnerships.
- Integrate micro-stratification and mapping for tailored interventions, emphasizing sub-district coverage analysis to address persistent hot spots.
- Utilize the ALMA scorecard for increased visibility and accountability, while prioritizing domestic resource mobilization and developing sustainability plans.

RECOMMENDATIONS

To Member States

- Establish a comprehensive multisectoral mechanism and strategic partnerships for effective NTD control/elimination.
- Lead and coordinate partners' contributions in NTD control/elimination efforts.
- Document, report, and ensure transparency in communicating achieved results and implemented actions.
- Strengthen collaboration with neighbouring countries to address persistent hot spots of NTDs.
- Accelerate progress and renew vigour toward NTDs control and elimination in alignment with the Kigali Declaration.
- Integrate NTDs into national health systems to enhance sustainability and effectiveness.

To WHO (WCO, AFRO, HQ)

- Facilitate and advocate for the documentation and sharing of best practices on NTDs control/elimination.
- Promote visibility of partner contributions to NTDs control/elimination efforts.
- Support the formulation of a results-oriented approach in NTDs control/elimination.
- Identify mechanisms to monitor the implementation of signed declarations/agreements and encourage innovations.

To Partners

- Support NTD control/elimination initiatives in line with WHO guidelines and national policies.
- Catalyse resource mobilization aligned with country priorities and mechanisms.
- Embed monitoring and evaluation in planned initiatives for effective assessment.
- Shift towards a more country-centric approach in program implementation.
- Secure alignments with other partners to enhance collaborative efforts for NTD control/elimination.

Annex 8

WORLD HEALTH ORGANIZATION		AFRO TVD/ESPEN	
ANNUAL MEETING OF NTD NATIONAL PROGRAMMME MANAGERS			
Date: 01/12/23		Session # 8: Supply chain management	
Rapporteur: DR FELICIA OWUSU-ANTWI			
Summary of the session This session focused on supply chain management systems in countries. Presentations were made describing challenges with the first mile and inventory management in countries. The available WHO resources to enhance capacity of countries were expounded. These include the online apps and mobile apps. Best practices and lessons from the Kenya and Rwanda supply chain mechanism were shared. The presentations revealed a well-functioning integrated supply chain system in Rwanda and an effective supply chain system in Kenya. Challenges with these systems were discussed.			
Key issues and gaps <ul style="list-style-type: none">• Rwanda before the integrated system did not have inventory of donated medicines however these are now mainstreamed in the existing national system.• Kenya has challenges with tax waiver delays and incomplete inventory and delayed reporting of NTD medicines.			
Challenges <ul style="list-style-type: none">• Weak coordination between MOH and Partners• Weak coordination between MOH and peripheral levels• Lack of digital platforms• Delay in submission of data and response to clarifications• Delays in greenlight approvals.• Complex clearing requirement in some countries among others			
Main conclusions <ul style="list-style-type: none">• WHO is available to support country procurement with funds pooled from domestic resources through the WHO catalogue.• Negotiation of price is also possible with bulk procurement.			
ACTION POINTS FOR NPMs <ol style="list-style-type: none">1. Countries are responsible and accountable to the NTD Medicines Donation and needs to give priority for MDA reporting.2. Countries to strengthen or develop a functional logistics management information system for NTD health products.			
RECOMMENDATIONS To Member States <ul style="list-style-type: none">• To provide realistic short -term forecasts to avoid over stockage and expiries.• To mainstream NTD products into national Health systems e.g. e-LMIS			
To WHO (WCO, AFRO, HQ): Pooled resources from national programmes can be supported by WHO through the WHO catalogue. Negotiation of price is possible			
To Partners: Support countries implement the supply chain management plans			

Annex 9

WORLD HEALTH ORGANIZATION		AFRO TVD/ESPEN
ANNUAL MEETING OF NTD NATIONAL PROGRAMMME MANAGERS		
01/12/23	Session # 9: Progress in the implementation of One Health Approach for NTDs in the Africa region	
Rapporteurs: Dr. Alex Tiendrebeogo, Pauline Mwinzi, Felicia OWUSU-ANTWI		
Summary of the session This session focused of the One Health Approach for NTDs. The session provided an opportunity for NTD Programme managers’ to a appreciate The One Health the key One Health pillars and approaches presented in the WHO NTD roadmap companion document on One Health. Further issues discussed include gaps in NTD Master Plans in the sections for One Health Approach, available guidance on One Health, opportunities, resources, training and tools available to update and OH NTD plans. The session empowered NTD Programme Managers to review OH components in their finalized NTD Master Plans jointly with country level the stakeholders. The pilot project on Taeniasis in Madagascar is providing an excellent example for other countries on how to initiate and coordinate One Health for NTDs		
Key issues and gaps There are key gaps in One Health plans as presented in NTD Master plans, which need to be reviewed and updated.		
Challenges Coordination mechanisms for One Health NTDs are weak or lacking Lack of Funding		
Main conclusions <ul style="list-style-type: none">Costed One Health Action plans for countries should be finalized and included in NTD master plans to aid in stakeholder mobilization and fundraisingA multisector approach required for an effective one health strategy implementation.		
ACTION POINTS FOR NPMs: <ul style="list-style-type: none">One Health plans at country level to be included in NTD Master plansAdvocacy among stakeholders		
RECOMMENDATIONS To Member States: <ul style="list-style-type: none">Prioritization of one health approach for NTDs in National health strategies and domestic resource mobilization.To WHO (WCO, AFRO, HQ): Updated guidance and tools for one health approaches for NTD Programme Managers.		
To Partners: Support NTD Programme Managers, Countries and WHO towards identified targets.		

Annex 10

WORLD HEALTH ORGANIZATION		AFRO TVD/ESPEN	
ANNUAL MEETING OF NTD NATIONAL PROGRAMMME MANAGERS			
Date: 01/12/23		Session #10: Country case studies on integration and collaboration – Cameroon, Cote d’Ivoire and Ethiopia	
Rapporteur: DR FELICIA OWUSU-ANTWI			
Summary of the session			
Progress updates			
<p>Cameroon presented its experience on the integrated control of skin NTDs. Developed and implemented an integrated surveillance system for 21 health districts. This was done through development of guidelines and tools, followed by training and an integrated surveillance model established.</p> <p>Côte d’Ivoire also shared its experience on integration of skin NTDs and piloting MDA integrated with active case finding for skin NTDs in 2 districts.</p> <p>Key activities included advocacy, community mobilization through flyers, collaboration with WHO to integrate DHIS2, and comprehensive training for health staff. Noteworthy best practices encompassed effective management of DHIS reporting, supervision, campaigns, and mapping for skin NTDs. Additionally, integrated social mobilization appeared as another successful practice.</p> <p>Ethiopia shared its experience in inter-sectoral collaboration with WASH, Animal Health and Refugee Services for GW Surveillance (EDEP). Strengthening coordination and multi sectoral collaboration is key. Collaborating with other sectors and working in partnership helped the programme to achieve more (positively impacted NTDs).</p>			
Key issues and gaps			
<ul style="list-style-type: none">• Strengthening coordination and multisector collaboration is key.• Community participation is key• Management of other skin diseases is essential.			
Challenges			
<ul style="list-style-type: none">• There were implementation challenges, training and coordination challenges which were addressed.• Need for stronger health systems for effective surveillance and response.• Development of integrated tools for disease monitoring and control.• Training healthcare workers in integrated disease management techniques.• Adapting strategies to local contexts and challenges.			

Main conclusions

- The benefits of integrated approach and multisectoral collaboration are evident as it contributes to strengthening the overall health system.
- Major lessons learnt from the presented country experiences (Cameroon, Cote d'Ivoire and Ethiopia) are:
 - Strengthening health systems for better surveillance and response.
 - Developing and utilizing integrated tools for disease monitoring and control.
 - Training healthcare workers in integrated disease management techniques.
 - Adapting strategies to local contexts and challenges.
 - Collaborating across sectors to enhance resource mobilization and impact.

To WHO (WCO, AFRO, HQ)

- Continue to provide technical assistance and resources for integrated surveillance and response.
- Enhance the coordination mechanism among partners to ensure effective integration
- Document and share best practice of integrated approach
- Support countries to strengthen monitoring, advocacy and resource mobilization.
- Coordinate inter-country collaborations and knowledge sharing.
- Strengthen laboratory capacity in countries to confirm cases.
- Ensure supply of medicines and diagnostic tests for NTDs
- Advocate for allocation of domestic funding to complement partner funding for NTDs to ensure sustainability.
- Promote research and innovation in NTD management.

To Partners

- Support national NTD programmes to implement the integrated approach
- Advocate for allocation of domestic funding for NTDs to ensure sustainability of programmes.
- Support capacity building and training initiatives.
- Collaborate in research and data sharing.
- Support community-based interventions and awareness programs.