

Report of the meeting of programme managers and the Regional Technical Advisory Group for the kala-azar elimination programme

Virtual meeting, 18–20 April 2022

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SEA-CD-332

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Suggested citation Report of the meeting of programme managers and the Regional Technical Advisory Group for the kala-azar elimination programme, Regional Office for South-East Asia; 2022. Licence: CC BY-NC-SA 3.0 IGO.

Cataloguing-in-Publication (CIP) data. CIP data are available at <http://apps.who.int/iris>.

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Summary and recommendations of the meeting

The WHO Regional Office for South-East Asia (WHO-SEARO) hosted a meeting of programme managers and the Regional Technical Advisory Group (RTAG), both in-person and virtual, in New Delhi, India from 18 April to 20 April 2022. It was held over three days to review developments in the national visceral leishmaniasis (VL) programmes of the five VL-endemic Member States and Sri Lanka, scientific community and WHO initiatives since the last RTAG meeting, hosted virtually on 5–8 October 2020. The main purpose of the meeting was to determine how RTAG could support the regional elimination programme in the most effective way.

Following presentations on recent evidence and reports on developments, there were opportunities for extensive discussions leading to the conclusions and recommendations below, which were agreed upon for action with designated responsibilities.

Conclusions

- The effectiveness of the current *Regional Strategic Framework for Elimination of Kala-azar from the South-East Asia Region* in achieving substantial reduction in the disease incidence in the last decade, including attaining the target of elimination as a public health problem by Bangladesh and maintaining this feat since 2017, was commended.
- Despite remarkable progress towards reduction in the incidence of visceral leishmaniasis, transmission continues and current tools and case-finding strategies are not optimal for moving towards elimination of transmission of *Leishmania donovani*. Several new tools are in the pipeline, but their validation and operationalization need to be accelerated.
- Contributions of Member States, with support from partners, to eliminating visceral leishmaniasis and strengthening of the health system and primary health care (PHC) capacity, particularly with regard to active disease surveillance, case management and vector control, and achievement of universal health coverage (UHC) and health-related Sustainable Development Goal (SDG) 3 in endemic countries in the Region should be acknowledged more widely.
- Continued action is required to maintain the targets after validation of elimination as a public health problem is achieved. Strong government ownership and effective integration of surveillance, clinical management and vector control interventions deployed against VL in other public health programmes and routine work of PHC workers and front-line health workers, along with sustained linkages with endemic communities and private-sector, health-care providers (both qualified and informal), are key for sustainability in the post-validation phase. These should be a core principle of the new Regional Strategy.
- As the number of reported VL cases dwindles, the political commitment to sustainability should be a priority, creating an appropriate set of tools to communicate on this with the key stakeholders.

Recommendations for WHO

