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Buruli ulcer
Chagas disease
Dengue and chikungunya
Dracunculiasis
Echinococcosis
Foodborne trematodiases
Human African trypanosomiasis
Leishmaniasis
Leprosy
Lymphatic filariasis
*Mycetoma, chromoblastomycosis
and other deep mycoses*
Onchocerciasis
Rabies
Scabies and other ectoparasitoses
Schistosomiasis
Soil-transmitted helminthiases
Snakebite envenoming
Taeniasis and cysticercosis
Trachoma
Yaws

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

30

Ending the neglect to attain the Sustainable Development Goals: a sustainability framework for action against neglected tropical diseases 2021-2030

ISBN 978-92-4-001902-7 (electronic version)

ISBN 978-92-4-001903-4 (print version)

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Suggested citation. Ending the neglect to attain the Sustainable Development Goals: a sustainability framework for action against neglected tropical diseases 2021-2030. Geneva: World Health Organization; 2021. Licence: CC BY-NC-SA 3.0 IGO.

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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

Ending the neglect to attain the Sustainable Development Goals: a sustainability framework for action against neglected tropical diseases 2021–2030 is a companion document to the road map for neglected tropical diseases 2021–2030. The road map was endorsed by the Seventy-third World Health Assembly in November 2020, calling on Member States to work towards the targets for 2030. This will be an exciting but challenging journey. Exciting, because the global neglected tropical disease (NTD) community has renewed its commitment to reaching the global NTD targets by re-focusing the work of countries, partners and stakeholders for the next decade and adding new cross-cutting targets that are more aligned with the Sustainable Development Goals. Challenging, because NTDs remain a group of diseases that mainly affect the most marginalized populations in specific geographical areas, i.e. tropical and subtropical regions. Targeted advocacy and communication will be essential to ensure that the specific health needs of these populations are included in international and national health agendas in order to leave no one behind.

The main efforts during the period of the first road map focused on rapid scale up of interventions to rapidly reduce the prevalence of NTDs through cost-effective public health interventions. The focus of the 2021–2030 decade is on protecting the progress achieved and, at the same time, expanding the scope to cover all 20 diseases and disease groups towards achieving the eradication, elimination and control of NTDs. The success of the road map will depend on the effective and sustained implementation of the interventions against NTDs.

While sustainability, defined as 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 road map, is generally recognized, there is no clear guidance on how to ensure that its determinants are considered both in the planning and execution of NTD interventions.

The World Health Organization (WHO) has therefore developed this sustainability framework for action as a companion document to the NTD road map. It begins by explaining how to look at sustainability in a comprehensive way, by considering contextual inputs, health system building blocks and cross-sectoral interactions. Then, it answers the key question on how to use this understanding to develop specific actions to foster sustainability.

To build sustainability, not only will NTD programmes need to be built upon national health systems, but also international donors and implementing partners will need to identify and utilize synergies beyond disease-specific programming and consider their potential roles in strengthening health systems. This WHO guiding document will help Member States, stakeholders and partners to align their strategies on identifying sustainable pathways towards the road map 2030 targets. The document is considered to be a living one, to be improved further as we gain experience from the application of these principles in field conditions.



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ACKNOWLEDGEMENTS

Ending the neglect to attain the Sustainable Development Goals: a sustainability framework for action against neglected tropical diseases 2021–2030 is a companion document to the road map for neglected tropical diseases 2021–2031. In response to the NTD community's request expressed during the consultations held for the road map, and at the request of the Strategic and Technical Advisory Group for Neglected Tropical Diseases, the WHO Department of Control of Neglected Tropical Diseases began development of this document in early 2020.

The road map team – Bernadette Abela-Ridder, Gautam Biswas and Pamela Sabina Mbabazi – was assisted by a drafting group comprising Xiao Xian Huang (WHO Department of Control of Neglected Tropical Diseases), Alexandra Earle and Susan Sparkes (WHO Department of Health Governance and Financing). The group was supported by Richard Killian, Helena Molina, Upendo John Mwingira, Wangeci Thuo and R. Taylor Williamson (RTI International) and Kimberly Lecorps and Stephanie McKay (Results for Development), who developed the concept and framework, facilitated consultations with countries and stakeholders and drafted the document.

An expanded road map Steering Committee was chaired by Mwelecele Ntuli Malecela, Director, WHO Department of Control of Neglected Tropical Diseases, with members from the WHO regional offices for Africa (Ann Fortin, Andrew Seidu Korkor, Maria Rebollo Polo and Alexandre Tiendrebeogo), the Americas (Amalia Del Riego and Santiago Nicholls), South-East Asia (Nima Asgari-Jirhandeh, Mohammed Jamsheed and Zaw Lin), Europe (Elkhan Gasimov and Aliya Kosbayeva), the Eastern Mediterranean (Irtaza Chaudhri, Faraz Khalid, Awad Mataria and Supriya Warusavithana) and the Western Pacific (Aya Yajima), who provided guidance and reviewed the concepts and drafts.

All 327 respondents to the initial online survey are acknowledged, as are participants from the countries, partners, academia, donors and pharmaceutical industry who participated in the group discussion. Irene Agyepong, Cristina Bisson, Lucille Blumberg, Derick Brinkerhoff, Taroub Faramand, Eric Fèvre, Grace Fobi, Djordje Gikic, Midori de Habich, Kara Hanson, Daniel Kress, Allyala Krishna Nandakumar, Joe Kutzin, Anna Okello, Naseem Salahuddin, Justin Tine, David Walugembe, Wendee Wechsberg, Claire Wenham, Paul Wilson and Jakob Zinsstag provided individual expert advice to the drafting group and are cordially acknowledged.

The final draft was reviewed by a group of independent expert peers: Laura Appleby, Taroub Faramand, Joyce Kyalo, Amanda Ottosson, Sara Pappa, Thoko Pooley, Linda Schultz, Paul Smithson and Emily Wainwright.

Funding was provided by the United States Agency for International Development.

The definitions given below apply to the terms as used in this document. They may have different meanings in other contexts. Health system definitions are derived from *Everybody's business: strengthening health systems to improve health outcomes: WHO's framework for action (1)*. Definitions specific to neglected tropical diseases (NTDs) were obtained from *Ending the neglect to attain the Sustainable Development Goals: a road map for neglected tropical diseases 2021–2030 (2)*.

Accountability framework: Framework for tracking stakeholder commitments for actions on sustainability, to support reporting on high-impact opportunities and assess whether sufficient progress is being made relative to their respective contributions.

Control: Reduction of disease incidence, prevalence, morbidity and/or mortality to a locally acceptable level as a result of deliberate efforts; continued interventions are required to maintain the reduction. Control may or may not be related to global targets set by WHO.

Coordination: Collaboration among adjacent sectors and programmes, within and beyond health, in the broader NTD network. Sectors such as vector control, animal health and WASH make critical contributions to progress against NTDs, and working together more effectively will accelerate and sustain progress towards elimination and control of NTDs.

Disease-specific: Concerning one neglected tropical disease.

Elimination (interruption of transmission): Reduction to zero of the incidence of infection caused by a specific pathogen in a defined geographical area, with minimal risk of reintroduction, as a result of deliberate efforts; continued action to prevent re-establishment of transmission may be required. Documentation of elimination of transmission is called **verification**.

Elimination as a public health problem: A term related to both infection and disease, defined by achievement of measurable targets set by WHO in relation to a specific disease. When reached, continued surveillance and mitigating actions are required to maintain the targets and/or to advance interruption of transmission. Documentation of elimination as a public health problem is called **validation**.

Endemic area: Area in which disease has persisted in a population or region, generally having settled to a relatively constant rate of occurrence.

Eradication: Permanent reduction to zero of the worldwide incidence of infection caused by a specific pathogen, as a result of deliberate efforts, with no risk of reintroduction.

Financing: Raising adequate funds for health in ways that ensure people can use needed services and are protected from financial catastrophe or impoverishment associated with having to pay for them.

Health workforce: A well-performing health workforce works in ways that are responsive, fair and efficient to achieve the best health outcomes possible, given available resources and circumstances; that is, there are sufficient numbers and mix of staff who are fairly distributed, competent, responsive and productive.

Information system: A system that ensures the production, analysis, dissemination and use of reliable and timely information on health determinants, health systems performance and health status.

Integration: Grouping or “packaging” of several diseases, depending on their burden in countries, to facilitate joint delivery of interventions through a common platform such as preventive chemotherapy and use of multiplex diagnostics, and integrated monitoring, evaluation and reporting for all relevant endemic NTDs.

Leadership and governance: High-level efforts to ensure that strategic policy frameworks exist and are combined with effective oversight, coalition building, the provision of appropriate regulations and incentives, attention to system design and accountability

Mainstreaming: Planning and delivery of interventions against NTDs through the national health system infrastructure to build capacity and contribute to sustainable, efficient disease prevention and control.

Mass drug administration: Distribution of medicines to the entire population of a given administrative setting (for instance, state, region, province, district, subdistrict or village), irrespective of the presence of symptoms or infection; however, exclusion criteria may apply. (In this document, the terms mass drug administration and preventive chemotherapy are used interchangeably).

Medical products, vaccines and technologies: Equitable access to essential medical products, vaccines and technologies of assured quality, safety, efficacy and cost-effectiveness, and their scientifically sound and cost-effective use.

National health system: Existing structure in a country through which health services are provided to its citizens.

Platform: Structure through which public health programmes or interventions are delivered.

Political environment: Context in which power and resources are distributed and contested in different countries and sectors, and the resulting implications for development outcomes.

Preventive chemotherapy: Large-scale use of medicines, either alone or in combination, in public health interventions. Mass drug administration is one form of preventive chemotherapy; other forms may be limited to specific population groups such as school-aged children and women of childbearing age. (In this document, the terms preventive chemotherapy and mass drug administration are used interchangeably.)

Service delivery: Effective, safe, high-quality personal and non-personal health interventions to those who need them, when and where needed, with minimum waste of resources.

Stakeholders: Individuals or groups of individuals who may be affected by, or influence, the efforts of NTD programmes.

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 road map.

Sustainability framework: A WHO guiding document that helps Member States, stakeholders, and partners identify pathways to ambitious, measurable actions for Member States to sustainably achieve NTD targets and milestones.

Universal health coverage: Ensuring that all people receive a minimum package of needed health services of sufficient quality to be effective, without fear that use of those services would expose the user to financial hardship.

While governments and stakeholders have made significant progress towards achieving the targets and milestones for 2020 set in the previous (2012) road map for neglected tropical diseases (NTDs), sustaining and accelerating these gains and achieving the targets for control, elimination and eradication for 2030 in the new (2021) road map will require additional effort and new approaches. This sustainability framework presents one such new action-oriented approach to facilitate planning, generate political momentum and enhance resource mobilization to support the delivery of sustainable interventions against NTDs. It also provides 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.”

The document is organized in four sections.

Section 1 explains the purpose of the framework and its linkages with the new road map.

Section 2 describes the framework. It posits that countries can achieve sustained effective coverage of interventions against NTDs and the 2030 road map outcomes by applying the cross-cutting approaches advocated therein (integrating, mainstreaming,

to drive and oversee the implementation of the framework. Second, the working committee identifies and engages stakeholders to understand their thoughts and concerns about sustainability processes. Next, the committee directs an analysis of progress towards sustainability, using the framework and the questions annexed to this document to guide interviews and focus groups. Then, the committee leads the development of priorities to strengthen sustainability and determines how to integrate those priorities into national health policies, strategies and plans. Finally, the committee oversees the implementation, monitoring and adaptation of strategies and actions to support sustainability.

Section 4 presents the key questions concerning health systems and non-health sectors, as well as the contextual factors. These questions should guide countries to identify areas for future progress towards sustainability.

By leveraging this phased approach, the sustainability framework supports the identification of pathways towards ambitious, measurable actions to strengthen sustainability. It is a call to action for Member States to identify priorities and develop strategies that address not only emerging disease epidemiology when conducting planning for NTD programming but also social, operational, managerial and political concerns that influence the successful delivery and use of NTD services.

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