

# An African Region free of Neglected Tropical Diseases

Working Group Meeting on  
THE ESTABLISHMENT OF A NEW NTD ENTITY



28 - 30 April 2015  
Johannesburg, South Africa



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REPORT



REGIONAL OFFICE FOR **Africa**

**NTD PROGRAMME**

# TABLE OF CONTENTS

List of Acronyms .....	5
Executive summary .....	7
1. Introduction .....	9
2. Meeting Objectives and Expected Outcomes .....	10
3. Opening ceremony .....	11
4. Session 1: establishment of the new NTD entity .....	12
4.1 Overview of the new NTD entity .....	12
4.1.1 Working group on the establishment of the new NTD entity	13
b. Working group outcomes .....	14
4.2 Transition Plan of Action .....	17
4.2.1 Overview of the Transition plan of action .....	17
4.2.2 Working group on the transition plan of action for 2016 .....	19
a. Working group methodology .....	19
b. Working group outcomes .....	20
4.3 Consensus on key elements of the new NTD entity and the Transition Plan of Action for 2016 .....	21
5. Proposed Next Steps .....	22
Conclusion .....	23
Annexes:	
Annex 1. Meeting Agenda .....	24
Annexe 2. List of Participants .....	26



# LIST OF ACRONYMS

AFRO	WHO Regional Office for Africa
APOC	African Programme for Onchocerciasis Control
CSA	Committee of Sponsoring Agencies
DPM	Director of Programme Management
JAF	Joint Action Forum
LF	Lymphatic Filariasis
MDA	Mass Drug Administration
M&E	Monitoring and Evaluation
MOH	Ministry of Health
NGDOs	Nongovernmental Development Organisations
NTDs	Neglected Tropical Diseases
PC-NTDs	Preventive chemotherapy Neglected Tropical Diseases
PCT	Preventive Chemotherapy & Transmission Control
PENDA	Programme for the Elimination of Neglected Diseases in Africa
RPRG	Regional Programme Review Group
SAFE	Surgery, Antibiotic treatments, Facial cleanliness and Environmental changes
SCH	Schistosomiasis
STH	Soil Transmitted Helminthiasis
TT	Trachoma Trichiasis
UN	United Nations
WHA	World Health Assembly resolution
WHO	World Health Organization
WHO/AFRO	World Health Organization Regional Office for Africa
SSFA	Small-Scale Funding Agreement (Accord de financement à petite échelle)
ToR	Terms of Reference (Termes de référence)
UNDP	United Nations Development Programme (Programme des Nations Unies pour le Développement)
UNCT	United Nations Country Team (Equipe pays des Nations Unies)
UNDAF	United Nations Development Assistance Framework (Cadre d'assistance des Nations Unies pour l'aide au développement)
UNICEF	United Nations Children's Funds (Fonds des Nations Unies pour l'enfance)
UNFPA	United Nations Population Fund (Fonds des NU pour la population)
WFP	World Food Programme (Programme Alimentaire Mondial)



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# EXECUTIVE SUMMARY

The WHO Regional Office for Africa (AFRO) organized a working group meeting on the establishment of the new NTD entity from April 28–30, 2015 in Johannesburg, South Africa. This meeting is as a result of previous discussions held over the past years and consultations with Member States, Partners and WHO on the urgent need to set-up an NTD entity that should accelerate the implementation of NTD interventions at country level to achieve the set NTD targets and goals.

The objectives of the meeting were to review the proposal for the establishment of the new NTD entity, the transition plan of action for 2016 and reach a consensus on the framework for the new NTD entity and next steps. The meeting was attended by 26 participants from Member States (6), Partners (9) and the WHO Secretariat (11). The African Development Bank joined some sessions of the meeting through a teleconference.

The meeting was opened by Dr Matshidiso Moeti, the WHO Regional Director for Africa and chaired by Dr Mwelecele Malecela, the Regional Programme Review Group (RPRG) Chair and Prof Allen Foster from the London School of Hygiene and Tropical Medicine. The methods of work included presentations, working groups and plenary sessions with a focus on key components of the different documents. Introductory presentations on the framework for the establishment of the new NTD entity, plan of action for the transition period and Working Groups to review the different documents were made and followed by discussions in working groups. Three working groups composed of a mix of country representatives, partners and WHO secretariat were constituted and focused on the following thematic areas: functions of new NTD entity, governance mechanism and structure and Financing mechanism, resources requirements and mobilization for review of the framework for the NTD entity. With regards to the transition plan of action, the group work focused on priority key activities; human resources requirements; and financial resources requirements.

Following several discussions and exchanges among participants, facilitated by the Chair and Vice-Chair, a consensus was reached on the establishment of the new NTD entity as well as the transition plan of action for 2016. Major meeting outcomes are summarized as follows:

## 1.1. Consensus reached on the framework for the establishment of the new NTD entity

- The main functions of the new NTD entity will be **provision of technical support to countries** in the various programmatic areas (Mapping, Mass Drug Administration, Transmission Assessment Survey, etc.) in their efforts to achieve PCT-NTD control & elimination goals
- The proposed institutional framework is that the new entity will be a **PC-NTD special project** of the NTD programme under the overall supervision of the Director of Programme Management of AFRO
- **The Regional Programme review Group (RPRG)** will be the main technical advisory group responsible for the review of NTD Programmes, approval of medicines application, review of Transmission Assessment Surveys among others.

- **A steering Committee** will be established to ensure that appropriate actions are taken on gaps or needs identified by the RPRG; and ensure that yearly action plans are reviewed and approved.
- **A Forum of Partners** which includes a **Donor Forum** will be established to facilitate discussions among partners on the status of NTD programmes, resources requirements, high level advocacy, and accountability
- **The financing mechanism** will be comprised of a combination of different schemes namely direct funding to countries; funding through the Pooled Funds; direct funding to the entity; and domestic funding schemes.
- Clear lines of accountability were defined and agreed upon

## 1.2. Consensus on the Transition Plan of action for the period 2016

- The transition plan of action will focus on the following key priority activities:
  - Implement activities to establish the new NTD entity
  - Maintain the current level of MDA coverage mainly in APOC support countries
  - Scale-up MDA towards achieving the 2020 NTD elimination targets
  - Develop M&E activities for Oncho and LF
  - Build partnership with national NTD programs
- Criteria suggested for prioritization of support to countries were agreed upon and include among others disease burden, status of NTD burden, political will, economic situation and others.
- Human Resource requirements for the transition period include 6 priority positions and 4 NPOs in selected priority countries.
- The initial proposed budget for the transition period was USD 12.9 million. Following discussions and review, the budget will range between USD 6 and 10 million depending on funds availability.

### The proposed next steps were as follows:

- i. A Small working group is to be set up to finalise the documents
- ii. Prioritise activities and prepare 2016 budget
- iii. Approach the World Bank or African Development Bank to initiate the process for setting up a Trust Fund and establish temporary mechanism in WHO to accept funds for the transition period
- iv. Undertake advocacy with all stakeholders on resource mobilisation
- v. A Stakeholders' Consultative meeting on the establishment of the Special Project for 5 PC-NTDs has been tentatively scheduled for 8-10 July 2015
- vi. WHO/AFRO was requested to set in motion mechanisms to recruit key human staff including the Special Project Coordinator for the transition period



# 1. INTRODUCTION

The African Region bears about 40% of the global burden of neglected tropical diseases (NTDs). All the 47 countries of the Region are endemic for at least two of the neglected tropical diseases (PC-NTDs) while 36 of them are co-endemic for at least 5 of these diseases.

The African Programme for Onchocerciasis Control (APOC) was launched in 1995, ultimately to control Onchocerciasis in endemic African countries. The control of onchocerciasis, the second major infectious cause of blindness globally with 99% of the disease burden occurring in Africa, has been acknowledged as one of the major public health achievements of recent decades in Africa through a successful partnership facilitated by APOC. This partnership has involved communities, policy makers, health workers, UN system, donors, Non-Governmental Development Organizations (NGDOs), Merck and Co Inc. and the Mectizan Donation Programme. It is estimated that the Programme saved 3 million disability-adjusted life-years between 1996 and 2005, and, with a free supply of ivermectin, this gives an estimated 17% economic rate of return on the cost of treatment delivery.

The commitment to address other NTDs has grown, with ambitious targets and milestones having been set at the global, regional and national levels. Over the past few years, countries in the African region have made significant progress in strengthening national leadership and programs to deliver interventions to tackle NTDs. WHO provided guidance and technical support to countries in the areas of coordination and integration of NTD interventions, strategic and operational planning, mapping of NTD, Mass Drug administration and monitoring of coverage, Transmission Assessment surveys and high level advocacy for sustained NTD funding. Despite this progress, several challenges remain. These include little attention given to other interventions to tackle NTDs (access to water and sanitation, health education, environmental manipulations and vector control), limited coverage of MDA in selected countries; unmapped areas in selected countries; upcoming closure of APOC and establishment of a new NTD entity.

To address the closure of APOC and creation of the new NTD entity as a way of sustaining gains made over the past years and keeping the current momentum on NTDs, the JAF 20 and CSA 149 held in Addis Ababa in December requested WHO to closely work with partners and countries to develop relevant documents to support the establishment of the new NTD entity. In order to resolve the governance and funding issues pertaining to the new entity, WHO held a working group meeting with endemic countries, partners and potential donors from April 28-30, 2015 in Johannesburg, South Africa to facilitate consensus on the establishment of the new NTD entity as well as the 2016 transition plan of action to cover the period between APOC closure and the establishment of the new NTD entity.

## 2. MEETING OBJECTIVES AND EXPECTED OUTCOMES

The presentation on meeting objectives and expected outcomes was made by Dr Daniel Kibuga, acting Director, Communicable Diseases and Surveillance Cluster, WHO/AFRO.

The Objectives of the meeting were given as follows:

The general objective of the meeting is to build consensus on the establishment of the new NTD entity, which will support the achievement of the 2020 goals and accelerate the progress towards the elimination of the targeted NTDs. Specifically the meeting objectives were to:

- i. To review the proposal on the establishment of the new NTD entity
- ii. To review the Transition Plan of Action for the period between the closure of APOC and the establishment of the new NTD entity
- iii. To gain consensus on the key elements of the framework of the new NTD entity, the transition plan and the proposed next actions

Based on the above objectives, the expected outcomes of the meeting were as follows:

- i. A comprehensive review of the proposal on the establishment of the new NTD entity
- ii. Transition Plan of Action for 2016 reviewed
- iii. Consensus reached on the key elements of the framework of the new NTD entity, transition plan and proposed next actions

## 3. OPENING CEREMONY

The three day working group meeting was officially opened by Dr Matshidiso Moeti, the WHO Regional Director for Africa. In her address, Dr Moeti welcomed participants to the working group meeting on the establishment of the new NTD entity and expressed her sincere thanks to all participants who took time from their busy schedules to attend this important meeting. She recalled participants of her promise to the African Health Ministers during the last Regional Committee and election of the Regional Director, that tackling NTDs including strengthening NTD partnerships, were among her highest priorities. She then focused on the following three critical and important areas of interest: APOC closure, establishment of the new NTD entity, and transition plan of action for 2016. With respect to the closure of APOC, she acknowledged progress made over the past 20 years by the APOC in controlling Onchocerciasis in most endemic communities and the shift from Onchocerciasis control to elimination after evidence indicated that this is achievable in most foci in Africa, using available tools. She also informed participants that the process of closing APOC is on track and will be completed on schedule. With respect to the establishment of the new NTD entity, she expressed the willingness of WHO to see a strong entity that will provide high quality technical support, and build the capacity of Member States to deliver NTD elimination interventions to scale in the next five years, towards the attainment of the 2020 targets. Noting the need for ensuring continuity in support to member states and avoid a gap between closure of APOC and full operationalization of the new entity, a Transition plan of action has been developed and submitted to the Working Group for review in accordance with the outcomes of the CSA meeting in Paris.

Dr Moeti concluded her remarks by assuring all participants of WHO's unswerving commitment to supporting the NTD elimination agenda, and strengthening the NTD partnership which is necessary for it to be achieved. She expressed her availability, at all times to discuss the establishment of the new NTD entity with Member States and partners and reiterated the need for all to move this process forward together, building the trust that is essential for our collective work. After the opening address Dr Moeti introduced Dr Mwelecele Malecela as the chair and Prof Allen Foster as the Vice-chair for the meeting.

## 4. SESSION 1: ESTABLISHMENT OF THE NEW NTD ENTITY

### 4.1 Overview of the new NTD entity

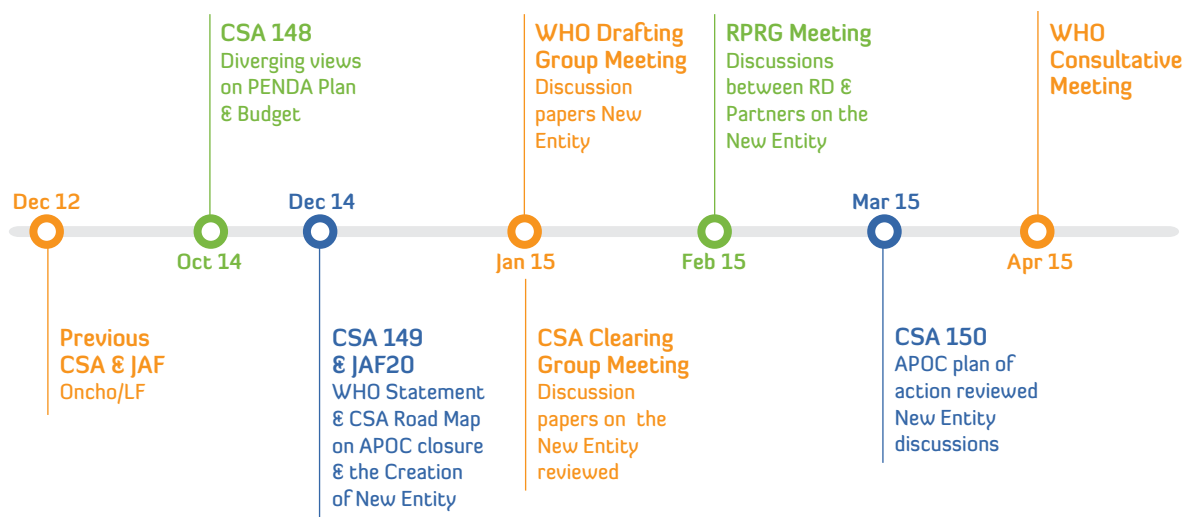
**Presenter:** Dr B. Impouma

#### Presentation summary

The presentation on the overview of establishment of the new NTD entity was made by Dr Benido Impouma after the topic had been introduced by Dr Joseph Cabore, the Director of Programme Management at WHO/AFRO. The presentation aimed at recalling discussions held over the past few years in setting-up a new NTD entity; highlighted the way the three-day meeting were going to evolve; and provided an overview of the framework for the establishment of the new NTD entity as well as the Transition Plan of Action for 2016.

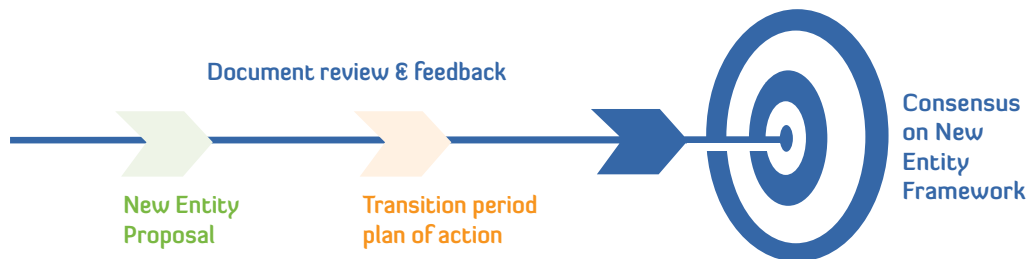
Discussions on the establishment of the new NTD entity started about three years ago as indicated in Figure 1.

Figure 1



Following several consultations between Member States, Partners and WHO, and discussions held between the Regional Director and partners on the need to move forward the establishment of the new NTD entity, it was agreed to hold a Working Group meeting with a focus on ensuring that consensus can be reached on the framework for establishment of the new NTD entity and the Transition Plan of Action as illustrated in Figure 2.

Figure 2: Process for reaching a consensus on the establishment of a new NTD entity



The presenter then introduced the framework for establishment of the new NTD entity. The process that led to the development of the document included among others a rapid analysis of the status of NTD programs; consideration of feedback received from partners, member states and WHO colleagues. The structure and content of the framework were also summarized. The scope of the new NTD entity will be on the five PC-NTDs in the region and its functions will be on provision of technical support in the following areas: strategic and operational planning strengthening of NTD programme capacities and enhancement of health systems through delivery of medicines.

The last part of the presentation was on the transition plan of action, which covers the period between APOC closure and the establishment of the new NTD entity. The process that led to the development of this plan of action, its objectives, and estimation of human and financial resources were presented.

### Clarifications

The meeting participants raised a number of issues related mainly to the Governance structure of the new NTD entity; its location as well as the financing mechanisms. The Regional Office provided some clarifications on the proposed governance structure, which placed the new NTD entity under the overall supervision of the Director of Programme Management of WHO/AFRO to enable it function as a project with less bureaucracy and improved efficiency. Most of the issues were however packed for the groups to discuss and provide recommendations on.

#### 4.1.1 Working group on the establishment of the new NTD entity

##### Working group methodology

Dr Mwelecele Malecela and Prof Allen Foster described the objectives and expected outcomes of the group work, highlighted the group work working process and provided guidance on ways of reporting by each work group in line with the Working group Guidelines. Three working groups made up of a mix of participants mainly countries, donors, NGOs and the WHO were composed to review and provide a feedback first on the draft proposal on the establishment of the new NTD entity as a whole and then focus on specific sections of the proposal allotted to the different groups. Groups were expected to provide a feedback on the points of agreement on the proposal, issues of concern or points for clarifications and then recommendations for improving and finalising the document.

Picture 1: Plenary session



The three main components of the documents reviewed respectively after a quick review of the whole document were as follows: i) what the entity should be doing (goal, scope, objectives & functions of the new NTD entity), ii) Governance mechanisms and structure of the new NTD entity, and iii) Management, Resources requirements and mobilization. Using these main components of the document, groups were categorized as follows: Group 1 focused on the functions of the entity, group 2 on governance and group 3 on funding and resource mobilisation. Each group rapporteur made an oral presentation on the outcomes of the group work.

## b. Working group outcomes

In line with the working group guidelines and proposed reporting templates, the groups reported on areas of agreement, issues of concerns or points that needed more clarification regarding the functions, governance structure and human and financial resources requirements.

### b. 1 Areas of agreement

Participants agreed on the following:

- Expanded scope of the new NTD entity beyond Onchocerciasis to all 5 PC NTDs with functions that include technical support, coordination and assisting in-country coordination for all 5 PC NTDs
- Provision of technical assistance to and capacity building of countries in the following areas: strategic and operational planning; strengthened NTD technical quality of NTD Programmes to increase coverage; Improved financial management to enhance accountability and cost efficiencies of the delivery system; and Strengthening health systems to deliver health interventions including NTD medicines delivered to poor and hard to reach communities
- Proposed governance structure which places the programme under the office of the DPM with WHO/AFRO in the lead ensures accountability to both the WHO, partners and Countries
- Governing bodies to include the Partners Forum, Regional Programme Review Group, Steering Committee and Partners' Forum
- Funding of the new NTD entity through a multifaceted approach involving direct donor funding to countries, direct funding by Governments of endemic countries, pooled donor funds through a trust fund and direct donor contributions to the new NTD entity
- Streamlined human resources structure which is likely to be less costly.



## **b.2 Issues of Concern or required clarifications**

A number of issues of concern or points for clarification were raised by participants for further discussions and suggestions. These include among others:

### **In relation to the functions of the new NTD entity**

- The level of autonomy of the new NTD entity with WHO/AFRO should be clarified
- Although the focus of the document is on PC-NTDs, it is important to ensure that CM-NTDs are addressed and not neglected
- The new NTD entity should focus its efforts on countries particularly high priority countries and its operations should be country led and based on needs.

### **In relation to the governance structure of the new entity**

- The proposed legal terminology is institutional framework instead of Governance structure of the new NTD entity
- The position of Partners' Forum in the proposed organogram needs to be better defined
- The role of the NTD-RPRG and NGOs should be better defined in the document
- The proposed organogram should help clarify the location of the new entity.

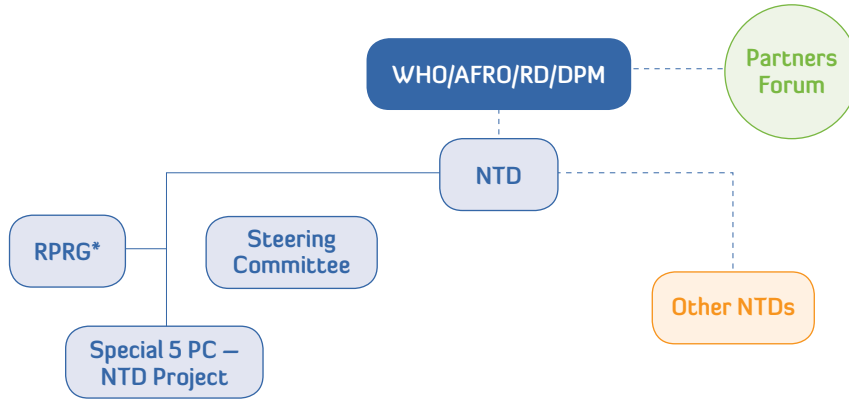
### **In relation to the governance financial mechanisms and resourcing of the new NTD entity**

- The four proposed financial schemes need to be further elaborated with clear financial flow mechanisms that reduces bureaucracy and maximizes performance
- The financial planning and oversight have to be clearly shown on the organizational chart
- There is oversimplification of the organizational chart on the funding mechanism without enough details that clearly demonstrates harmonization of donor, pooled funding and domestic funding
- The strategies for resource mobilisation which should include country contributions are not indicated in the proposal
- The composition of finance committee and its mode of operations is not indicated in the document
- The link between functions and budget is not clear and this is demonstrated by a disconnection between the scope of work and resource requirements.

## **b.3 Recommendations/suggestions**

To address the above issues and move forward, the groups of participants made direct inputs into the proposal for establishment of the new NTD entity and updated the institutional framework for the new entity to better reflect the position of the new NTD entity within WHO/AFRO; the position of the Steering Committee, RPRG and Donors Forum. The Groups further defined the roles and responsibilities of each Governing body and highlighted the critical importance that the RPRG will be playing as a technical advisory body on NTDs in the WHO African region. The updated organizational chart is illustrated in Figure 3.

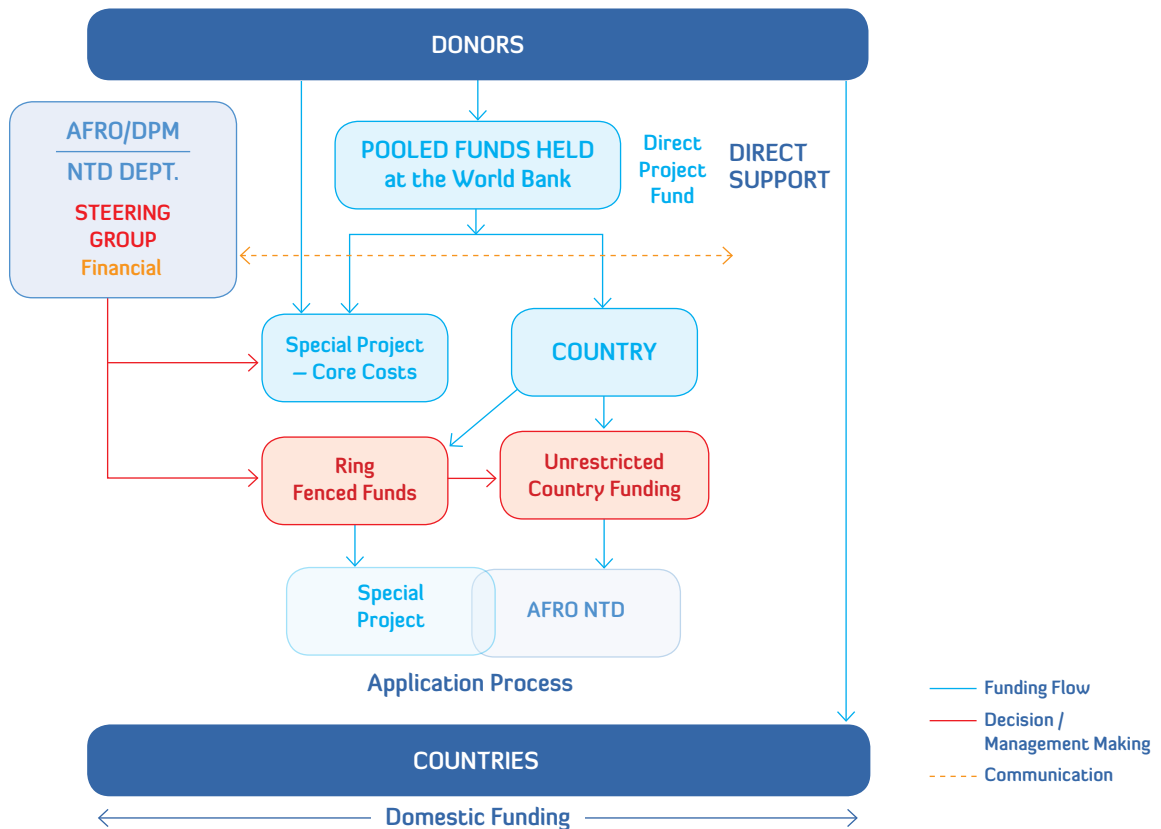
Figure 3: Institutional Framework



\* RPRG Taskforce for Onchocerciasis/LF

Financing of the new NTD entity being critical for rapid implementation of interventions, participants further clarified the financing mechanisms by developing a diagram that summarizes the flow of funds and links funding with technical interventions to be implemented at country level with the support of the new NTD entity. The financial mechanism diagram is illustrated in Figure 4 below.

Figure 4: Financing mechanism



## 4.2 Transition Plan of Action

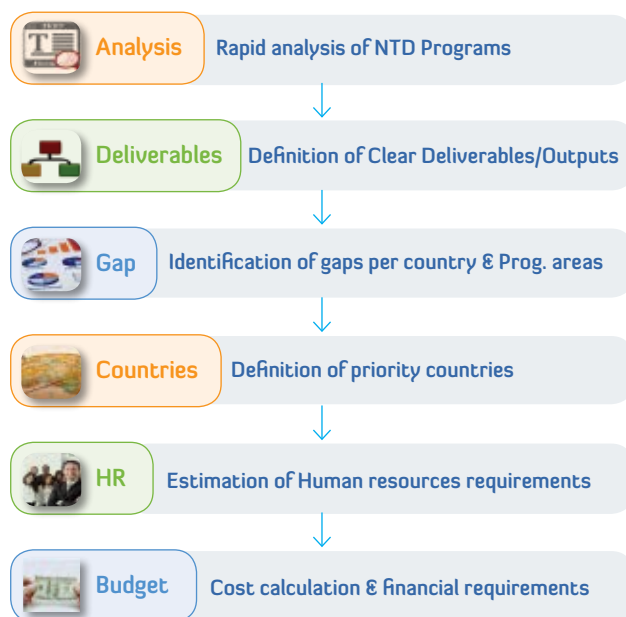
### 4.2.1 Overview of the Transition plan of action

**Presenter:** Dr A. Tiendrebeogo

#### Presentation summary

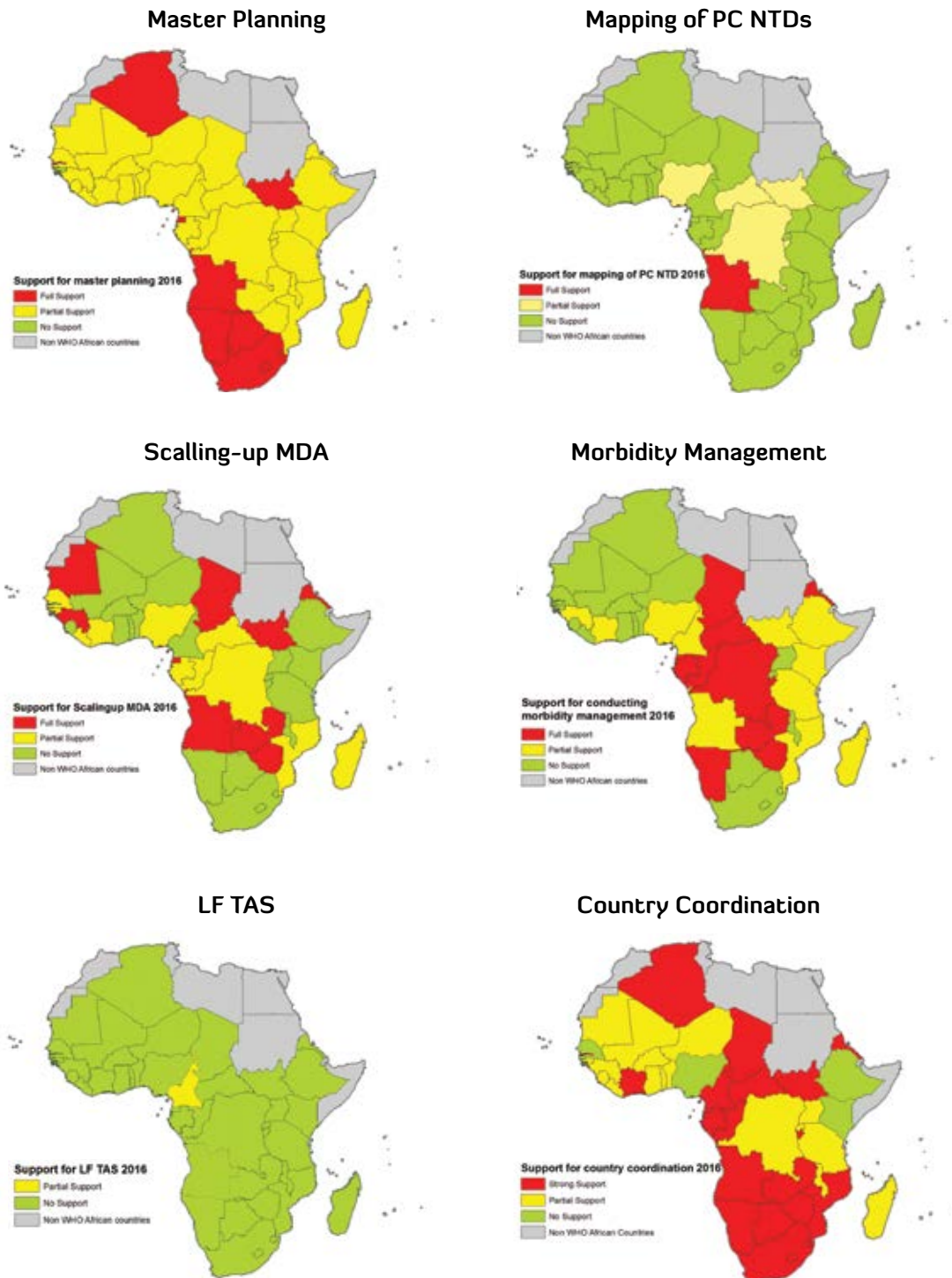
The presenter recalled the importance of having a transition plan of action that covers the period between APOC closure in December 2015 and the establishment of the new NTD entity. To estimate human and financial resources requirements for the transition period based on evidence, the process that led to this estimation was described in details. This included a rapid analysis of the status of NTD programs in the region; definition of clear deliverables; identification of gaps per country and programmatic areas; definition of priority countries based on a set of criteria; estimation of human resources requirements; cost calculation and estimation of financial requirements (See the steps for the development of the transition plan of action in Figure 5 below).

**Figure 5: Steps for development of the transition plan of action for 2016**



Based on these parameters countries were categorized into advanced or low priority countries, intermediate or medium priority countries and then yet to start or high priority countries. Dr Tiendrebeogo then summarized the status of NTD programmes in the WHO African region and highlighted areas and countries that need technical support. As at December 2014, 40 countries had developed NTD Master Plans; 20 countries were fully mapped; 27 countries had a geographic coverage rate of 100% for LF; 13 countries had successfully passed TAS in districts or at national level; and 22 countries had set up NTD coordination mechanisms.

Figure 6: Maps with country needs for support in 2016



The last section of the presentation focused on identification of support required by each country in each programmatic areas during the transition period as well as the next four years until 2020; estimation of human and financial resources. Table 1 shows support required by countries over the next five years.

**Table 1: Support required by countries from 2016 to 2020**

Type of Support	2016		2017		2018		2019		2020	
	Full	Partial	Full	Partial	Full	Partial	Full	Partial	Full	Partial
Mapping	1	5	0	1	0	0	0	0	0	0
MDA	9	11	1	8	0	1	0	1	0	1
Morbidity Management	11	11	1	11	1	0	0	1	0	1
TAS	0	1	1	0	3	1	4	3	12	0
Monitoring & Evaluation	0	4	0	1	0	10	2	0	11	0
Master Planning	14	32	0	14	0	0	0	0	0	0
Country coordination	17	17	20	20	5	5	0	0	0	0

Taking into account country needs and required support to be provided by the new NTD entity during the transition year (2016), the proposed number of staff required at regional and country levels was 20 and a budget of USD12.9 million were projected.

### Clarifications

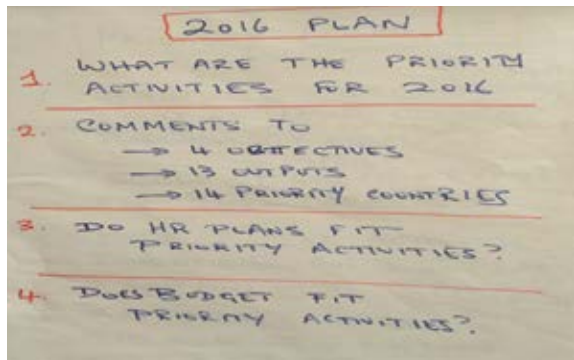
The presentations raised a number of issues related to the methodology used to categorize countries and define priority countries; human resources requirements and the estimated budget. It was agreed to address these issues in the group work.

## 4.2.2 Working group on the transition plan of action for 2016

### a. Working group methodology

Participants discussed the best way to organize the working group to review the transition plan of action. Following the discussions, Dr Mwelecele Malecela and Prof Allen Foster summarized the approach to reviewing and reporting back to the plenary session. Participants were requested to rapidly review the transition plan of action as a whole and then focus, using the same group composition, on the following: i) what are the three key priorities activities for 2016?, ii) Comments to the 4 objectives, 13 outputs and 14 priority countries, iii) Does the HR planning align with the priorities; and iv) Does the budget align with priorities? Group 1 focused on key priority activities; Group 2 on human resources (HR) and Group 3 on the Budget.

Figure 7: Notes from Transition Plan of Action Discussions



### b. Working group outcomes

Following review of the transition plan of action as whole and specific sections of the plan as per the guidance provided by the Chair and Vice Chair of the meeting, the outcomes of the Working Group were as followed:

#### b.1 Priority activities

Participants suggested making a clear distinction between the objectives, focus and interventions to be implemented during the transition period against those that are part of the new NTD entity. The following priority activities were therefore suggested:

- i. Maintain the current level of MDA coverage in APOC supported countries
- ii. Scale-up LF MDA to reach the 2020 targets
- iii. Develop monitoring and evaluation activities for Onchocerciasis and LF so as to be able to regularly carry-out TAS and other impact assessment (entomological or epidemiological) to demonstrate success in countries
- iv. Series of activities to set-up the new NTD entity (governance, HR recruitment and finances).
- v. Build partnership with national programs
- vi. Priority should be given to Oncho and LF during the first six months of implementation of the transition plan of action.

Picture 2: Group Work Session





## b.2 Review of the objectives, outputs and priority countries

Participants suggested to clearly define outputs against priority activities for 2016 and to link the outputs to the objectives. They also reviewed the criteria for prioritizing countries and recommended the following criteria: i) disease burden; status of NTD programs; iii) political will; iv) economic situation; v) other donor support; vi) exceptional needs and vii) quick wins.

## b.3 Human resources requirements

Human resource being critical for the success of the implementation of the transition plan, participants recommended the following:

- A clear distinction between 2016 HR transition plan and the established new entity HR plan should be made
- The HR plan should also define the permanent/essential positions for 2016. These should cover the following functions: coordination; data/database design and management; financial management; disease specific expertise with an emphasis on MDA. The proposed number of staff for the transition period was 6 including one coordinator, one finance expert, one data/database system developer, and three subject matter experts.
- The National Professional Officer at country level being key staff in ensuring that NTD interventions are better integrated and coordinated, participants suggested the recruitment of 4 NPOs in the following priority countries: Chad, DR Congo, CAR and South Sudan. The TORs of these NPOs should be reviewed/updated/or developed to ensure that there are clear results defined and performance management put in place.
- The secondment of staff from institutions with expertise in various programmatic areas should also be explored

## b.4 Financial requirements

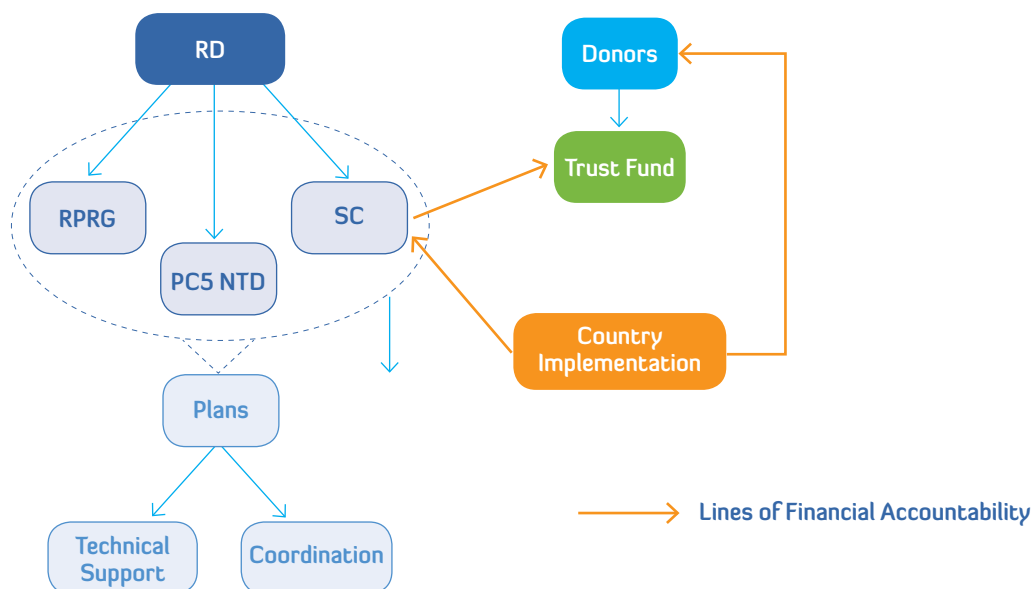
Given the uncertainty of availability of funds during 2016, participants suggested to reduce the overall budget. They requested that the budget figures be properly justified and priorities be defined depending on funds made available. Suggested priorities include key HR positions; continuation of MDA; maintaining entomological and epidemiological surveys for impact assessment; and activities to stop Oncho and LF MDA to demonstrate success.

The proposed budget was around USD 7 -8 million distributed as follows: MDA (\$5m), HR (\$1.7M) and others (\$1.3 to \$2.3). Discussions with the World Bank and the African Development Bank should also be initiated as soon as possible to ensure that all arrangements for the Trust are concluded ahead of schedule.

## 4.3 Consensus on key elements of the new NTD entity and the Transition Plan of Action for 2016

On the third and last day of the meeting, the Chair and Vice-Chair made a presentation that summarized the consensus reached on the framework for establishment of the new NTD entity and the transition plan of action. The functions, institutional framework, human and financial resources requirements for the new NTD entity were all agreed upon by all participants. The priority activities, human resources requirements and elements to be taken into consideration for computing the budget for the transition period were also agreed upon. The last part of the presentation focused on addressing the lines of financial accountability as illustrated in Figure 8.

Figure 8: Financial lines of accountability



## 5. PROPOSED NEXT STEPS

After discussions in plenary, the following next steps for setting up the new NTD entity were proposed:

- i. A small working group is to be set up to finalise the documents
- ii. Prioritise activities and prepare 2016 budget
- iii. Approach the World Bank or African Development Bank to initiate the process for setting up a Trust Fund and establish temporary mechanism in WHO to accept funds for the transition period
- iv. Undertake advocacy with all stakeholders on resource mobilisation
- v. A Stakeholders' Consultative meeting on the establishment of the 5PC NTDs Special Project has been tentatively scheduled for 8-10 July 2015
- vi. WHO/AFRO was requested to start the process for recruiting key staff including the Special Project Coordinator for the transition period

Picture 3: Proposing Next Steps in Plenary



## CONCLUSION

The Working Group meeting on the establishment of a new NTD entity, held in Johannesburg on April 28–30, 2015, aimed at reaching a consensus on the framework for establishment of the new NTD entity and the Transition Plan of action which covers the period between APOC closure in 2015 and the creation of the new NTD entity in January 2016. Building on previous discussions held over the past few years and the urgent need to ensure that the set NTD elimination targets and Goals are met in 2020, the meeting participants, drawn from Member States, Partners and WHO, reached at the end of the three-day meeting a consensus on the functions, institutional framework, human resources and financial requirements of the new NTD entity. They also defined priority activities, expected outputs, human and financial resources required for the implementation of the transition plan of action.

A series of next steps, which include finalization of the framework for the next NTD entity and the transition plan of action; organization of a stakeholders' consultative meeting planned for July 2015, and mobilization of financial resources were also defined. The three-day meeting was closed by Dr Matshidiso Moeti, Regional Director of WHO in the African Region, who expressed her gratitude to participants and re-iterated her commitment to closely work with Member states, partners and donors to ensure that the NTD elimination goals are achieved.

# ANNEX 1. MEETING AGENDA

## DAY 1 28 APRIL 2015

Timing	Activity/Topic	Facilitator/Presenter
08:30-09:00	Registration of participants	Secretariat
09:00-09:10	Administrative announcements and security briefing	
09:10-09:30	<b>Opening session</b> <ul style="list-style-type: none"> <li>Welcome address (WR South Africa)</li> <li>Opening speech (Regional Director)</li> </ul>	Master of ceremony
09:30-10:00	<b>Group Photo and Coffee Break</b>	<b>All participants</b>
10:00-10:10	Objectives and expected outcomes	WHO
<b>Objective 1: Review of proposal on the new NTD entity</b>		
10:10-10:30	Establishment of the new NTD entity: overview	WHO
10:30-11:00	Discussions	All participants
11:00-11:10	Introduction to group work	WHO
11:10-13:00	Group work	All participants
13:00-14:00	<b>Lunch</b>	
14:00-16:00	Group work (cont'd)	All participants
16:00-16:20	<b>Coffee Break</b>	
16:20-17:00	Preparation of group work presentations and reports	All participants
17:00	End of Day 1	

## DAY 2 29 APRIL 2015

Timing	Activity/Topic	Facilitator/Presenter
<b>Objective 1: Review of proposal on the new NTD entity (cont'd)</b>		
09:00-09:45	Plenary session - Group presentations(15min presentation & 15 min discussions)	Rapporteurs
09:45-10:45	Discussions	All participants
10:45-11:00	Wrap-up	Chair
11:00-11:30	<b>Coffee Break</b>	

**DAY 2 29 APRIL 2015 (CONT'D)**

Timing	Activity/Topic	Facilitator/Presenter
<b>Objective 2: Review of the Transition Plan of Action</b>		
11:30-11:45	Transition Plan of Action: Overview	WHO
11:45-12:00	Discussions	All participants
12:00-12:15	Introduction to group work	WHO
12:15-13:15	Group work	All participants
<b>13:15-14:15</b>	<b>Lunch</b>	
14:15-16:15	Group work (cont'd)	All participants
<b>16:15-16:30</b>	<b>Coffee Break</b>	
16:30-17:00	Preparation of group work presentations and reports	All participants
17:00	End of Day 2	

**DAY 3 30 APRIL 2015**

Timing	Activity / Topic	Facilitator/Presenter
<b>Objective 2: Review of the Transition Plan of Action (cont'd)</b>		
09:00-09:45	Plenary session - Group presentations(15min presentation & 15 min discussions)	Rapporteurs
09:45-10:45	Discussions	All participants
10:45-11:00	Wrap-up	Chair
<b>11:00-11:30</b>	<b>Coffee Break</b>	
<b>Objective 3: Summary of recommendations (consensus on key elements)</b>		
11:30-12:30	Consensus on key elements of the new entity	Chair
<b>12:30- 14:00</b>	<b>Lunch</b>	
14:00-15:00	Consensus on key elements of the Transition Plan of Action	Chair
15:00-15:30	Proposed next steps <ul style="list-style-type: none"> <li>• Consultative meeting on the establishment of the new NTD Entity</li> <li>• Others</li> </ul>	WHO
15:30-16:00	Closing remarks	WHO
<b>16:00-16:30</b>	<b>Coffee-break</b>	
16:30	End of meeting	

## ANNEX 2. LIST OF PARTICIPANTS

N°	Countries	Organization	Name	Title	E-mail addresses
<b>COUNTRIES</b>					
1	Burkina Faso	MoH	Dr Bocar Amadou Kouyaté	Conseiller Technique du Ministre de la Santé	bkouyate@hotmail.com
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3	Ethiopia	MoH	Mr Belete Mengistu Mammo	Ministry of Health	Belete19@yahoo.com
4	Nigeria	MoH	Dr Bridget Okoeguale	Ministry of Health	bridgeclinic2002@yahoo.com
5	Senegal	MoH	Dr Marie Khemesse Ngom Ndiaye	Directeur de la lutte contre la Maladie	ndiayekhemesse@yahoo.fr
6	Tanzania	MoH	Dr Mwelecele Ntuli Malecela	Director General, National Medical Research Institute (NMRI), NTD RPRG Chair and Delegate of MoH Tanzania	mwelentuli@gmail.com



N°	Countries	Organization	Name	Title	E-mail addresses
<b>WHO</b>					
7	South Africa	WHO	Mr Mike Tukuru	OO, WCR/South Africa	tukurum@who.int
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10	Geneva	WHO	Mr Daney Xavier	HQ Senior Legal Officer	daneyx@who.int
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18	Congo	WHO	Ms Ivora Carole	AA/NTD	ivorac@who.int

N°	Country	Organization	Name	Title	E-mail addresses
<b>PARTNERS</b>					
19	UK	Sightsavers	Thoko Pooley	Sightsavers	tpooley@sightsavers.org
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23	USA	BMGF	Donald Bundy	Deputy Director NTD, Global Health, Bill & Melinda Gates	www.gatesfoundation.org
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<b>INTERPRETERS</b>					
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<sup>1</sup> Participation to a single session on day 2.<sup>2</sup> Participation via Skype.



Credits

Production: Julie Pudlowski Consulting





**World Health  
Organization**

REGIONAL OFFICE FOR **Africa**

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