

Leadership Team Meeting**6 May 2021****Participants****Leadership team members and guests**

- Alice Cruz, UN Special Rapporteur
- Amar Timalina, President, International Association for Integration, Dignity and Economic Advancement (IDEA) Nepal
- Arielle Cavaliero, Global Franchise Lead, Leprosy, Novartis
- Bill Simmons (Chair), President & CEO, American Leprosy Missions
- Erwin Cooreman, Team Leader, WHO Global Leprosy Programme
- Geoff Warne, CEO, International Federation of Anti-Leprosy Associations (ILEP)
- Linda Hummel, Chair of Executive Group, Leprosy Research Initiative (LRI)
- Maarten van Cleeff, Former Director of Challenge TB project, KNCV
- Mauricio Lisboa Nobre, Consultant to Brazilian Leprosy Program
- Takahiro Nanri, Executive Director, Sasakawa Health Foundation
- Wim van Brakel, Chair, ILEP Technical Commission (ITC)

Secretariat

- Andie Tucker, Project Manager, Global Partnership for Zero Leprosy
- Bill Gallo, Secretariat Director, Global Partnership for Zero Leprosy
- Caroline Cassard, Communications Specialist, Global Partnership for Zero Leprosy
- Mondie Tharp, Project Manager, Global Partnership for Zero Leprosy

Invited but unable to attend

- Benedict Quao, Program Manager, National Leprosy Elimination Program of Ghana
- Gangadhar Sunkara, Senior Global Program Clinical Head, Novartis
- Mathias Duck, Chair of ILEP Panel of Persons Affected by Leprosy
- Rao Pemmaraju, Technical Officer, WHO Global Leprosy Programme
- Rekha Shukla, Joint Secretary, Ministry of Health and Family Welfare, India
- Roch Christian Johnson, President, International Leprosy Association

I. Discussion: Scientific Representative

The LT discussed final candidates for the scientific representative role.

II. Country Work: Côte d'Ivoire

- **Mauricio Nobre:** In discussions about countries, we are missing some basic data about cases, child cases, disability, etc. It's difficult to understand the level of endemicity without data on the country. We should have a template to present basic information.
 - **Mondie Tharp:** That information will be in the final report. When Christian is available, I'll invite him back to talk about that.
 - **Bill Gallo:** Most of the influencers who hear about this activity will not read an entire report. We can make sure that there's a recommended template that hits all the high points. This would provide decision-makers with a concise summary.
- **Wim van Brakel:** We can get district-level information through the country review. This information is difficult to get when we are not in-country. District-level information is available to MOH but is not reported to WHO. A district-level map could give an overview of where leprosy is in the country. This could be helpful for the MOH because many countries don't have this overview themselves.
- **Maarten van Cleeff:** It's important to have an idea of the strengths and capacity of the national control management, rather than only focus on what is happening in the field. We don't talk about drug procurement or how we set aims, the manuals, and policy settings. All of that work is the responsibility of the MOH. The capacity of the programme is very important. For instance, is the lack of human resources in management, fieldwork, or laboratories? These kinds of details are important for the road map.
- **Arielle Cavaliero:** As Maarten said, I want to understand which are technical issues and which are organizational issues. I would like a deep dive into several of these areas, which are huge domains that we need to unpack. We need to ask, what is the Zero Leprosy Country Model's value add? What areas have not traditionally been touched on? These programmes have an opportunity to revolutionize the way they approach leprosy that is most appropriate for today. We should create more space to discuss this. Reporting and accountability are other topics that come up but don't get enough attention.

- **Geoff Warne (Chat):** The KPIs in the new global leprosy strategy would be a good starting point for what Arielle is talking about - but would need to be added to.
- **Wim van Brakel (Chat):** The output of the WHO Task Force on Criteria for Elimination of Leprosy also has several new tools and criteria that would be very helpful in this regard. Also, p. 23 of the new Global Leprosy Strategy.
- **Bill Simmons:** Erwin, when was the last evaluation done in Cote d'Ivoire prior to this?
 - **Erwin Cooreman:** About a year and a half ago by Christian and one other colleague.
- **Mauricio Nobre:** We could try to standardize these country visits with guidelines and a TOR. Are these supervisors being paid for this job? Is there a contract between GPZL and the review team? When we say, we should ask for this or that, sometimes it's a lot of work.
 - **Mondie Tharp:** We cover travel/accommodation/per diem for international experts. They do not receive an honorarium.
- **Maarten van Cleeff:** When you pay, people are accountable for additional time after the mission to make the report. Now that we have worked with a few countries, we should update the terms of reference so that we cover what we want to cover.
 - **Erwin Cooreman:** I agree with Maarten. If we want good outputs, we will need to compensate the people for the time invested.
- **Bill Simmons:** As the LT has been on the other side of this country-work discussion and the Secretariat has great visibility into the terms of reference, there may have been something lost in translation. We need to better understand the terms of the country review. I wonder that our process requires a country review each time. This has traditionally been a WHO and MOH shared mission. LT members are asking questions about the heart of the matter in operationalizing partnership and key patient issues. The basic country review doesn't get into those issues. One of the challenges we face is handing over ownership of what the process looks like to the country and MOH. We have to think about how we control part of that agenda. I think the suggestion about paying consultants is one way to help ensure that we're getting the outputs we want and still have the MOH own the process itself.

- **Bill Gallo:** Folks are bringing up good points about the process. The idea of paying experts would depend on what kind of experts we want. Current consultants who do this for WHO may already work for a national government or other organization that won't allow them to be paid for their time. I am concerned that payment may only result in us getting paid consultants as opposed to peers who are doing the work in other countries. There are many factors to consider.
 - **Maarten van Cleeff (Chat):** Also important is the profile and 'visibility' of such reviews: e.g. is the outcome of the review presented to the Minister of Health during a well-organized event?
 - **Andie Tucker (Chat):** The country missions currently culminate in a meeting with the MOH.

- **Bill Simmons:** Thank you, Mondie, for taking the charge of this. Thank you, everyone. I will miss June's meeting. Taka will lead the June teleconference.