



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

**November 29 to  
December 1, 2023**

**BRAZZAVILLE, CONGO  
WHO AFRICA REGIONAL OFFICE**



**World Health  
Organization**

**African Region**



**HEALTH  
FOR ALL**

# Annual Meeting of National NTD Program Managers in the WHO African Region

## *Monitoring Funding Availability*

ESPEN, 29<sup>th</sup> November 2023





# Tracking Funding Availability – Inquiries

## Background

- UK-FCDO early interruption of ASCEND Project in 2021 – **1,838 IU impacted**

## Objective

Identify regions at risk due to funding constraints for MDA against NTDs.

## Inquiry Approach

- Two-phase cohort based on JRSM submissions.
- **Phase 1 (Nov 2022 - Jan 2023):** Data on 2023 interventions.
- **Phase 2 (Apr 2023 - Ongoing):** Data on 2024 interventions.

## Key Metrics

- **Funding Availability:** Inquiry into funding status for MDA and M&E activities.
- **Funding Sources:** Identification of secured funds, MoH allocations, and partner support.
- **Reporting Rates:**
  - 2023: 26/44 countries reported funding.
  - 2024: 31/44 countries have reported.
- **Consistency:** 21 countries reported for both years.
- **Population Estimates:** Categorization by funding status (secured/needed).
- Estimates for maximum population across diseases and by PC groups: LF/Oncho, STH/SCH.

# Tracking Funding Availability – Inquiry

*Total summaries for 26 and 31 countries reporting for 2023 and 2024, respectively*

Disease	2023		2024	
	No. IU MDA	Funding gap MDA (%)	No. IU MDA	Funding gap MDA (%)
Lymphatic filariasis	737	12%	534	32%
Onchocerciasis	1101	11%	1253	7%
STH	1737	35%	2029	21%
Schistosomiasis	1821	24%	2041	27%

*Total summaries for 21 countries reporting for 2023 and 2024*

Disease	2023		2024	
	No. IU MDA	Funding gap MDA (%)	No. IU MDA	Funding gap MDA (%)
Lymphatic filariasis	714	11%	345	16%
Onchocerciasis	1076	10%	1139	4%
STH	1590	32%	1554	10%
Schistosomiasis	1602	19%	1516	15%

# Reported Funding Gaps in 2024 – MDA

Country	Lymphatic filariasis			Onchocerciasis			STH			Schistosomiasis		
	No. Partners	No. IU MDA	Funding gap MDA (%)	No. Partners	No. IU MDA	Funding gap MDA (%)	No. Partners	No. IU MDA	Funding gap MDA (%)	No. Partners	No. IU MDA	Funding gap MDA (%)
Angola	2	38	58%	1	47	34%	1	91	38%	1	124	29%
Benin	1	0	N/R	2	51	0%	1	31	0%	1	71	0%
Botswana	0	0	N/R	0	0	N/R	0	9	100%	0	1	100%
Burundi	0	0	N/R	1	12	0%	3	48	0%	2	18	0%
CAR	2	32	0%	2	20	0%	2	19	0%	2	27	0%
Chad	1	25	0%	1	45	0%	1	9	0%	1	57	0%
Equatorial Guinea	0	15	100%	0	0	N/R	0	18	100%	1	2	100%
Eritrea	0	0	N/R	0	0	N/R	0	0	N/R	0	5	100%
Eswatini	0	0	N/R	0	0	N/R	0	3	100%	0	44	100%
Ethiopia	3	36	0%	3	286	0%	2	628	9%	2	80	0%
Gabon	0	18	100%	0	27	100%	0	47	100%	0	14	100%
Ghana	1	7	0%	1	139	0%	0	0	N/R	1	156	0%
Guinea	1	13	0%	1	24	0%	1	17	0%	1	21	0%
Guinea-Bissau	1	65	0%	1	33	100%	1	70	0%	1	24	0%
Liberia	1	4	0%	1	15	0%	1	9	44%	0	8	100%
Madagascar	0	77	100%	0	0	N/R	1	69	0%	1	87	0%
Malawi	0	0	N/R	1	10	0%	1	11	0%	1	28	0%
Mali	0	0	N/R	4	20	0%	0	0	N/R	4	61	0%
Mozambique	1	36	3%	0	0	N/R	1	143	76%	0	153	100%
Niger	1	0	N/R	0	0	N/R	1	1	100%	1	38	53%
Nigeria	2	95	20%	2	391	0%	2	414	8%	2	573	0%
Rwanda	0	0	N/R	0	0	N/R	0	30	0%	0	30	0%
Sao Tome & Principe	0	0	N/R	0	0	N/R	0	7	100%	0	2	100%
Senegal	1	3	0%	0	0	N/R	1	12	0%	1	53	0%
Sierra Leone	2	1	0%	2	14	0%	2	16	0%	2	10	0%
South Sudan	1	51	39%	1	49	33%	1	6	50%	0	38	100%
Tanzania (Mainland)	1	7	0%	1	26	0%	1	122	73%	1	141	75%
Tanzania (Zanzibar)	1	11	0%	0	0	N/R	1	11	0%	1	9	0%
The Gambia	0	0	N/R	0	0	N/R	0	4	100%	0	37	100%
Togo	0	0	N/R	1	32	0%	1	38	0%	1	37	0%
Uganda	0	0	N/R	1	12	0%	1	146	0%	0	92	100%
<b>Total</b>		<b>534</b>	<b>32%</b>		<b>1253</b>	<b>7%</b>		<b>2029</b>	<b>21%</b>		<b>2041</b>	<b>27%</b>

# Reported Funding Gaps in 2024 – Surveys

Country	Lymphatic filariasis			Onchocerciasis			STH			Schistosomiasis		
	No. Partners	No. IU M&E	No funding for M&E (%)	No. Partners	No. IU M&E	No funding for M&E (%)	No. Partners	No. IU M&E	No funding for M&E (%)	No. Partners	No. IU M&E	No funding for M&E (%)
Benin	1	4	0%	2	5	0%	1	17	0%	1	43	0%
Botswana	0	0	N/R	0	0	N/R	0	9	100%	0	1	100%
CAR	0	0	N/R	1	20	0%	0	0	N/R	0	0	N/R
Chad	0	11	100%	0	0	N/R	0	0	N/R	0	0	N/R
Equatorial Guinea	0	0	N/R	0	14	100%	0	0	N/R	1	16	0%
Eritrea	0	3	100%	0	0	N/R	0	0	N/R	0	5	100%
Ethiopia	1	62	0%	1	84	0%	1	73	10%	1	61	0%
Ghana	1	8	0%	1	81	38%	0	0	N/R	1	34	0%
Guinea	1	16	0%	0	15	100%	0	7	100%	0	12	100%
Guinea-Bissau	1	29	0%	1	19	0%	0	0	N/R	0	0	N/R
Liberia	1	9	0%	1	15	0%	0	15	100%	0	15	100%
Madagascar	0	17	100%	0	0	N/R	0	0	N/R	0	0	N/R
Malawi	0	0	N/R	1	8	0%	1	11	0%	0	0	N/R
Niger	1	48	0%	0	0	N/R	1	13	0%	1	13	0%
Nigeria	1	1	0%	0	1	100%	0	0	N/R	0	0	N/R
Rwanda	0	0	N/R	0	0	N/R	0	30	0%	0	30	0%
Sao Tome & Principe	0	0	N/R	0	0	N/R	0	7	100%	0	7	100%
Senegal	1	7	0%	0	0	N/R	1	11	0%	1	11	0%
Sierra Leone	2	8	0%	2	14	0%	2	16	0%	2	7	0%
South Sudan	1	11	0%	0	0	N/R	0	0	N/R	0	0	N/R
Tanzania (Mainland)	1	9	0%	1	10	0%	1	122	92%	1	141	93%
Tanzania (Zanzibar)	1	11	0%	0	0	N/R	1	11	0%	1	1	0%
The Gambia	0	0	N/R	0	0	N/R	0	44	100%	0	44	100%
Togo	0	0	N/R	1	7	0%	1	15	0%	1	15	0%
Uganda	0	0	N/R	0	0	N/R	1	5	0%	0	0	N/R
<b>Total</b>		<b>254</b>	<b>12%</b>		<b>293</b>	<b>21%</b>		<b>406</b>	<b>50%</b>		<b>456</b>	<b>47%</b>

# Tracking Funding Availability – Inquiry

	2023		2024	
	26 countries		25 countries*	
	Areas that have NOT secured funding yet	Areas that have secured funding	Areas that have NOT secured funding yet	Areas that have secured funding
<i>Population Requiring PC</i>	<b>91,072,284</b>	318,976,198	<b>93,843,113</b>	211,753,859
<i>Population Requiring PC for LF/ONC</i>	37,788,061	230,391,600	34,764,107	92,371,640
<i>Population Requiring PC for STH/SCH</i>	58,733,257	170,010,170	66,043,091	171,067,288
<i>Cost Estimate PC</i>	<b>\$ 45,536,142.00</b>	<b>\$ 159,488,099.00</b>	<b>\$ 46,921,556.50</b>	<b>\$ 105,876,929.50</b>
<i>Cost Estimate PC for LF/ONC</i>	\$ 18,894,030.50	\$ 115,195,800.00	\$ 17,382,053.50	\$ 46,185,820.00
<i>Cost Estimate PC for STH/SCH</i>	\$ 29,366,628.50	\$ 85,005,085.00	\$ 33,021,545.50	\$ 85,533,644.00

*Assuming average cost of US\$ 0.5 per person treated*

*\* JRSM report for 5 countries including Nigeria & Ethiopia not yet uploaded to the ESPEN database, and 1 country (Cameroon) have not yet submitted the funding information.*

# Tracking Funding Availability – ESPEN IU Planner v1.0

EXPANDED SPECIAL PROJECT FOR ELIMINATION OF NEGLECTED TROPICAL DISEASES

IMPLEMENTATION UNIT PLANNER

Contact us | Report issue | Login

Select country

World Health Organization  
REGIONAL OFFICE FOR Africa

Con la tecnología de Google

## IMPLEMENTATION UNIT PLANNER

The ESPEN Portal enables health ministries and stakeholders to share, and exchange subnational programme data, in support of the NTD control and elimination goals.

Countries planning MDA in 2023

Number of diseases

0 1 2 3 4

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## Principles/Objectives

- Identify funding gaps
- Confirm or reject country reporting on funding support for planned actions
- Clarify stakeholder roles (donors/implementers)
- Edit endemicity data or add survey needs
- Registration and edit permissions provided by ESPEN
- Currently beta version under piloting
- Launch expected in January 2014





# Tracking Funding Availability – ESPEN IU Planner

The screenshot displays the ESPEN IU Planner interface for the Central African Republic. The top navigation bar includes the ESPEN logo, the text 'EXPANDED SPECIAL PROJECT FOR ELIMINATION OF NEGLECTED TROPICAL DISEASES', and 'IMPLEMENTATION UNIT PLANNER'. On the right, there are links for 'Contact us', 'Report issue', and 'Login', along with dropdown menus for 'Central African Republic' and 'Seleccionar idioma'. The World Health Organization logo and 'REGIONAL OFFICE FOR Africa' are also present.

The main content area is titled 'Central African Republic' and features a sidebar with navigation icons for 'LF', 'ONCHO', 'SCH', and 'STH'. The 'LF' (Lymphatic filariasis) icon is selected. Below the sidebar, there are filters for 'Year' (set to 2023) and 'PLANNED ACTIVITIES' (MDA, Surveys, Combined). The 'Roles' section includes 'Role unknown', 'Donor', 'Fund manager', and 'In-country partner'. The 'PARTNER' section has a 'Select partner' dropdown.

The main map area is titled 'Lymphatic filariasis' and shows 'Funding status' for the Central African Republic. The map is color-coded: green for 'Funding secured', pink for 'Funding needed', grey for 'Nothing required', and orange for 'PC planned, but funding not reported'. A legend at the bottom right of the map provides the key for these colors. A 'DOWNLOAD MAP' button is located in the top right corner of the map area.

An 'Overview' panel on the right side of the map provides summary statistics:  
Total IUs: 35  
2 out of 2 IUs planning both MDA & Surveys require funding  
8 out of 30 IUs planning only MDA need funding  
0 out of 0 IUs planning only surveys need funding  
3 IUs have nothing planned

## Functionalities

- Visualizing confirmed support
- Overview funding committed and planned MDA/Surveys
- Pop-ups window with summary information when clicking on an IU
- Overview landing page with summaries of funding availability, partners, etc. (*under development*)
- Selection by multiple options: activity, partner, role, etc.

# Tracking Funding Availability – ESPEN IU Planner

The screenshot displays the ESPEN IU Planner interface for the Central African Republic. The top navigation bar includes the ESPEN logo, the text 'EXPANDED SPECIAL PROJECT FOR ELIMINATION OF NEGLECTED TROPICAL DISEASES', and 'IMPLEMENTATION UNIT PLANNER'. On the right, there are links for 'Contact us', 'Report issue', and 'Login', along with a dropdown menu for 'Central African Republic' and a 'World Health Organization' logo.

The main content area is titled 'Central African Republic' and features a sidebar with filters for 'Year' (2023), 'PLANNED ACTIVITIES' (MDA, Surveys, Combined), 'Roles' (Role unknown, Donor, Fund manager, In-country partner), and 'PARTNER' (Select partner). The main map shows the country of Central Africa with a legend indicating funding status: green for 'Funding secured', pink for 'Funding needed', grey for 'Nothing required', and orange for 'PC planned, but funding not reported'. A specific area, BAMBARI (2023), is highlighted in blue.

The right-hand panel provides details for 'BAMBARI (2023)', including the text 'Endemic (requiring MDA) \ 248,182 requiring treatment'. It shows 'Planned Activities' with 'MDA' (FUNDING SECURED) and 'SURVEY' (PC PLANNED, BUT FUNDING NOT REPORTED). Below this, it lists 'Partners' with '2 Funding/Implementing partners': 'The END Fund' and 'Christian Blind Mission', both with 'MDA' icons. A footer note states: 'The implementers listed above may update their presence in this IU by logging in or by creating an account if you do not have one already. If you are not one of the implementers listed above and you want to recommend an update to the information provided, please complete our feedback form.'

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## Functionalities for partner (after log in)

- Revise information provided by country programmes
- Enter the role played: donor, fund manager, in-country partner
- Option to download CSV with the preliminary information by IU for easing data entry
- Possibility to confirm long-term support beyond the year specified

# Wrap Up

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- **Funding Gaps for 2023/2024:** Persistent shortfalls reported, with some progress in countries submitting data for both years.
- **LF MDA Funding:** An exception to improvements, with sustained challenges in securing funds.
- **Deworming Campaign Challenges:** Countries facing significant hurdles in financing these campaigns.
- **Schistosomiasis PC Interventions:** More than 27% of implementation units have not secured 2024 funding.
- **At-Risk Populations of missing needed PC because of lack of funding:**
  - ✓ 2023: Over 91 million people in 26 countries.
  - ✓ 2024: Over 94 million people in 25 countries.
- **It is possible to act to minimize the gaps in 2024.**

# Thank you

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# WHO Sustainability Framework for action against NTDs, 2021-2030

*Dr Pamela S. Mbabazi*

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

29 Nov-1 Dec 2023

*“Stepping up County Ownership to Accelerate Programmatic Action”*

# 21

**Ending the neglect to attain the Sustainable Development Goals:**

**A sustainability framework for action against neglected tropical diseases, 2021 - 2030**

**DR. MBABAZI, Pamela Sabina**  
**Strategic Information and Analytics unit**  
**Dept of Control of Neglected Tropical Diseases**  
**WHO-Geneva, HQ**

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# 21



Ending the neglect to  
attain the Sustainable  
Development Goals  
A sustainability framework  
for action against neglected  
tropical diseases 2021–2030

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## 01.

Purpose of the  
framework

## 02.

Description of the  
framework

## 03.

Use of the framework

## 04.

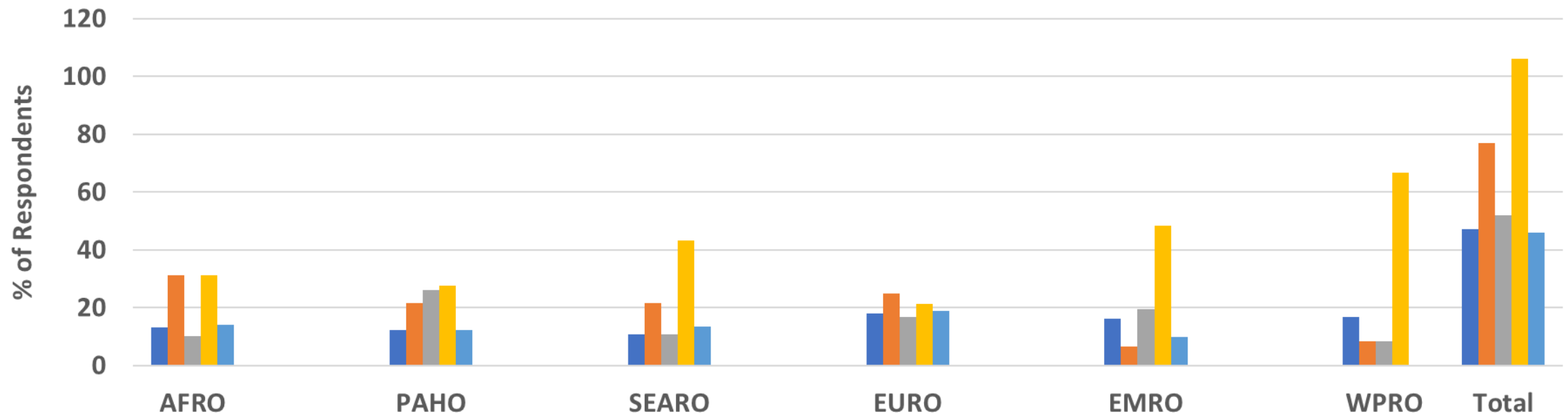
Sustainability  
assessment questions  
and potential actions

## 05.

Conclusion

# Highest Ranked Definition of Sustainability by WHO Region, (Feb – Mar 2020)

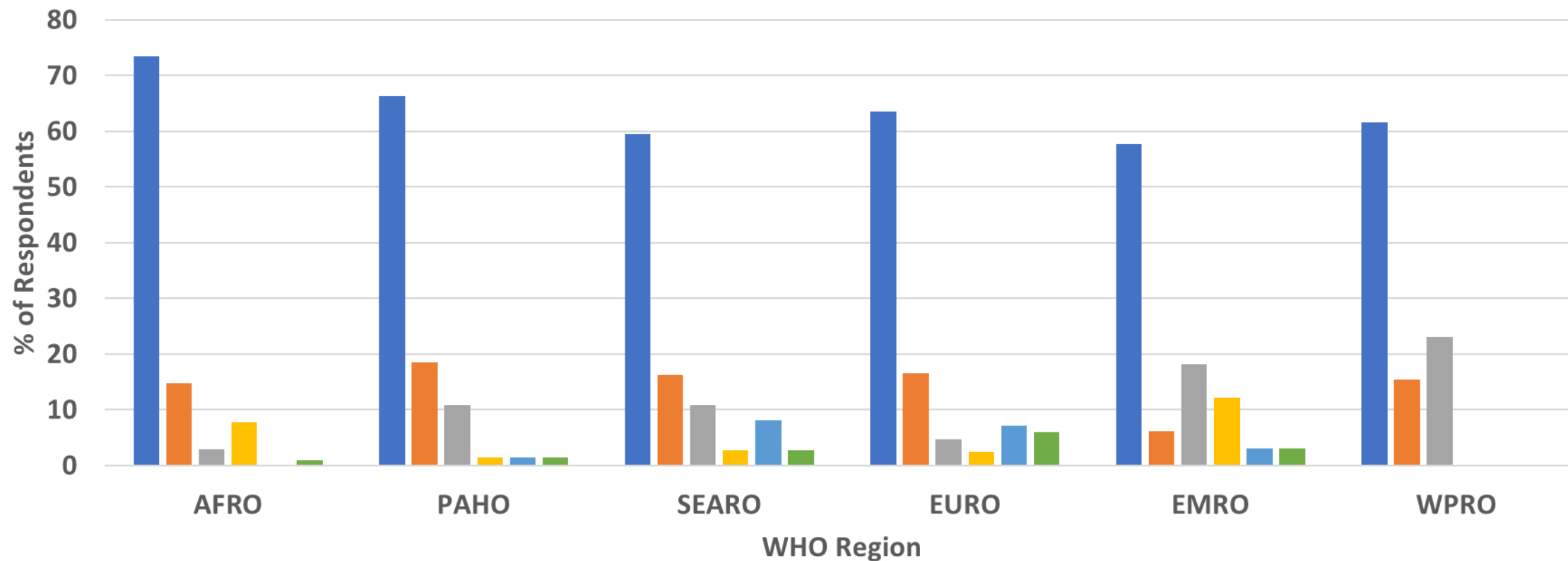
- *Sustainability for NTDs interventions is achieved when countries...*



- can meet the current national and local needs of their NTD programme without compromising the ability to meet its future programme needs
- have the capacity to continue delivering effective NTD programmes after major financial, managerial and technical assistance from an external donor (s) is terminated
- maintain programme achievements of control, elimination and eradication regardless of type of sources of funding and related support
- demonstrate political commitment to NTD interventions at national and local levels
- effectively integrate NTD interventions into other health and non-health activities

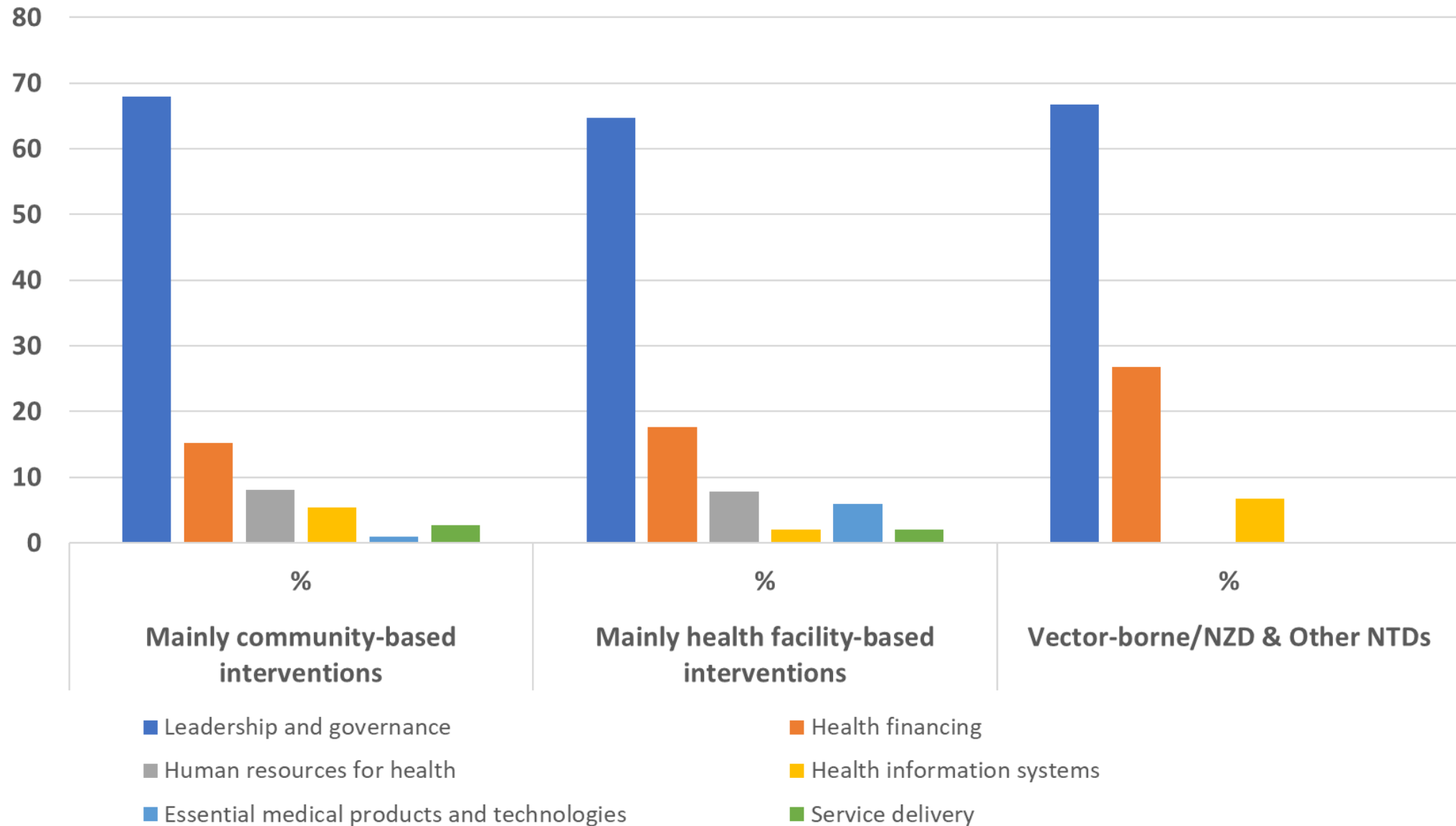


# Highest Ranked Health System Strengthening Building Block in Determining Sustainability of NTD Interventions: responses By WHO Region (Feb – Mar 2020)



- Leadership and governance
- Health financing
- Human resources for health
- Health information systems
- Essential medical products and technologies
- Service delivery

# Highest Ranked Health Systems Strengthening Building Block in Determining Sustainability of NTD Interventions: Response by type of Intervention, Feb – Mar 2020



# Sustainability Framework focus: Survey findings (2000)



Strengthen **Political and Financial Commitment** and technical capacity to sustainably achieve global NTD targets and milestones aligned with the SDGs and UHC objectives



Integrate **NTDs Services and Mainstream NTD Programmes** into national health system, including for NTD informatics wherever possible



Enhance **Coordination and Collaboration** across sectors to strengthen NTD services



# Global NTD programme Strategic priorities – Dr Soce Fall, WHO

## Outcomes of functional review Q1 – Q2, 2023



**Continue advocacy and visibility of NTDs internally & externally**

Advocacy into Action



**Partnership**

Continue strengthening the Global NTD Programme and leveraging partnerships in and outside the community

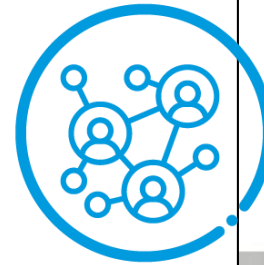
**Strengthen Coordination**



**Costing**

Global Action Plan 2025-2030

(comprehensive **costed implementation plan** for delivery of the road map)



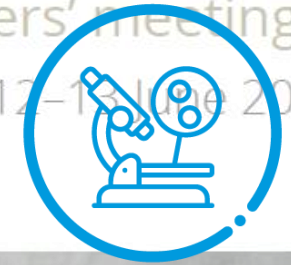
**Sustainability and Sustainable funding**

- Pilot flagship programmes
- Global Arbovirus Initiative
- Accelerate GW programme with Health Emergencies
- ONE Health
- Skin NTDs and PHC



**WHO Leadership**

- Implementation of functional review and also implementation of key flagship programmes
- Working Groups
- Global and country platforms



**Technical Quality**

- Climate change
- M&E, NTD information systems**
- Supply Chain
- R&D Blueprint
- Diagnostics
- Key high quality Technical Products

Report of the WHO Global Neglected Tropical Diseases Programme partners' meeting  
Geneva, Switzerland, 12–13 June 2023

**CHANGE**



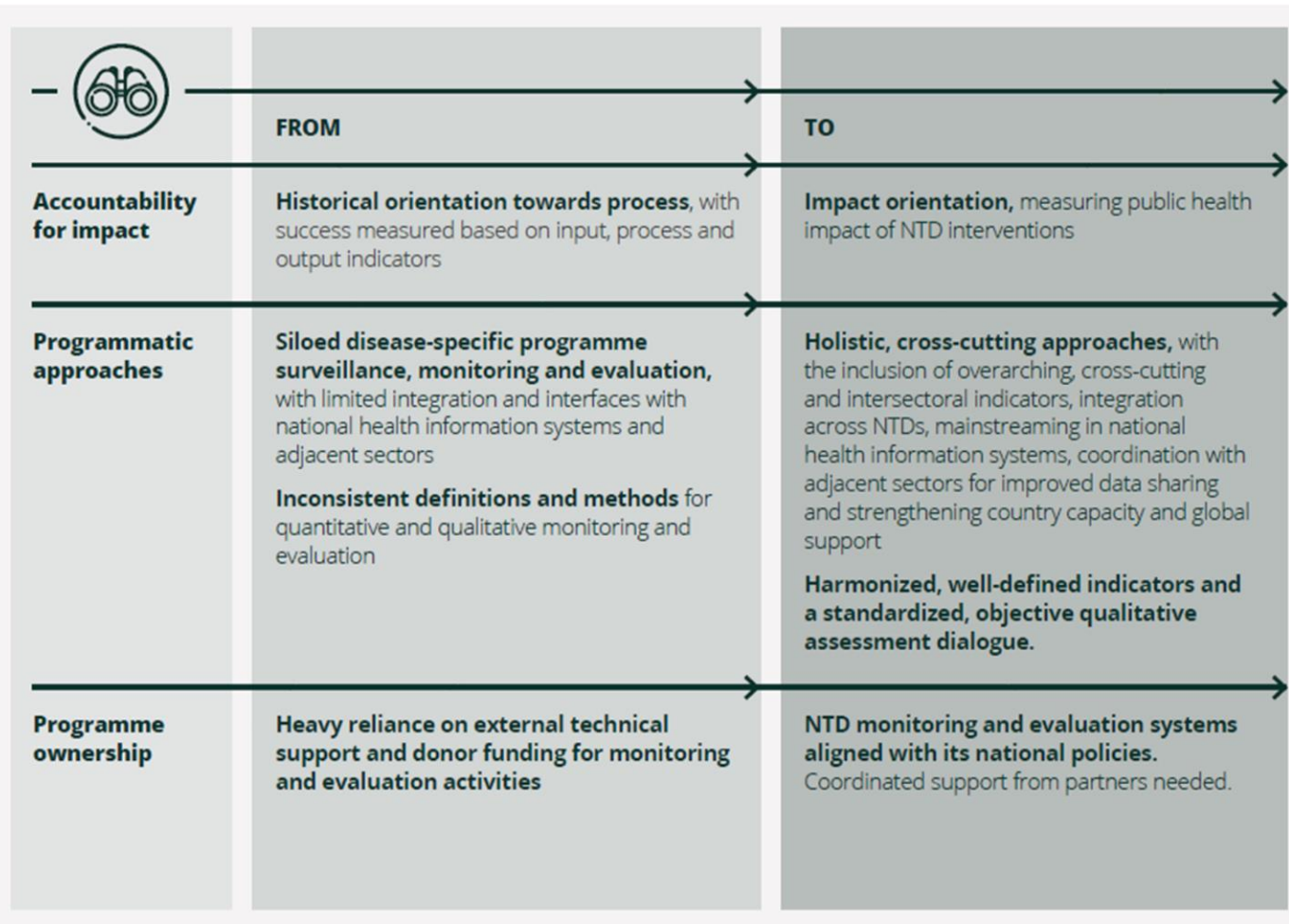
# Sustainability framework for NTD programmes\*

- Presents an NTD-specific definition of sustainability: **“the ability of national health systems to maintain or increase effective coverage of interventions against NTDs to achieve the outcomes, targets and milestones identified in the new road map for 2030.”**
- Facilitates an **action-oriented approach to planning, generate political momentum and enhance resource mobilization** to support the delivery of sustainable interventions against NTDs

\*NNN sustainability group, USAID, WHO

# Sustainability framework is aligned to NTD road map strategic shifts

Fig. 4. Shifts in approaches to monitoring and evaluating progress towards the 2030 road map targets



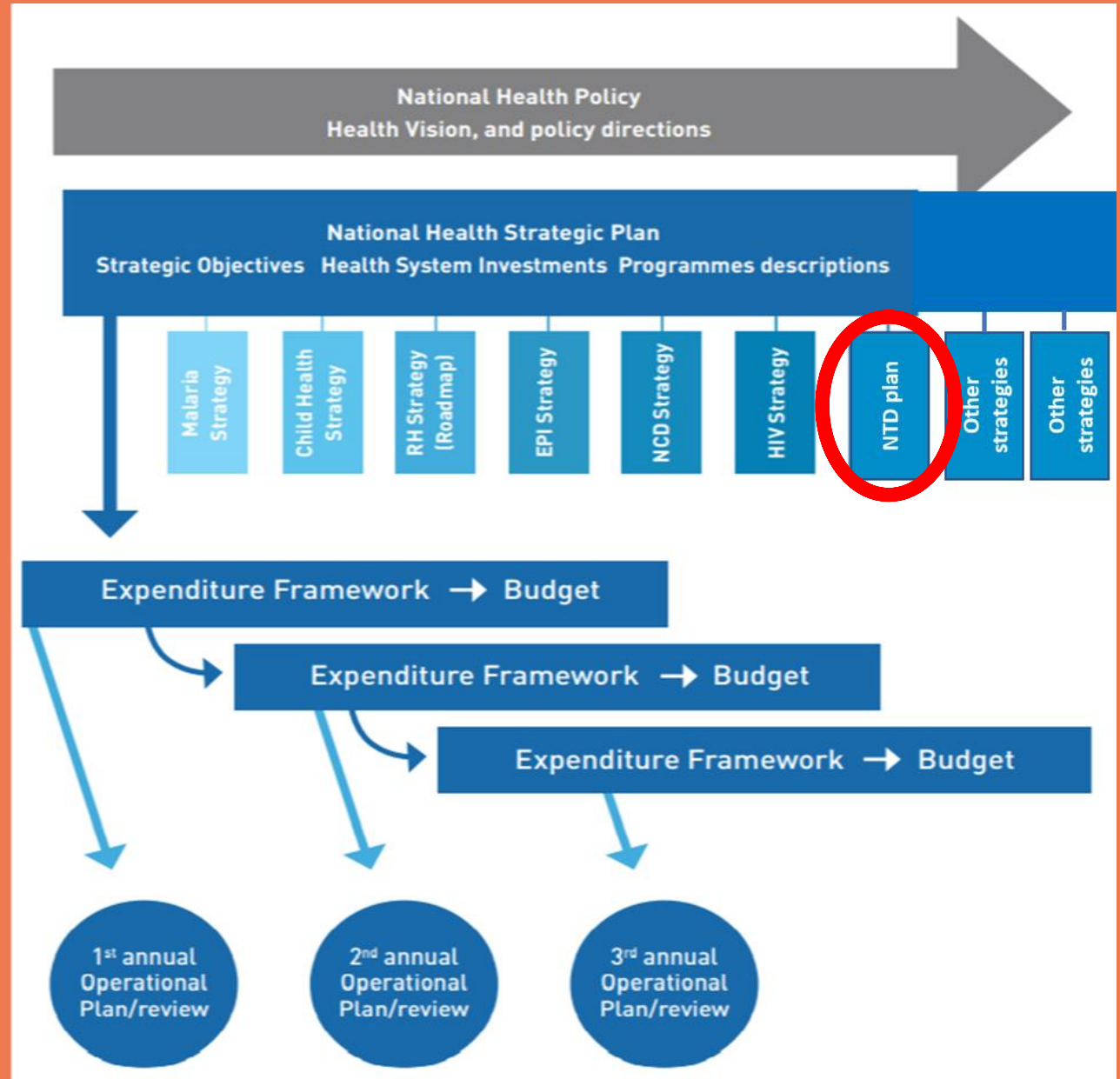
By focusing on:

- **outcome measurement over inputs**
- **systems over diseases: mainstreaming, coordination, intersectoral engagement**
- **including NTD interventions and targets in National Health Sector Strategic Plans (NHSP)**

# Starting point

Find the entry point in the health system for NTDs

Adapted from: Schmets G, Kadandale S, Porignon D, Rajan D. Chapter 1. Introduction. In: Schmets G, Rajan D, Kadandale S, editors. Strategizing national health in the 21st century: a handbook. Geneva: World Health Organization; 2016.



# Framework builds on the principles in the NTD road map 2021 – 2030

- Contextual considerations/inputs
- Crosscutting approaches to analyze how NTD interventions are implemented through the health system (pillars) and non-health sectors
- Promoting universal health coverage



World Health Organization

Section 4: assessment questions and potential actions



# Existing WHO guidance on Systems-based approaches to sustainability

## **Cross-programmatic efficiency analysis**

This WHO guidance document provides an approach to analysing efficiency across health programmes by identifying where duplication, overlap or misalignment may exist across health programmes and the overall health system (4).

## **UHC2030 sustainability and transition principles**

The UHC2030 statement on sustainability and transition provides a set of common principles to guide the actions of national governments, development agencies, and other health stakeholders in response to transition from external funding. These principles reflect the consensus made among countries and development partners (5).

# Target audiences



## Box 1. Primary users of the sustainability framework

### National policy-makers

Guide investments into national NTD programmes to enhance sustainability

### NTD programme managers

Develop sustainability action plans and support implementation of sustainability actions

### Local government

Understand service integration, oversight and policy implementation

### Donors and implementing partners

Identify opportunities for technical assistance and funding to support sustainability

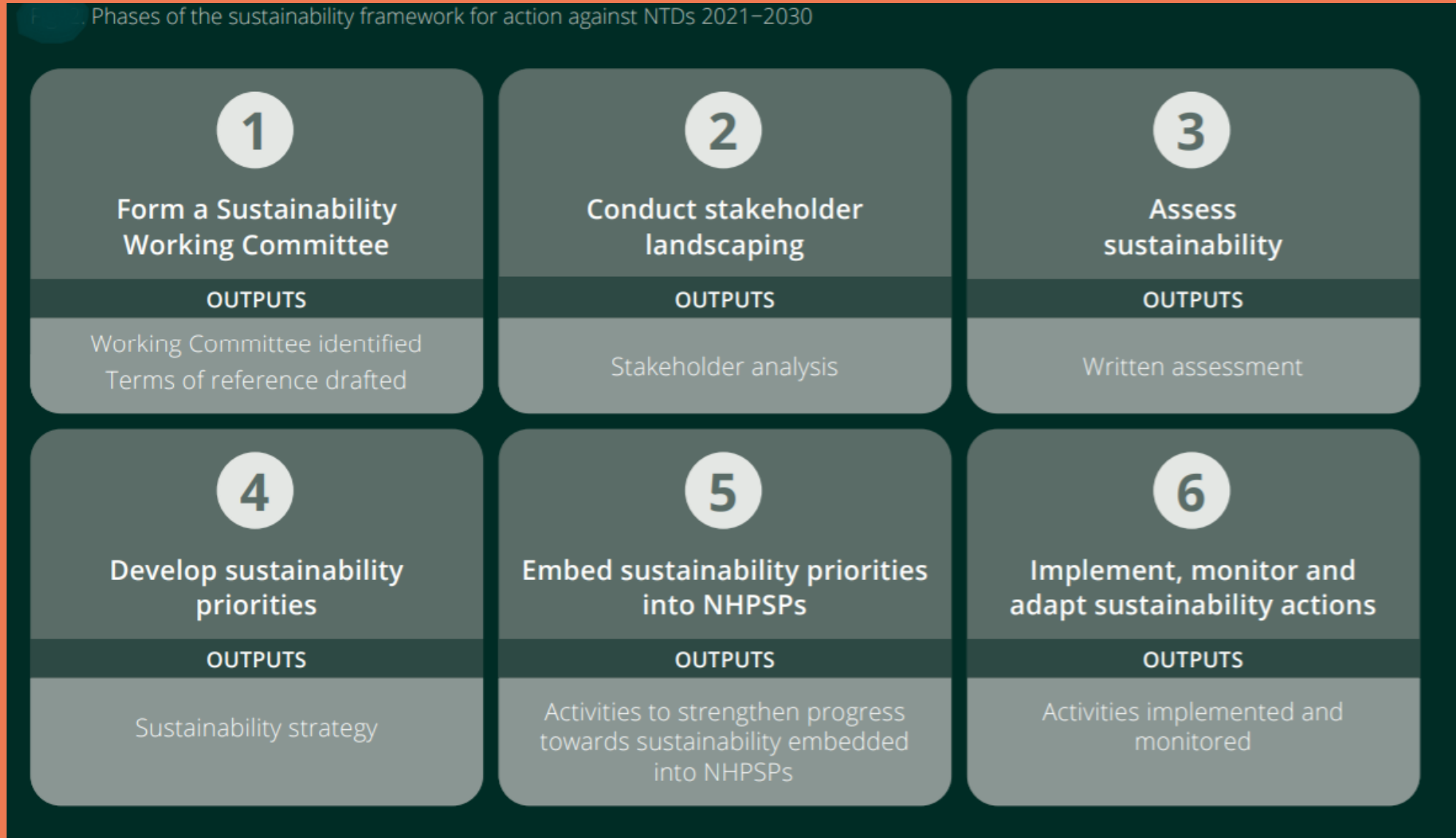
### Academia and research

Clarify scientific understanding and operational research needs related to sustainability

### Non-health sector partners (e.g. agricultural, education and WASH)

Identify common service platforms and synergies for investment

# Application of the framework



# Decision tree: Recognizing that countries start at different points

## Root cause analysis

An example of a problem is: *NTD interventions are under-resourced in annual plans.*

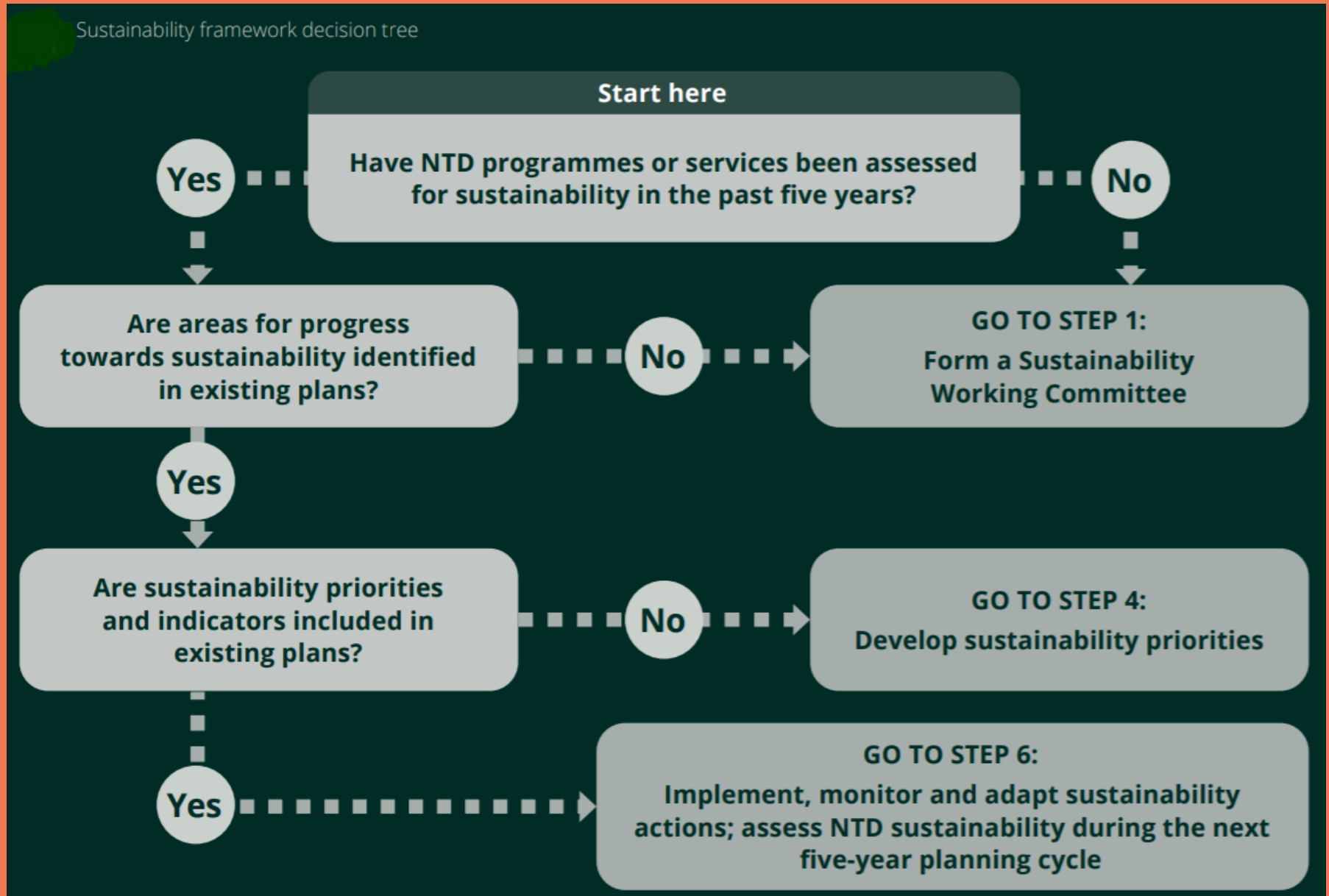
**Why?** NTD data are not available for decision-making. (Second why)

**Why?** NTD data are not integrated into the health management information system. (Third why)

**Why?** NTD data are reported directly to the NTD programme. (Fourth why)

**Why?** NTD data are collected using programme-specific indicators and tools. (Fourth why)

**Why?** The NTD programme operates outside normal ministry structures. (Fifth why, a root cause)



# Indicators for tracking progress on implementing sustainability of NTD programmes

- **Guiding principles**

- Same cross-cutting indicators in the NTD road-map M&E framework 2021 - 20330
- Use existing indicators: (replace “countries” with “districts”)
- Align with sector-wide and partner initiatives, such as USAID sustainability for NTD programmes
- Utilize/harness potential of secondary data
- Use proxy measures where possible

NTD road map 2030 indicators: CROSS-CUTTING TARGETS	Target	Road Map Cross- Cutting Theme	Health system pillar
Integrated treatment coverage index for preventive chemotherapy	75%	Integration	Service delivery
Number of countries that adopt and implement integrated skin neglected tropical disease strategies	40%	Integration	Service delivery
Share of countries with neglected tropical diseases integrated in national health strategies/plan	90%	Integration	Leadership and governance
Percentage reduction in number of deaths from vector-borne neglected tropical diseases (relative to 2016) – to achieve WHO’s global vector control response goal	75%	Coordination	Access to essential medicines and supplies
Access to at least basic water supply, sanitation and hygiene in areas endemic for neglected tropical diseases – to achieve targets 6.1 and 6.2 of Sustainable SDG6 Development Goal 3	100%	Coordination	Service delivery
Share of the population at risk protected against catastrophic out-of-pocket health expenditure due to neglected tropical diseases – to achieve target 3.8 of Sustainable Development Goal 3	90%	Mainstreaming	Health financing
Share of countries including neglected tropical diseases interventions in their package of essential services and budgeting for them	90%	Mainstreaming	Health financing service delivery
Share of countries with guidelines for management of neglected tropical diseases-related disabilities within national health systems	90%	Mainstreaming	Service delivery Health financing
Share of countries reporting on all relevant endemic neglected tropical diseases	90%	Mainstreaming	Health information system
Share of countries collecting and reporting data on neglected tropical diseases disaggregated by gender	90%	Mainstreaming	Health information system



# Global NTD Annual reporting Form: Country level – Information on sustainability

A2 Country progress

← ← SCROLL LEFT AND RIGHT → → →

## Country progress

This sheet gathers information for the country profile, including cross-cutting indicators, gap assessment and logistics, and is divided into the 11 dimensions of the road map. At the end of each question, superscript numerals are used to denote rationale and use: **1** for country information on NTDs (country profile) and programmatic actions; **2** for monitoring progress on cross-cutting indicators; **3** for GAT; and **4** for LMIS. For readability of the selection options for each disease, an explanatory note is provided when users hover over the question or answer.

Disease	Buruli ulcer	Chikungunya	Chromoblastomycosis	Sporotrichosis
Dimensions				
Attributes				

A2 Country progress

← ← SCROLL LEFT AND RIGHT → → →

## Country progress

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Disease	Buruli ulcer	Chikungunya	Chromoblastomycosis	Sporotrichosis	Paracoccidiosis
Dimensions					
Attributes					
Technical	1. Scientific understanding				
	1.1 What is the current status of endemicity for this disease? <sup>1</sup>				
1.2 Was this disease mapped according to the disease-specific road map to guide the interventions required to reach the road map? <sup>1</sup>					
2. Diagnostics	2.1 Are diagnostic tools available in the country to support the interventions required to reach the road map? Select from the list <b>a-s</b> the diagnostic tool(s) available in the country. <sup>1</sup>				
	2.2 Are WHO-recommended interventions effective, efficient and sustainable in your country? <sup>3</sup>				
3. Effective interventions	3.1 Are WHO-recommended interventions effective, efficient and sustainable in your country? <sup>3</sup>				
	3.2 Are guidelines for management of disease-related diagnosis and treatment available in the country? <sup>2,3</sup>				
4.1 Are guidelines for management of disease-related diagnosis and treatment available in the country? <sup>2,3</sup>					
8. Health care infrastructure and workforce	8.1 Does the country have a health care system with integrated patient care at point of care for case management of this disease? <sup>2</sup>				
	8.2 Does the country have laboratory capacity to support accurate and timely diagnosis of this disease? <sup>2</sup>				
	8.3 Does the country have a skilled health workforce at all levels to address this disease, including at community levels? <sup>3</sup>				
9. Advocacy and funding	9.1 Does the country have national policies, strategies and plans to ensure support for intervention activities against this disease? <sup>2</sup>				
	9.2 What is the country's estimated budget for implementing the core intervention against the disease for 2024 (US\$)? <sup>1,2,3</sup>				
	9.3 What is the main source of funding for the proposed budget for 2024? <sup>1</sup>				
	9.4 Is this disease prioritized in the government's health agenda? <sup>1</sup>				

Country progress | NTD Products | BUR | CE | CHK | CHR | SPO | PAR | DRA | DEN | FBT | FIL | gHAT | rHAT | mLEI | vLEI | LEP | MYC | ONC | RAB | SCA | TUN | SCH ...



# Sustainability of NTD programmes:

## Qualitative assessment of programme(s): Global level view - NTD “heat map”

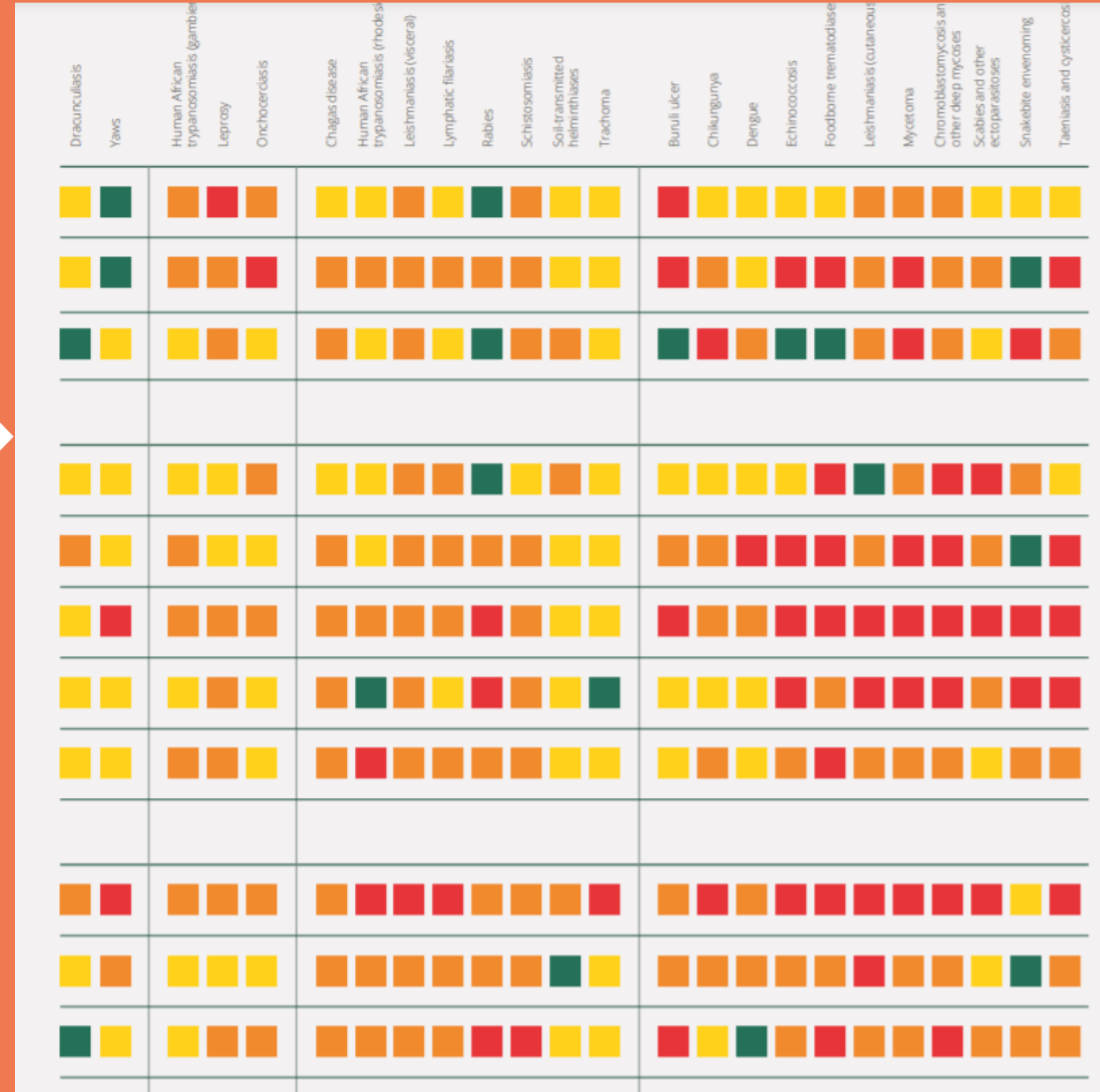
11 dimensions

Component	Dimension
Technical progress	Scientific understanding
	Diagnostics
	Effective intervention
Strategy and service delivery	Operational and normative guidance
	Planning, governance and program implementation
	Monitoring & Evaluation
	Access and logistics
	Healthcare infrastructure and workforce
Enablers	Advocacy and funding
	Collaboration & multisectoral action
	Capacity building

Priority actions required for each dimension

Category and current assessment	Actions required
<b>Technical progress</b>	
Scientific understanding	<ul style="list-style-type: none"> <li>Estimate precisely the epidemiology and burden of <i>S. stercoralis</i></li> </ul>
Diagnostics	<ul style="list-style-type: none"> <li>Develop rapid, more sensitive and specific, easy-to-use point of care diagnostics for mapping and surveillance including for <i>S. stercoralis</i></li> <li>Devise sensitive and specific biomarkers for a field test</li> <li>Design field-deployable tests to detect resistance</li> <li>Standardize diagnostic procedure and develop guidance to limit variation in prevalence</li> </ul>
Effective intervention	<ul style="list-style-type: none"> <li>Develop more effective medicines and drug combinations against <i>T. trichiura</i> and hookworm infections</li> <li>Promote prequalification of generic ivermectin at affordable cost or/and donated ivermectin</li> </ul>

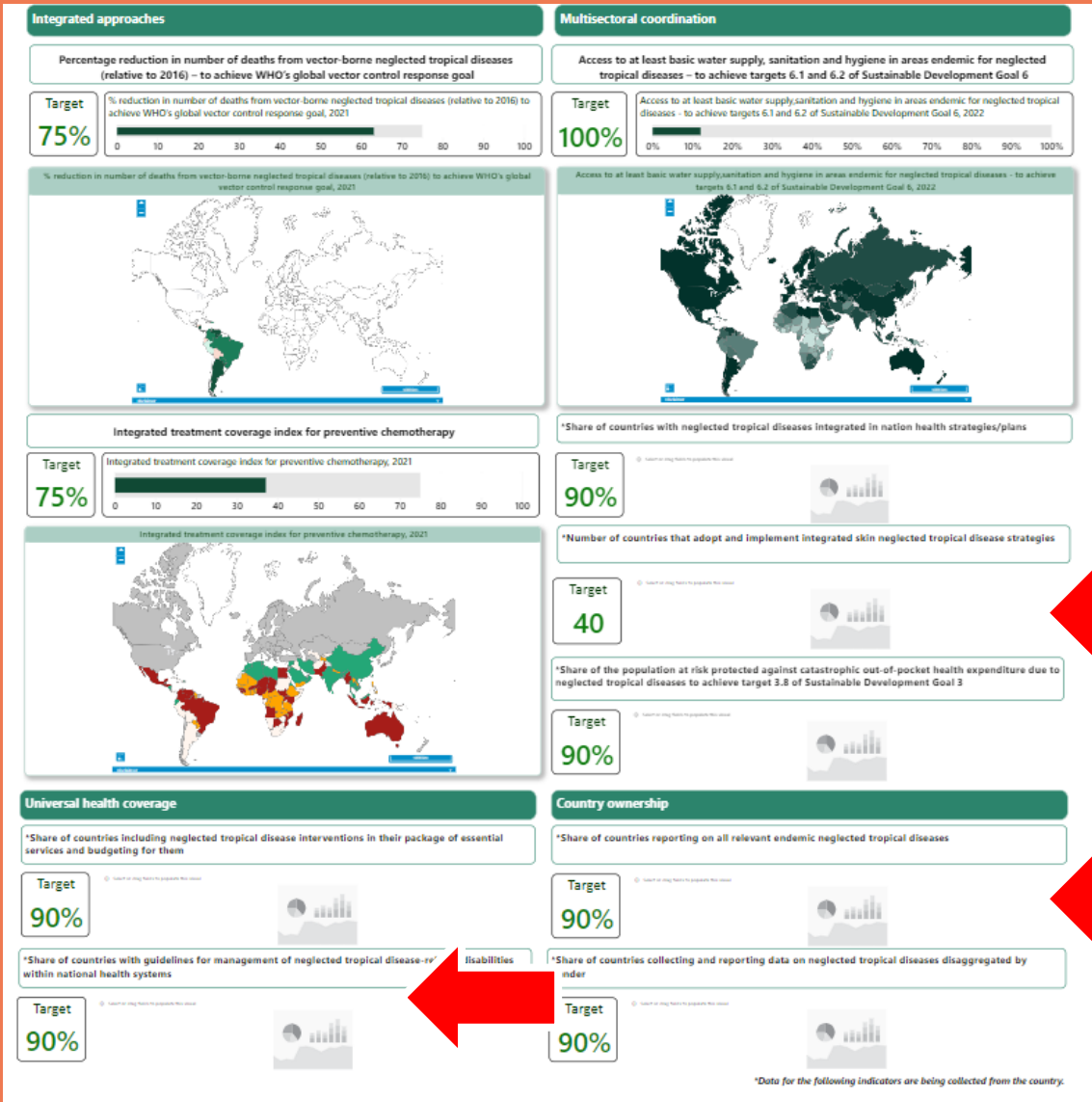
Gap Assessment Tool



# Sustainability of NTD programmes(s): Global level view



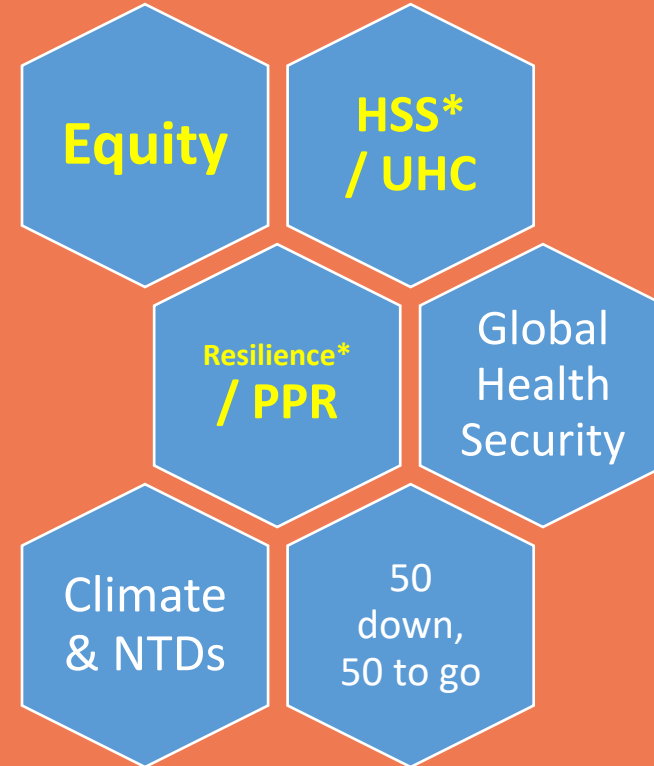
## NTD road map tracker



## NTD Country profiles



# Unite. Act. Eliminate.







# Monitoring funding availability, country ownership and implementing sustainability plans in Rwanda

*Dr Ladislav Nshimiyanana*

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

29 Nov-1 Dec 2023

*“Stepping up County Ownership to Accelerate Programmatic Action”*





# Monitoring funding availability, country ownership and implementing sustainability plans in Rwanda

**Ladislav NSHIMIYIMANA, MPH, MAPP  
NTDs and Other Parasitic Diseases Unit  
Rwanda Biomedical Centre**



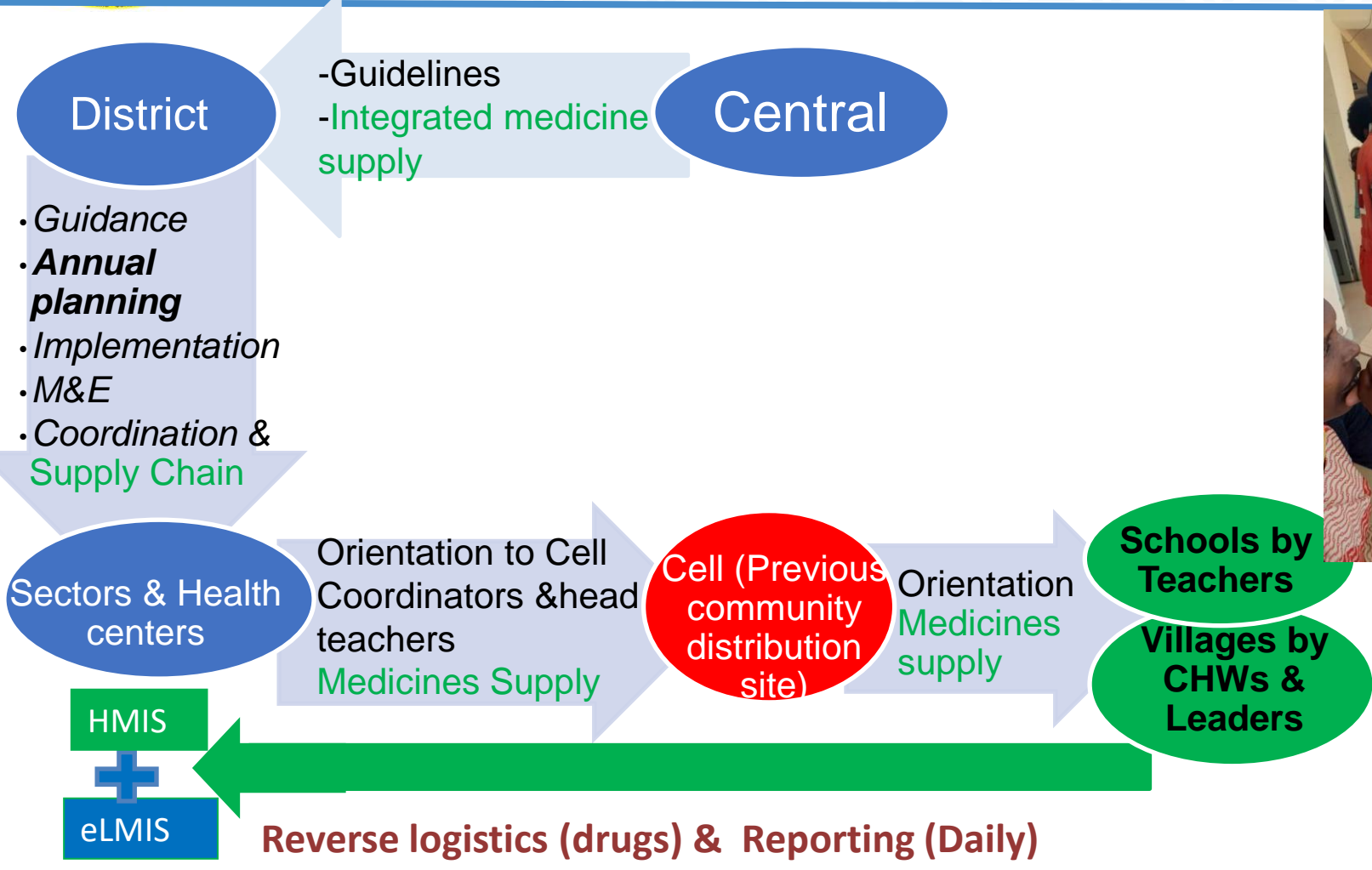
# Ending NTDs and achieve SDGs

- **Sustainable Development Goal 3.3 Related to NTDs (Global)**
- **Goal 3:** Ensure healthy lives and promote well-being for all at all ages
- **Target 3.3:** By 2030, end the epidemics of AIDS, tuberculosis, malaria and neglected tropical diseases and combat hepatitis, water-borne diseases and other communicable diseases
- **Indicator 3.3.5:** Number of people requiring interventions against neglected tropical diseases **By 90% (WHO NTD Roadmap)**
- **Kigali Declaration on NTDs CHOGM 2022:** Head of States committed to increase domestic resource mobilization
- Rwanda committed to eliminate all NTDs as Public Health Problem by 2030





# What did we do differently for ownership: Decentralizing & integrating MDA with 100% domestic financing







# Multi-sectoral & cross-cutting response to NTDs and High-level political Advocacy



**31/01/23: WASH partners inviting NTD program for joint planning & implementation**

**Dec/ 2022: Dvpt of WASH-OH-NTDs Joint Roadmap**

**27<sup>h</sup> October 22: High-level (Ministerial) consultative meeting**

**Dec/2021: Application for funding the WASH-NTD coordination @TEF**

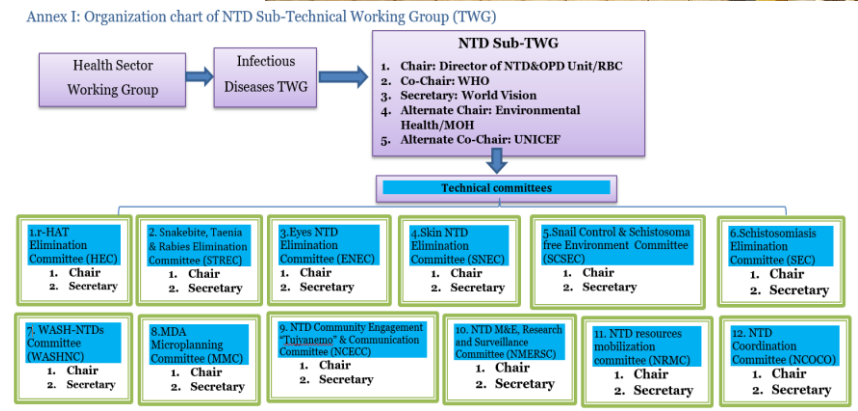


**18 June 2019:**  
Dissemination of NTD SP 19-24 & Call for multi-sector action

**30<sup>th</sup> July 2020: NTD Sub-TWG constituted. Develop annual cross-sector action plan**



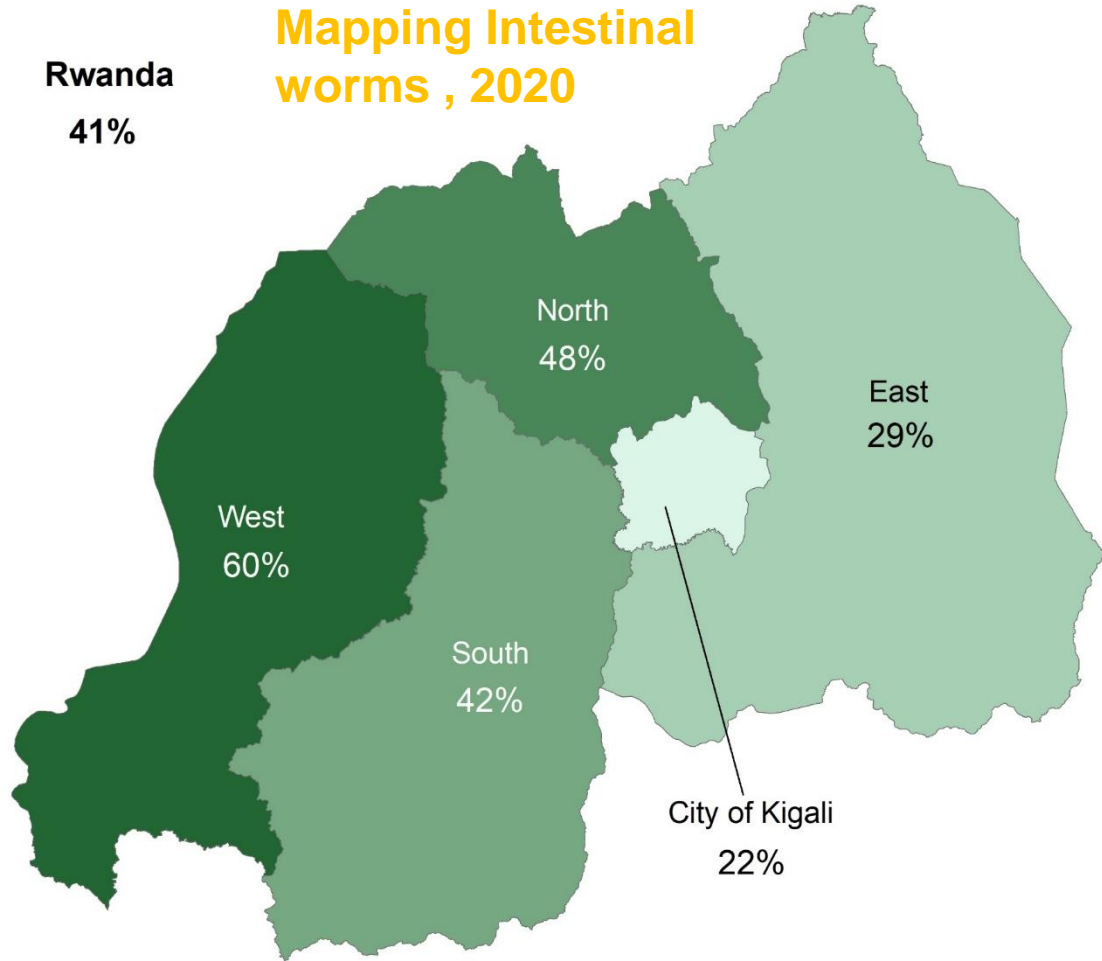
**NTD Sub-TWG Members during NTD cross-sector Joint planning session for FY21-22 @Musanze in June 2021**



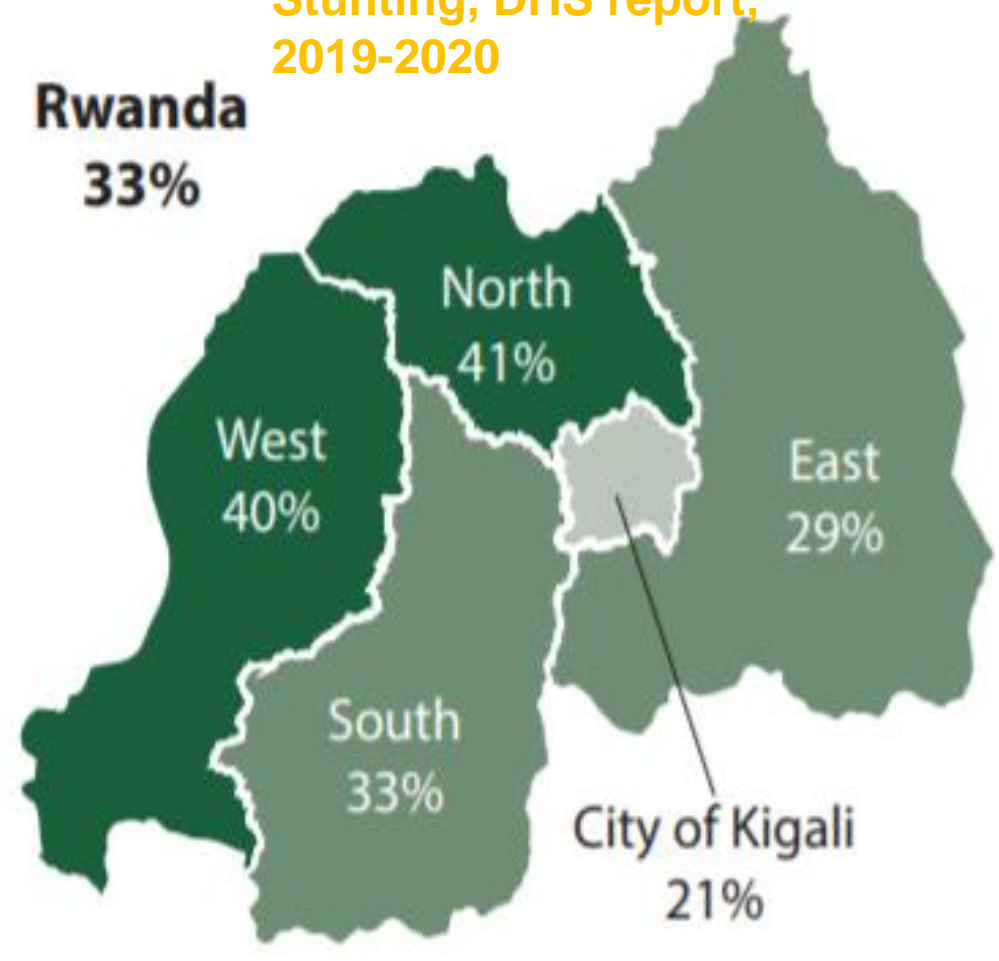


# Nutrition programs were mobilized to support STH elimination plan: additional drugs & WASH

### Mapping Intestinal worms , 2020



### Stunting, DHS report, 2019-2020



**Provinces with high prevalence of intestinal worms have high stunting rate**

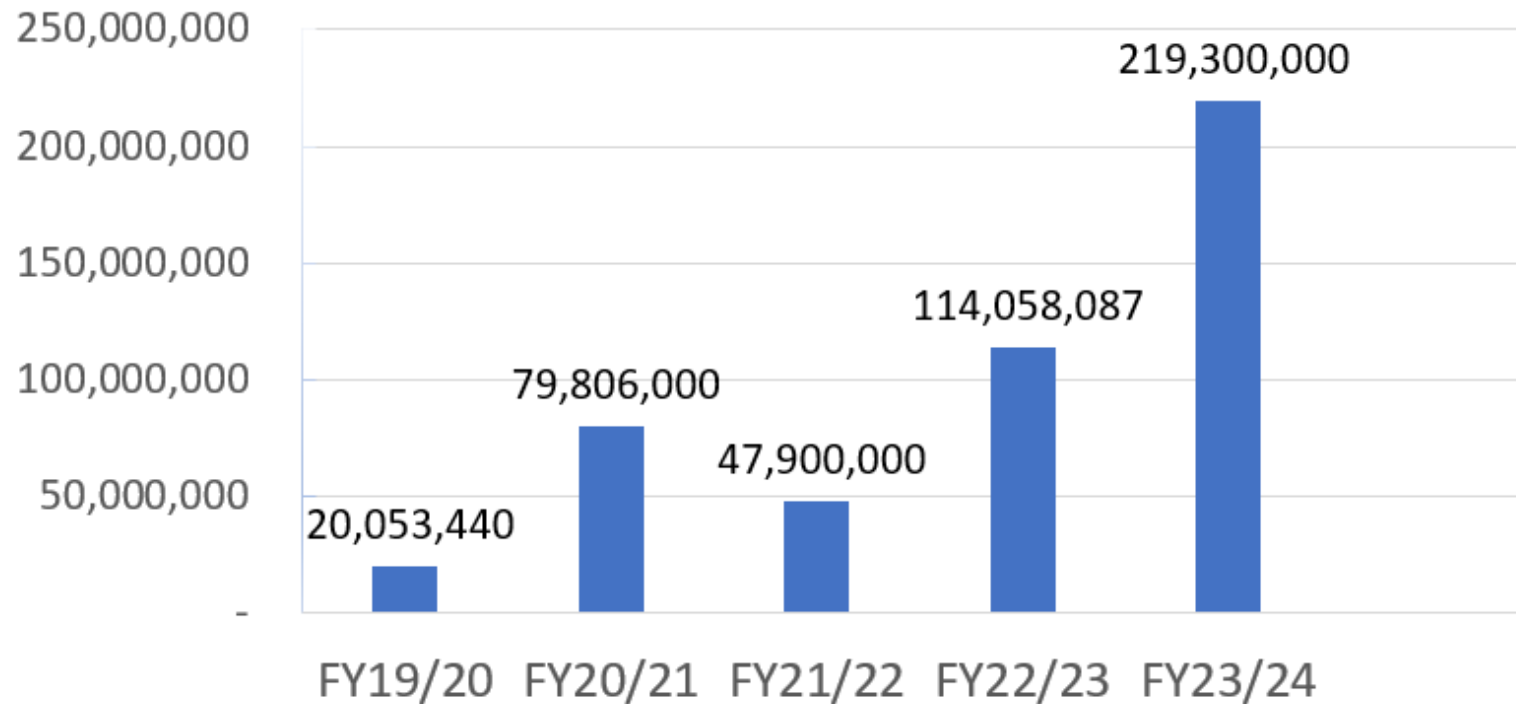




# Where are we with Government funds allocation to NTDs Operations



**Gov't Direct funding (RWF) for NTDs operations in the last 5 years (excluding salaries)**



## Excluding:

- ✓ Salaries at all levels
- ✓ Integration/ decentralization costs:
  - i. Supply chain (MDA drugs down to school & village level)
  - ii. MDA in schools (by teachers during schooling period)
  - iii. MDA in villages during weekly meetings/ monthly screening of malnutrition
  - iv. Drugs distribution using drones (MDA, SAV, A-Rabies vaccine)

**Next year the Gov't will increase to 50% of adults' drugs costs: 250,000,000**



# Challenges & Lesson learned

- The NTD program is understaffed
- Community risky Practices are hindering the acceleration to reach 2030 targets
- This practice of integrating and owning the Neglected Tropical Diseases program is practical and feasible.
- The decentralization for community engagement is the more important way to eliminate NTDs that affect the poorest communities and reach the SDGs target related to NTDs.
- The example of Rwanda can inspire other countries sharing similar context with Rwanda.



# Recognition to our stakeholders/ partners



- Government of Rwanda/ Social Cluster Ministries
- World Health Organization
- World Food Program
- END FUND
- Vitamin Angels (Deworming tablets for under 5 children)



Government of Rwanda /Cluster Ministries



World Health Organization

Multilateral



Philanthropists/Donors



Non Government Organizations



# Thank you

# Murakoze

[ladislas.nshimiyimana@rbc.gov.rw](mailto:ladislas.nshimiyimana@rbc.gov.rw)





# COUNTRY UPDATE

## In the implementation progress of the WHO NTD Roadmap 2021-2030

*Dr Piham Gnossike*

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

29 Nov-1 Dec 2023

*“Stepping up County Ownership to Accelerate Programmatic Action”*



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## **COUNTRY UPDATE**

# **In the implementation progress of the WHO NTD Roadmap 2021-2030**

## **Mise à jour sur les Progrès de la mise en œuvre de la feuille de route de l'OMS pour les MTN au Togo (2021-2030)**

**TOGO**

**Dr GNOSSIKE Piham**

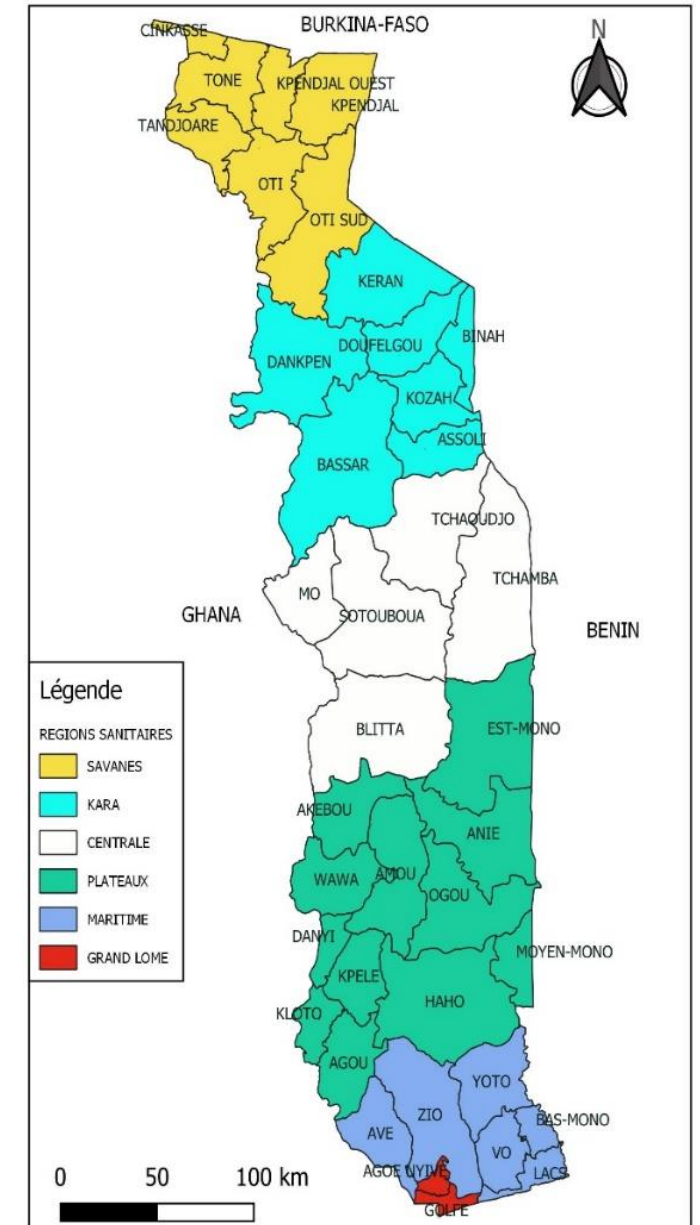
**Coordonnateur National MTN**



**World Health  
Organization**

## Contexte 1/3

- Superficie: 56 600 km<sup>2</sup>
- Population: 8.159.621 habitants en 2022
- 6 régions sanitaires
- 39 districts sanitaires et 1320 FS
- Réseau routier essentiellement terrestre : accès difficile à certaines zones sanitaires surtout en saison pluvieuse (districts de Mô, Wawa Tone...)



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## Contexte 2/3

- Avant 2018: Approche diagnostique et prise en charge des MTN centrée sur chaque maladie
  - PNLO, PNLTHA, PNLUBLP, PNED, PNEFL, PNLC (trachome), PIMTN
- En 2018: Fédération des programmes verticaux multiples en un seul programme national des MTN à travers l'arrêté N°197/2018/MSPS/CAB/SG.
  - - Un seul coordonnateur National nommé par un arrêté ministériel
- Avec les autres programmes de santé PNLP, PNLT, PNLC, PNAPP, le PNMTN dépend de la Division de la Lutte contre les Maladies et Programmes de Santé Publique DLMPSP
- Mise en place d'un cadre national de coordination Multisectorielle de lutte contre les MTN

<b>MTN à CTP (Chimio thérapie préventive)</b>	<b>MTN à PCC (prise en charge des cas)</b>
<p>Onchocercose <b>élimination</b></p> <p>Géo helminthiases <b>contrôle</b></p> <p>Schistosomiases <b>élimination</b></p> <p>Filariose lymphatique <b>éliminé</b></p> <p>Trachome <b>éliminé</b></p>	<p>Ver de Guinée <b>éliminé</b> (Dracunculose)</p> <p>Ulcère de Buruli <b>contrôle</b></p> <p>Lèpre <b>élimination</b></p> <p>Pian <b>élimination</b></p> <p>THA <b>éliminé</b></p> <p>Envenimations <b>contrôle</b></p> <p>Mycétome <b>contrôle</b></p> <p>Leishmaniose cutanée <b>contrôle</b></p>
<p>22 Août 2022: Le Togo a reçu un <b>certificat de reconnaissance de l’OMS</b> pour avoir éradiqué quatre maladies tropicales négligées: La dracunculose, la filariose lymphatique, la Trypanosomiase Humaine Africaine (THA) et le Trachome.</p>	

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# Mise en œuvre du plan stratégique intégré MTN

## Plan stratégique intégré MTN 2022-2024 validé en 2022, évaluation et extension prévues en 2024

Les outils de l'OMS utilisés sont :

- JRF : outil de rapport annuel des traitements de masse (TDM) contre les MTN CP (onchocercose, schistosomiasés et géo-helminthiasés): nombre de personnes traitées selon les cibles et l'utilisation des comprimés
- JRSM: Demande commune de médicaments pour les TDM annuels des MTN-CP (Ivermectine, Praziquantel et Albendazole); soumission de la demande au 1er trimestre de l'année N pour la demande de l'année N+1
- EPIRF: Outil de renseignement des données épidémiologiques des maladies sous traitement ci-dessus citées, actualisé chaque année
- AW (Annual Work plan) : Plan d'action opérationnel pour les TDM de l'année de demande

NB: Heatmap non utilisé ainsi que le TEMF (trachome éliminé au Togo)



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## Impact et opportunités 1/2

- 4 MTN éliminées comme problème de santé publique
  - Le Ver de Guinée en 2011, la Filariose Lymphatique en 2017, la Trypanosomiase Humaine Africaine en 2020, le Trachome en 2022
- Onchocercose et schistosomiasés ciblées pour élimination d'ici 2030
  - Arrêt du traitement de masse dans la région maritime pour l'onchocercose
  - Baisse de la prévalence de 23% à 5% pour les schistosomiasés et de 33% à 11.6% pour les géo helminthiasés (entre 2009 et 2015)
- Elaboration et validation politique du Plan de Pérennisation
- Mise en place d'un cadre national de coordination Multisectorielle de lutte contre les MTN
- Cadre de convention entre le Ministère en charge de la santé et le Ministère en charge de l'éducation
- Élaboration d'un dossier de financement

---

## Impact et opportunités 2/2

### Opportunités

- Volonté politique
- Programme intégré
- Présence de partenaire financier (OMS, USAID, Anesvad, DAHW, Sightsavers...)
- Cadre national multisectoriel de lutte contre les MTN (entités intrasectorielles, extrasectorielles, comités d'expert...) créé par arrêté ministériel

# Défis

<b>DEFIS</b>	<b>APPROCHES DE SOLUTIONS</b>
<input type="checkbox"/> La prise en charge des morbidités (quand l'élimination est déclarée), baisse d'intérêt des partenaires	<ol style="list-style-type: none"><li>1. Intégration de ces maladies dans le paquet national de services.</li><li>2. Développement d'un dossier d'engagement pour identifier des partenaires locaux pouvant financer la composante prise en charge</li></ol>
<input type="checkbox"/> Surveillance après l'arrêt des TDM surtout en l'absence de directives internationales (Baisse ou pas d'intérêt des partenaires )	<ol style="list-style-type: none"><li>1. Intégration de la surveillance des MTN éliminées</li><li>2. Processus pour l'intégration au système national de surveillance au DHIS 2 et aux autres systèmes de surveillance</li></ol>

## Défis

<b>DEFIS</b>	<b>APPROCHES DE SOLUTIONS</b>
<input type="checkbox"/> Suivi et financement dans un contexte de baisse de l'appui des partenaires	Développement d'un dossier d'engagement pour identifier des partenaires locaux pouvant appuyer le financement les composantes ayant des gaps et pour la pérennisation des acquis de la lutte contre les MTN
<input type="checkbox"/> Traitement de masse (si élimination de l'onchocercose)	Utilisation de la plateforme scolaire pour le déparasitage des enfants vu que le traitement va arrêter dans certaines zones
<input type="checkbox"/> Amélioration de la qualité des données à tous les niveaux	Saisie des données et leur utilisation via DHIS2, Triangulation des données

---

# Leçons apprises

- L'approche intégrée permet une meilleure coordination et utilisation efficiente de ressources
- L'implication des leaders locaux lors des activités de TDM facilite la résolution des problèmes
- L'approche porte à porte pour un TDM intégré (Ov, SCH/STH) est d'une grande efficacité
- Les sensibilisations suivi de consultation foraines ont contribué à détecter près de 80% des cas MTN PCC

**MERCI POUR  
VOTRE  
ATTENTION**



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**Thank you for your kind attention**



# Sustainability of the National Neglected Tropical Diseases Programme in Ghana

*Dr. Joseph K L Opare, PhD*

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

29 Nov-1 Dec 2023

*“Stepping up County Ownership to Accelerate Programmatic Action”*

# Sustainability of the National Neglected Tropical Diseases Programme in Ghana

**Dr. Joseph K L Opare, PhD**

**Ag. Programme Manager, Ghana Health Service Neglected Tropical Diseases Programme**



# Introduction-NTDs in Ghana

## Overview

14 NTDs are endemic in Ghana divided into 2 groups

- PC-NTDs: lymphatic filariasis, onchocerciasis, schistosomiasis, soil-transmitted helminthiasis
- Case-management NTDs: Buruli ulcer, Leprosy, Yaws, human African trypanosomiasis (HAT), Rabies, Cutaneous Leishmaniasis, Scabies and Snake bite envenoming

Diseases	Endemicity in the districts
LF	<ul style="list-style-type: none"><li>• LF is endemic in 116 districts</li><li>• 109/116 districts have met the criteria to stop MDA</li></ul>
Oncho	<ul style="list-style-type: none"><li>• Endemic in 140 districts</li></ul>
Trachoma	<ul style="list-style-type: none"><li>• Eliminated as a disease of public health importance</li></ul>
Schistosomia sis	<ul style="list-style-type: none"><li>• Endemic in all districts- 49 high prevalence, 138 moderate prevalence, and 29 low-prevalence</li></ul>
STH	<ul style="list-style-type: none"><li>• Endemic in all districts</li></ul>
Bu and Leprosy	<ul style="list-style-type: none"><li>• 98 BU and 195 leprosy endemic districts</li></ul>
CI	<ul style="list-style-type: none"><li>• Endemic in 2 regions</li></ul>



# Recognition for eliminating NTDs

- Leadership Award presented to Combat NTDs during ECOWAS Heads of States Meeting, honouring 10 of the bloc's member states for eliminating at least one NTD
- **Ghana** and Benin received a Major Achievement Award for eliminating three NTDs each.





# Progress Made in Governance

## **Health Policy :**

- National Master Plan for the Integrated Control of Neglected Tropical Diseases
- 2020 Revised National Health Policy
- Adherence to WHO roadmap

## **Coordination:**

- Ghana's NTD Intra Country Coordinating Committee (ICCC): multisectoral coordination mechanism established by the MOH to advise and coordinate activities for NTD control in Ghana

## **Funding:**

- Consistent Drug Donation from MDP and WHO to all 4 PC NTDs ( Ivermectin, Praziquantel, Albendazole)
- Support for field interventions from our major partners USAID through the Act to End NTDs | West programme, Sightsavers, ALM etc

# Why engage in sustainability process

## Sustainability is Key to Achieving UHC

**Achieving UHC/2030** : The fight against NTDs is central to the vision of universal health care coverage

**SDG 1:** No poverty

**SDG 2:** Food security, nutrition,  
sustainable agriculture

**SDG 4:** Quality education

**SDG 5:** Gender equality

**SDG 16:** Inclusive societies

**SDG 3:** Conditions of equitable  
health and well-being resilient  
societies

**SDG 8:** Growth inclusive  
economy and decent jobs



### **Universal Health Coverage (UHC)**

All people and communities receive quality health services  
they need, without financial hardship

**Sustainability leads to economic and health benefits**

# The Sustainability Plan is an inclusive process

August 2019– March 2022

Sensitization  
meeting

Development and Political  
validation (dissemination)  
of the Sustainability Plan

August 2019

Financial  
data  
analysis

Mapping of stakeholders  
and analysis of multi-  
sectoral collaboration

Self-evaluation

October 2021-  
April 2022



These different steps led to the creation of a Sustainability Plan  
which will serve as a strategic tool for achieving elimination and control objectives

# Political back up by MOH leadership

## Political validation and formal endorsement by Minister of health

Ghana Neglected  
Tropical Diseases  
Sustainability Plan



## Collaboration between NTDP, ICCC and NTD ambassador for high level cross sectorial engagement

- 3 Ministers: Health, Education, Rural development;
- Health advisor at presidency, Director of cooperation /Ministry of Finance;
- NTD ambassador, ICCC members and partners





# The plan identifies interventions in the six functional areas

## Coordination

- **Continuous engagement with programs across the MOH/GHS**
- **Strengthen and operationalize the ICCC for continuous and effective multi-sector coordination/collaboration**
- **Expand public-private partnerships by leveraging resources within the health system, such as the Resource Mobilization Subcommittee and PPME**

## Policy and Planning

- **Develop an NTD policy which is integrated into the UHC**
- **Integrate NTDs into relevant cross-cutting strategies and health policies**
- **Implement the NTD Master Plan**
- **Integrate NTDs into relevant cross-cutting programs outside the MOH, including SHEP, Immigration and Port Health, WASH programs, and local government**

## Operational Capacity

- **Reinforce the national health workforce capacity for the provision of NTD services**
- **Strengthen selection and training processes for CDDs at the community level and sustain their work**
- **Integrate post-elimination surveillance into Ghana's Integrated Surveillance system**
- **Strengthen reverse logistics management of NTDs drugs supply**

# The plan identifies interventions in the six functional areas

## Information Systems

- **Strengthen NTD data capture and use for management decision-making**
- **Strengthen health worker capacity to ensure data reporting is done accurately**
- **Strengthen capacity to routinely monitor progress related to NTD data use at the decentralized level**
- **Strengthen NTD data management and data security**

## Services

- **Strengthen capacity of healthcare providers at primary health care level for NTD services**
- **Ensuring NTD services are integrated service delivery across health platforms / programs**
- **Strengthening capacity of specialised center for NTDs and secondary and tertiary-level facilities to provide MMDP services**
- **Integrate SCH/STH MDA into the SHEP platform**

## Financing

- **Determine NTD-related program costs and funding based on informed financial analysis data**
- **Operationalise the Advocacy, Communication, and Social Mobilization strategic plan**
- **Align NTDP financial management processes with GHS processes**
- **Develop multi-year budget projections**



# Implementation of sustainability priorities : DHIMS-2 / Visualization of NTDs data outputs for decision making

## Report Rate Summary

- Helps Managers track data entry levels by the facilities
- Enable Managers to do more focused supervision
- Help NTDP at national level and NTDs focal points to access the same information



DHIMS 2 - Reports

7

RQ

Standard Report

Data Set Report

Reporting Rate Summary

Resource

Org unit distribution report

### Ghana - Monthly Neglected Tropical Diseases (NTDs) Report - 2022

Name	Monthly Neglected Tropical Diseases Report - Actual reports	Monthly Neglected Tropical Diseases Report - Expected reports	Monthly Neglected Tropical Diseases Report - Reporting rate	Monthly Neglected Tropical Diseases Report - Actual reports on time	Monthly Neglected Tropical Diseases Report - Reporting rate on time
Bono	4143	3492	100	3672	100
Bono East	4133	3768	100	4101	100
Western North	3346	2808	100	3288	100
Volta	5695	5568	100	5570	100
Greater Accra	9133	9036	100	8930	98.8
Oti	2791	2832	98.6	2783	98.3
Eastern	12214	12276	99.5	11919	97.1
Ahafo	1625	1596	100	1540	96.5

1

Search

4:37 PM 11/3/2023

8

# Next Steps



Organize dissemination workshops of the plan with all stakeholders in the fight against NTDs at the decentralized level



Organize a resource mobilization workshop



Implement the sustainability plan using a multi-sector approach and integration of interventions



Monitor and evaluate the implementation and progress of the sustainability plan





# Conclusion

NTDs present:

- a public health problem
- a social and economic development problem

Strong political commitment will:

- enable an effective intersectoral fight, guaranteeing lasting success

Real progress has been made, but to sustain the fight the NTDP must:

- Accelerate and intensify advocacy and sensitization across relevant actors
- Ensure availability and commitment of partners

The fight for NTD control, elimination, and eradication is:

- A moral imperative
- A socio-economic development issue

# Acknowledgment

- USAID Act to End NTD | West
- WHO
- Sight savers
- ANESVAD
- ALM
- NMIMR
- CSIR
- All other Health Partners



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*“Stepping up County Ownership to Accelerate Programmatic Action”*



Réunion Annuelle des Administrateurs de Programmes Nationaux de Lutte contre les Maladies Tropicales Négligées de la Région Africaine de L'OMS

# **Processus d'élaboration et de mise en œuvre du plan national de durabilité de la lutte contre les Maladies tropicales négligées : Expérience du Sénégal**

Brazzaville, 29 novembre 2023

Dr Ndeye Mbacke KANE ,Coordonnateur programme MTN

Ministère de la Santé du Sénégal



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Contexte

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Domaines clés du plan de durabilité

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Processus

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Définition des priorités nationales et soutien technique

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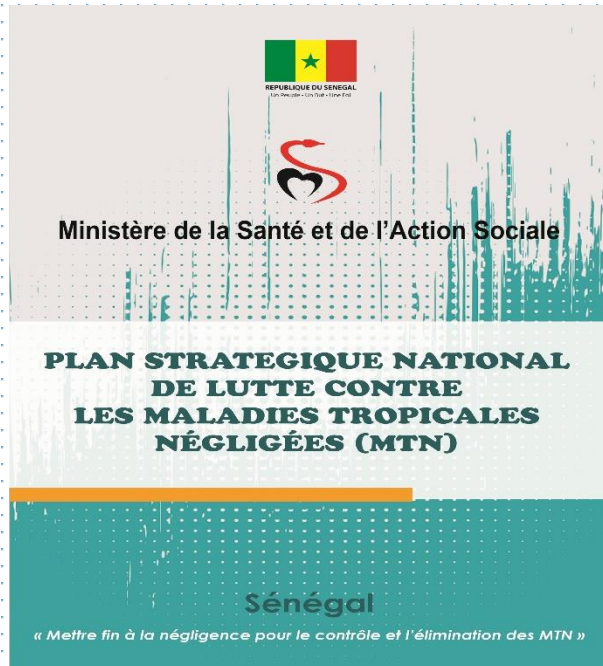
Résultats Mise en œuvre du plan

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Suivi de la durabilité

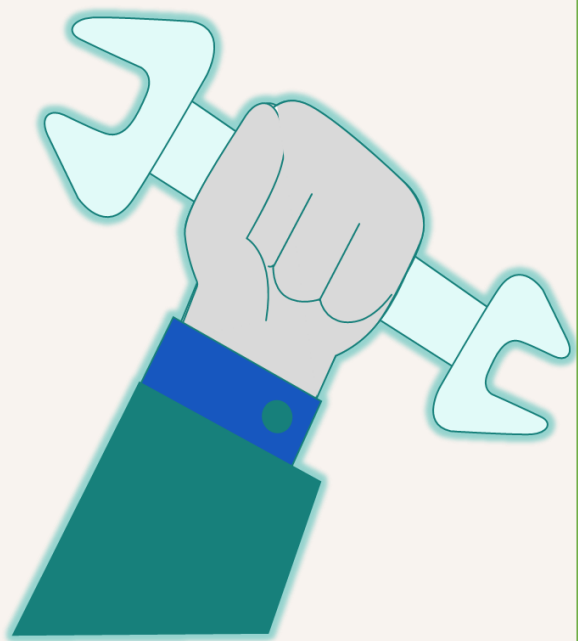
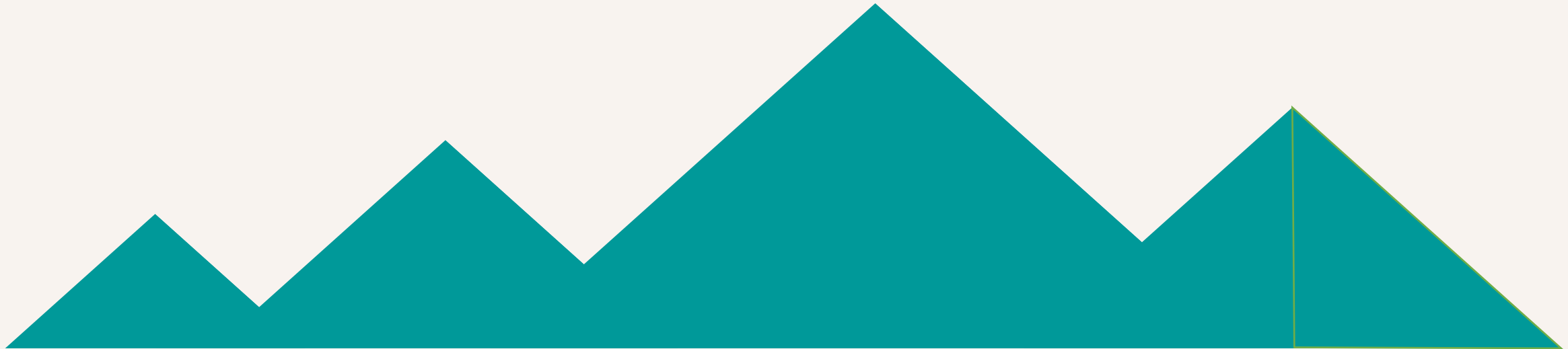






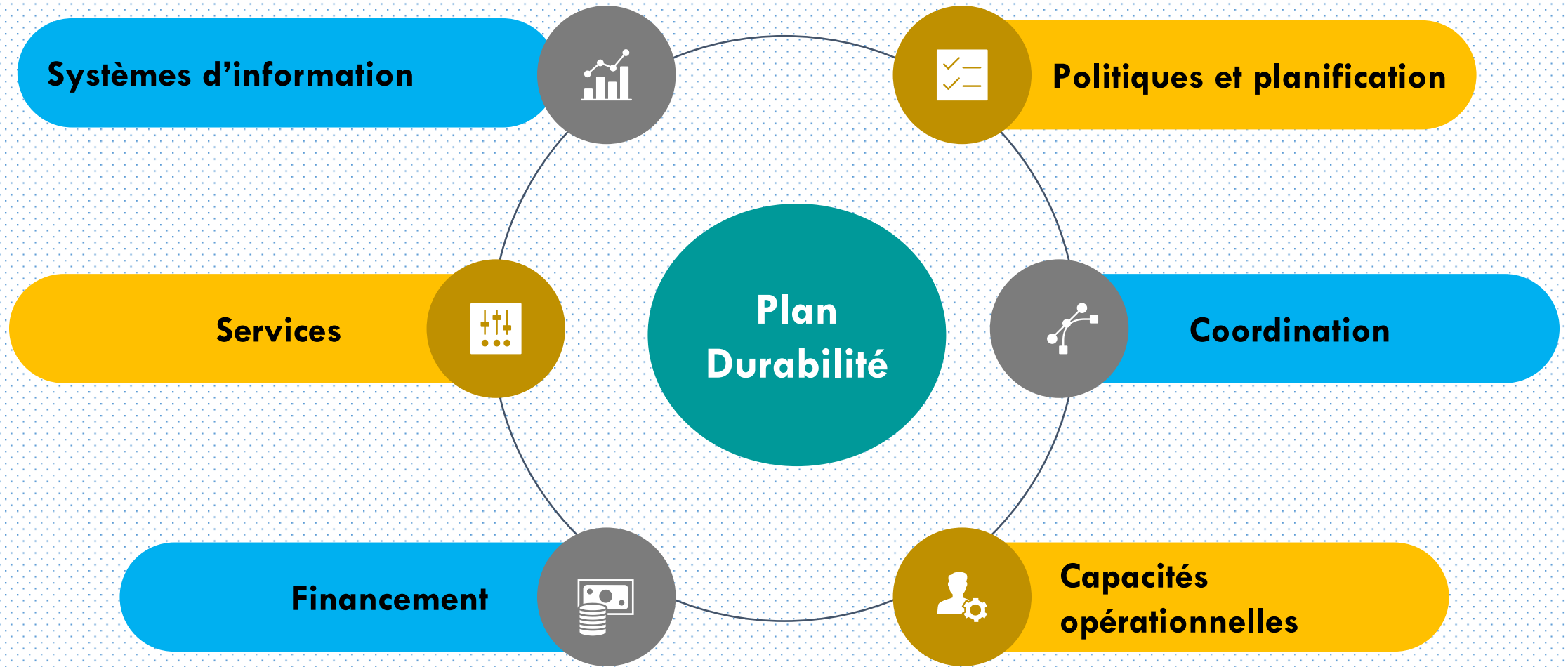
- **Sénégal: engagé à atteindre les objectifs en 2030**
- **Nécessité de mettre en œuvre actions soutenues, multisectorielles et durables à travers une intensification des approches transversales (pilier 2 de la feuille de route OMS)**
- **Plans directeur et durabilité MTN élaborés → accélération des interventions en vue de contribuer à l'atteinte des objectifs**
- **Ceci à travers le développement et la mise en œuvre des stratégies visant à renforcer le leadership national, l'intégration des services, le plaidoyer et le financement des services de lutte contre les MTN.**
- **PNLMTN avec l'appui du projet Act to End NTDs | West (Act | West) s'est lancé depuis 2019 dans un processus de durabilité des acquis de lutte contre les MTN**





# **Domaines clés du plan de durabilité**

# Domaines clés du plan de durabilité







# PROCESSUS



# Les étapes du processus (1/3)



1

## Préparation

Organisation de réunion de sensibilisation des parties prenantes sur le cadre de référence et la stratégie pour la durabilité



2

## Analyse

Analyse situationnelle conjointe des composantes renforcement du système, analyse des gaps financiers  
Et  
collaboration multisectorielle



3

## Cartographie des parties prenantes

Identification des acteurs clés et examen des barrières pour une collaboration multisectorielle effective



4

## Auto évaluation

l'auto-évaluation sur l'échelle de continuum de pérennisation.

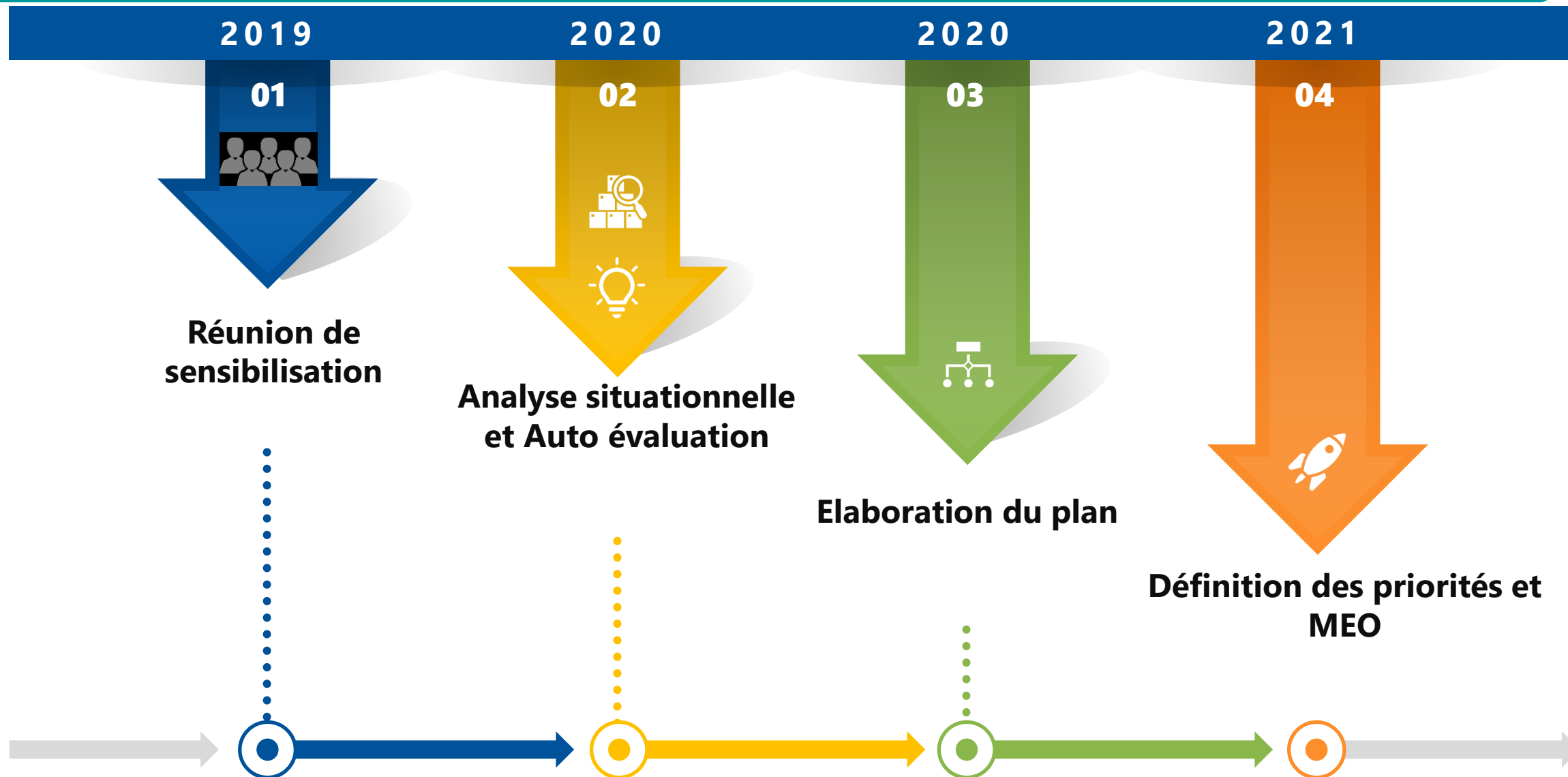


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## Elaboration et Validation du plan

Organisation des ateliers d'élaboration et de validation technique et politique

# Les étapes du processus (2/3)



Ces différentes étapes ont conduit à la mise à disposition d'un plan de durabilité qui servira d'outil stratégique pour l'atteinte des objectifs d'élimination et de contrôle

# Les étapes du processus (3/3)

**Elaboration du plan à travers  
approche participative avec  
implication de tous les acteurs**



**Validation politique du plan  
et signature préface par le  
MSAS**



# Définition des domaines de soutien prioritaires du MSAS et des partenaires (Consultations MSAS – USAID - OMS)

## Objectif general

Définir des domaines de soutien à l'exécution du plan de durabilité conformément aux priorités de pérennisation identifiées dans le cadre de la lutte contre les MTN

**Consultations  
Bi-partite  
Mai 2022**

**Les étapes du processus de la  
Consultation MSAS -  
Partenaires**

Procédures administratives et  
Élaboration un calendrier pour le  
processus de négociation

Réunion technique entre DLM/MTN  
et FHI 360 pays pour discuter et  
identifier des priorités nationales

Consultations entre le MOH , l'USAID,  
FHI360, OMS pays pour la mise et  
œuvre du plan de durabilité,

Mise en œuvre des priorités  
définies dans le plan  
suivant les décisions

Suivi des décisions

# Domaines prioritaires d'appui réussie du plan de durabilité

**Renforcement du leadership et du rôle stratégique de la coordination MTN**

**Gestion intégrée des médicaments MTN avec la Pharmacie national d'approvisionnement (PNA)**

**Renforcement de la coordination et de la collaboration intra et intersectorielle**

**Prise en charge durable et des cas de morbidités liées aux MTN à travers l'ANACMU**

**Planification budgétaire et le financement domestique**



**Priorités nationales**



# Consultations MSAS – USAID - OMS

**Réunions techniques  
MOH, USAID, OMS, FHI360**



**Réunion de discussions avec la  
PNA**



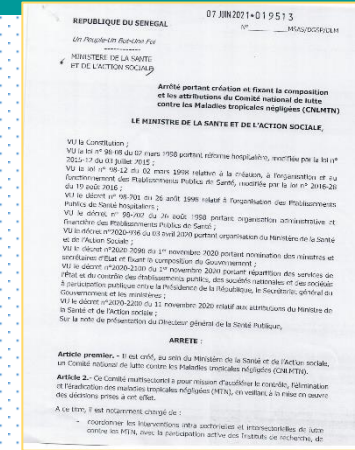
**Réunion de haut niveau avec le  
Secrétaire Général du MOH**



# Evolutions notées dans la mise en oeuvre

Renforcement de la coordination → comité multisectoriel  
arrêté N° 019513 du 07 juin 2021

Réunion du comité multisectoriel présidé par le SG du MSAS en présence de la  
CT du ministère de l'eau



**Réunion du comité multisectoriel  
présidé par le SG du MSAS en  
présence de la CT du ministère  
de l'eau**

**Dernière réunion de la  
commission WASH le 06 juillet  
2023 sous la présidence de la CT  
du MSAS avec mise en place  
d'une instance de discussions**





**Dissémination du PSN à Louga  
sous la présidence du gouverneur  
et la présence des élus et autres  
secteurs**



**Réunion de discussions WASH /MTN  
entre les 03 secteurs présidé par le  
directeur de l'assainissement**



**Elaboration d'un draft de  
convention entre les 03 secteurs  
(santé –éducation-WASH)**

**Appropriation par le pays et la collaboration multisectorielle**

# Suivi des priorités selon le cadre d'indicateurs inclus dans le cadre de la feuille de route de l'OMS

## Priorités du plan de durabilité

- **Renforcement du leadership et du rôle stratégique de la coordination MTN**
- **Renforcement de la coordination et de la collaboration intra et intersectorielle**
- **Prise en charge durable et des cas de morbidités liées aux MTN**
- **Gestion des médicaments avec la Pharmacie nationale d'approvisionnement (PNA)**
- **Planification budgétaire et le financement domestique**

## Thème transversale de la feuille de route

- **Coordination**
- **Coordination**
- **Intégration**
- **Coordination**
- **Inclusion systématique**

## Pilier du système de santé

- **Leadership et gouvernance**
- **Prestations de services**
- **Prestations de services**
- **Accès aux médicaments essentiels et fournitures**
- **Financement de la santé**

# Mécanisme de suivi du plan s'appuie sur le cadre global de suivi du PSN sur les MTN aligné à la feuille de route de l'OMS

Réunion de coordination mensuelle de la DLM ( partage le bilan mensuel des activités



Tenue de reunion de staff hebdomadaire



Réunion de coordination bimestrielle

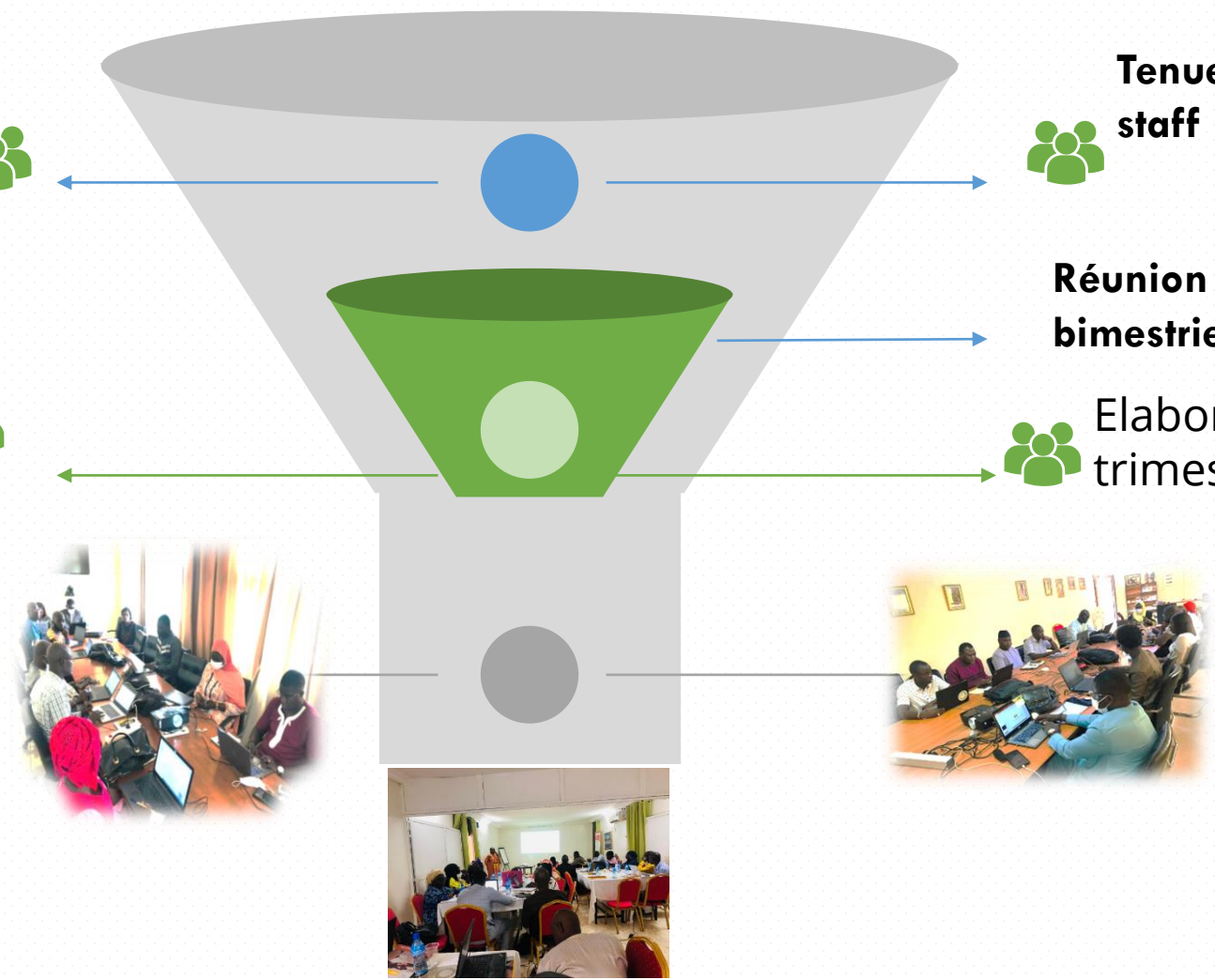
Réunion du comité national de lutte contre les MTN



Elaboration et Suivi trimestriel du PTA



Participation aux reunions de coordination trimestrielles des RM





**DIEU****RE****DIEU****F**

*Merci à nos*

**PARTENAIRES**