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BRIEFING ON THE NEW NEGLECTED TROPICAL DISEASES ENTITY

Information Document

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BACKGROUND

1 Neglected tropical diseases (NTDs) are a diverse group of communicable diseases that affect one in six people worldwide. The African Region bears about 40% of the global burden of NTDs. Countries in the Region have made progress towards the control and elimination of NTDs with the support of partners, WHO and the African Programme for Onchocerciasis Control (APOC).

2 APOC is a partnership established in 1995 with the purpose of expanding onchocerciasis control to countries¹ that fell outside the scope of the Onchocerciasis Control Programme.² Its approach focused on mass drug administration of ivermectin using community distributors. The programme significantly contributed to the elimination of onchocerciasis as a public health problem.

3 Over the past few years, a number of discussions involving endemic countries, WHO and NTD partners have been held to find ways of accelerating the control and elimination of NTDs. During the Joint Action Forum held in Addis Ababa in December 2014, endemic countries, non-governmental development organizations (NGDOs) and various APOC donors, agreed to close the programme by December 2015 and create a “new NTD entity” that will oversee and support accelerated action against all NTDs that respond to preventive chemotherapy (PC-NTDs).³

4 Further to this, WHO convened a Working Group meeting in Johannesburg in April 2015⁴ and the Stakeholders’ Consultative meeting in Geneva in July 2015.⁵ These meetings yielded a consensus on the framework of the new NTD Entity, now called the Expanded Special Project for Elimination of NTDs (ESPEN) and the Transition Plan of Action for 2016 aiming at sustaining the gains made in the control of onchocerciasis and other PC-NTDs.

5 The objective of this paper is to update the Regional Committee on progress made towards the establishment of ESPEN and the actions to be taken to ensure its effective commencement.

PROGRESS MADE

6 The purpose of ESPEN is to provide technical support to endemic countries to control and eliminate the five PC-NTDs.⁶ This includes prevention of the diseases and management of disabilities. Ultimately, this will contribute to poverty alleviation, increased productivity and improved quality of life for the affected people in the Region. ESPEN will have a life span of five years from 2016 to 2020, with the first year being a transition period, and will be hosted by the WHO Regional Office for Africa.

7 The institutional framework of ESPEN⁷ comprises a steering committee that reviews the project plans and budgets, and provides financial oversight. A Regional Programme Review Group will be its main technical advisory body. The framework defines the roles and responsibilities of all relevant stakeholders including WHO. It also specifies financial mechanisms that provide for both direct funding to countries and pooled funds.

¹ Angola, Burundi, Cameroon, Central African Republic, Chad, Congo, Democratic Republic of Congo, Equatorial Guinea, Ethiopia, Gabon, Kenya, Liberia, Malawi, Mozambique, Nigeria, Rwanda, Sudan, Tanzania and Uganda.

² Onchocerciasis Control Programme which was set up in 1974 in 11 West African countries, focused on vector control.

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⁴ Report on Working Group Meeting on the Establishment of the New NTD Entity, Johannesburg, April 2015.

⁵ Report on Stakeholders’ Consultative Meeting on the Establishment of the New NTD Entity, Geneva, July 2015.

⁶ Lymphatic filariasis, schistosomiasis, soil-transmitted helminthiasis, trachoma and onchocerciasis.

⁷ Framework of the Establishment of the Expanded Special Project for Elimination of Neglected Tropical Diseases, August 2015.

8 The overall objective of the transition plan for 2016 is to ensure the continuity of technical support to endemic countries on PC-NTDs. The transition plan also outlines the staff needs⁸ and budget requirements of up to US\$ 10 million. A transitional steering committee has been established to provide guidance and will pave the way for the steering committee when ESPEN becomes fully established and operational.

9 To ensure the smooth commencement of ESPEN operations, the Regional Office formally informed Ministers of Health and partners of the closure of APOC and the establishment of ESPEN. They have also been requested to nominate the members of the transitional steering committee. Discussions with the World Bank as a fiscal agent for the multi-donor trust fund, as well as high-level advocacy with countries and partners to secure financial resources for the establishment of ESPEN, have been initiated.

NEXT STEPS

10 The following steps are proposed for the implementation of the transition plan: (i) hold the first meeting of the transitional steering committee to agree on the transition plan of action and budget and to review progress made towards the effective functioning of ESPEN and resource mobilization; (ii) finalize and implement the standard operating procedures for administrative and financial management of ESPEN; (iii) recruit the required human resources for the transition period; (iv) conclude discussions on the trust fund; and (v) continue high level advocacy with countries and partners to secure additional funds and commitments.

11 The Regional Committee is therefore invited to support the establishment of ESPEN, and continue high-level advocacy with national governments and partners to ensure securement of the funds needed to support ESPEN and country NTD programmes. Countries are called upon to make financial contributions to the operations of ESPEN.

⁸ Six core staff members, including the coordinator.