

***Opening Remarks***

***By***  
***Dr Samlee Plianbangchang***  
***Regional Director, WHO South-East Asia***

***At***

***Annual Meeting of The Nippon Foundation/Sasakawa  
Memorial Health Foundation Advisory Board***

***SEARO, New Delhi***  
***28-29 September 2007***

# **Annual Meeting of The Nippon Foundation/Sasakawa Memorial Health Foundation Advisory Board**

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**DR SAMLEE PLIANBANGCHANG  
REGIONAL DIRECTOR, WHO SOUTH-EAST ASIA**

Professor Kenzo Kiikuni, Chairman of the Advisory Board; Dr Yo Yuasa, Medical Officer, SMHF; Distinguished Members of the Advisory Board; Colleagues; Ladies and gentlemen:

It is with great pleasure that I welcome you all to this annual meeting of the Advisory Board of The Nippon Foundation and the Sasakawa Memorial Health Foundation.

The WHO Regional Office for South-East Asia has been privileged to host this annual meeting, and we sincerely thank Prof. Kiikuni for giving us this opportunity once again.

On behalf of WHO, I wish to convey our deep appreciation and thanks to The Nippon Foundation (TNF), and The Sasakawa Memorial Health Foundation (SMHF) for the strong and sustained support, for more than 30 years, to the WHO Global Leprosy Elimination Programme.

Significant progress has been made since our last meeting in October 2006. Last year, the number of newly detected cases decreased globally by more than 13.4%, compared to the figure in 2005.

At the beginning of this year, only five countries were yet to achieve the goal of leprosy elimination.

In close collaboration between the Global Leprosy Programme and the Regional Offices, operational guidelines for leprosy elimination had been translated into various national languages. To support the implementation of these guidelines, a number of national workshops had been organized. These workshops were supported by WHO, using the tools developed through the coordination of Regional Offices.

The International Federation of Anti-leprosy Associations (ILEP) and WHO co-hosted a "Consensus Development Workshop on Prevention of Disability". This workshop was followed by the development of a self-care manual on "prevention of disability", which is now ready for dissemination.

The WHO Goodwill Ambassador for Leprosy Elimination, Mr Yohei Sasakawa, initiated the Global Appeal 2007. The primary purpose of this appeal is to end social stigma and discrimination against people affected by leprosy. This initiative was co-sponsored by The Nippon Foundation and Sasakawa Memorial Health Foundation, the Philippines Department of Health, WHO and various NGOs. The Global Appeal was signed by Mr Sasakawa and 16 other persons, representing leprosy affected people all over the world. The event was launched in Manila at the beginning of last year, with extensive national and international media coverage. It gave a boost to general public awareness of leprosy, especially its social and economic dimensions. Thank you very much, Mr Sasakawa, for your unrelenting determination and commitment to social welfare of the leprosy affected people.

Last year, country-level partners' meetings, and review meetings of national leprosy elimination programmes took place in a number of

countries. Such meetings are also planned to take place in the coming year in other countries.

It has been proved time and again that well-functioning partnerships have been one of the key contributing factors for the success of leprosy elimination. Partners of the Programme are many, the main partner being certainly The Nippon Foundation/Sasakawa Memorial Health Foundation.

Besides supporting leprosy elimination through WHO, Sasakawa Memorial Health Foundation, as an ILEP member, has also been providing back-up support to the activities of other ILEP members. This is especially so for those who are actively involved in leprosy elimination activities at the country level. In addition, SMHF has been providing direct support to a number of national leprosy elimination programmes.

Epidemiologically, we know that new cases of leprosy will continue to occur. Though, hopefully, with the efficient and quality leprosy services, these cases would occur only in smaller numbers. However, we should recognize that the low endemicity in most countries poses its own challenges. The challenges in sustaining:

- political commitment;
- adequate resources; and
- quality of services;
- the same level of surveillance;

As well, there are challenges in retaining the required knowledge and skills of the general health service staff.

The main challenges that need to be seriously addressed now are to ensure the continuity of the thrust and intensity of leprosy work. The first priority is to achieve the elimination goal in the remaining five countries; the achievement of the goal at national level in all countries is the first step; and then we have to work diligently towards maintaining the efficiency of surveillance system, and further reducing the disease burden in all areas in countries.

In this Region, two countries are yet to reach the elimination goal, i.e., Nepal and Timor-Leste. The national leprosy elimination programmes in these two countries are working energetically in order to achieve the goal by the end of this year.

We are, at the same time, scaling up WHO support to countries:

- in the implementation of global operational guidelines on leprosy elimination;
- in the implementation of regional and country leprosy elimination strategies; and
- in the use of the self-care manual on Prevention of Disability.

I would like to urge our WHO Regional Focal Persons to undertake these scaling-up activities vigorously. Country-based implementation of the Global Appeal 2007 is another key undertaking.

The Regional Focal Persons need to get actively involved in this exercise in close coordination and cooperation with the Goodwill Ambassador, Mr Sasakawa. Supporting the involvement of leprosy-affected people from the planning stage of the development is essential indeed. This annual meeting of the Advisory Board provides us with the opportunity

to interact, share experiences and information on the achievements as well as the lessons learnt.

We will review and examine together the issues and challenges involved in leprosy elimination, regionally and globally. Here, we will learn from our strengths and weaknesses; and we will jointly chalk out our plans for the future, along with our main partners – TNF and SMHF. We earnestly urge TNF/SMHF to continue their generous support; so that we, together, can tackle the “unfinished agenda” more effectively, and move forward towards a “leprosy-free world”.

I repeat, we will have to ensure:

- sustained high quality leprosy services through the general health care systems;
- sustained efficient surveillance system; and
- further reducing the burden of leprosy in all countries.

In the process, we have to adequately take into account the socio-economic dimensions of the disease. And we have to devote all efforts to ensure reaching the unreached.

Lastly, I am sorry that one of our esteemed colleagues and a member of this Advisory Board, Dr Noordeen, has been unable to attend. This is due to health reasons. We all are aware of his unparalleled contribution to the achievement of global leprosy elimination. On behalf of WHO, I wish and pray for his speedy recovery.

The Agenda of the meeting is really full of important items. All of you will be kept busy throughout the course of the meeting.

Finally, let me wish you all the best and all success in your deliberations; and I wish the meeting a fruitful and successful conclusion. I hope that all of you would have a comfortable and enjoyable stay in Delhi. Thank you.