Context of Monitoring & Evaluation for preventive chemotherapy in National NTD programmes

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Global Directives

• 1994, WHA resolution 47.32-control onchocerciasis
• 1997, WHA resolution 50.29-eliminate lymphatic filariasis.
• 2001, WHA resolution 54.19-scale up STH and SCH control.
• Under the global programme, national programmes are being monitored at global level through requests for donated medicines and annual report submitted to WHO.
• 2012, a comprehensive WHA resolution 66.12 called "to monitor progress in achieving the targets for NTDs set in WHO’s roadmap for accelerating work to overcome the global impact of NTDs"
Definition of Roadmap endpoints and endpoint indicators


Sustaining the drive to overcome the global impact of neglected tropical diseases
Second WHO report on neglected tropical diseases
Implications: volume & type of M&E activities

• Provide sufficient and well-timed resources to support M&E activities corresponding to the programme phases:
  – Start-up
  – Scale-up
  – Scale-down

• Need for planning and scheduling of activities leading to reporting on NTD roadmap goals for 2015, 2020
  – National NTD Master plan programme evaluations, and re-planning for subsequent multi-year phase
  – Targeted support for disease-specific evaluations
Progress of the Global Programme to Eliminate Lymphatic Filariasis (GPELF), 2012

Mapping completed*: 81%
PC started*: 77%
Stopped PC, under surveillance*: 18%

* of 73 endemic countries globally

Source: PCT Databank
Progress of national programme to eliminate lymphatic filariasis – Example from GHANA, 2012

- Mapping completed*: 100%
- PC started†: 100%
- >=5 rounds of PC completed†: 82%
- Assessing transmission to stop PC†: 66%
- Stopped PC, under surveillance†: 5%

* of 170 total districts
† of 74 endemic districts

Source: NPELF, Ghana
Progress and targets of GPELF, 2000-2021

Integration across diseases

"Integration" across diseases can occur in:

1) delivery of PC medicines
   - LF MDA also deworms the target population for STH by default
   - LF and Oncho MDA, if both are co-endemic, treat both by default
   - ALB/MBD for STH and PZQ for SCH are often co-administered through school

2) associated activities, e.g. advocacy, social mobilization, training, monitoring coverage, evaluation of the outcomes of interventions etc.

65 out of 122 countries (53.3%) require PC for ≥2 diseases, thus eligible for integration.

24 out of 65 countries (40%) delivered PC interventions targeting all the diseases requiring PC in the country (i.e. entailing at least one coordinated administration of PC medicines to the same target population) – which included 3 out of 10 top high-burden countries (Tanzania, Bangladesh, India)
Next steps

• Similar assessment of national programme progress needed for;
  – Blinding trachoma
  – Onchocerciasis

• Increase focus on **Evaluation** aspect of M&E
  – Coverage evaluations
  – Disease-specific epidemiological evaluations
  – Programme evaluations