

KIGALI DECLARATION

ON
NEGLECTED
TROPICAL
DISEASES



Building on the progress of the London Declaration on Neglected Tropical Diseases (NTDs) and putting individuals and communities at the centre of the NTD response, we, the signatories of this declaration, come together to commit to ending NTDs.¹

We acknowledge that NTDs are diseases of poverty and inequity. By tackling NTDs we will reduce poverty, address inequity, strengthen health systems, increase human capital and build resilient communities, bringing us closer to achieving universal health coverage and the SDGs. This declaration is for and in service of the 1.7 billion people who continue to suffer from NTDs.

We, the signatories to this declaration commit to the achievement of the SDG 3² target on NTDs and to the delivery of the WHO 2030 NTD road map: *Ending the neglect to attain the Sustainable Development Goals: a road map for neglected tropical diseases 2021–2030*.³

We are collectively committed to the principle of ‘do no harm’ and will deliver on our commitments and contributions, as laid out in this declaration by:

WORKING TO ENSURE that people affected by NTDs, – particularly women and girls, persons with disabilities, and minority and underrepresented groups – are at the centre of NTD programmes and decision-making processes.

BEING CHAMPIONS AND AMBASSADORS for tackling NTDs by increasing the recognition and relevance of NTDs locally, nationally, regionally and globally and ensuring NTDs are a priority at the highest levels.

SUSTAINING A MULTISECTORAL and multidisciplinary approach to tackling NTDs, including One Health, that recognises the interactions of human, animal and environmental health and mitigates against the impact of climate change on NTDs.

INCREASING THE PROVISION of services that enable equitable access to the prevention, diagnosis, treatment and morbidity management of NTDs.

UNLOCKING DOMESTIC RESOURCES, including strengthening public health infrastructure to deliver effective NTD services, complemented by external resources.

IDENTIFYING SUSTAINABLE FINANCING opportunities and being stewards of the resources available to maximise impact and value for money.

WORKING IN A COORDINATED and integrated manner that is rooted in primary healthcare and is embedded within resilient national systems that serve affected communities.

INVESTING IN RESEARCH and innovation in new drugs and diagnostics for areas prioritised in the WHO 2030 NTD road map and, as appropriate, facilitating technology transfer and financing to ensure there is a sustainable supply of commodities for NTDs.

IMPROVING THE COLLECTION and use of data to guide programmes, increase their effectiveness and accelerate progress.

TRANSPARENTLY MONITORING and reporting on the progress made on the commitments and contributions laid out in this declaration, to hold each other to account while supporting national ownership of country NTD programmes.

By working together, adopting people-centred approaches and working across sectors, we can meet and sustain the NTD targets in the SDGs and the WHO 2030 NTD road map. We can eradicate two diseases, eliminate at least one disease in 100 countries, and decrease the number of people requiring interventions for NTDs by 90%. These commitments will help relieve suffering, decrease the health-related drivers of poverty, reduce disability and stigma, and improve mental wellbeing and inclusion in society.



1. By ‘end NTDs’ we mean NTDs are controlled, eliminated or eradicated, as outlined in the WHO 2030 NTD road map.
2. <https://sdgs.un.org/goals>
3. WHO 2030 NTD road map and companion documents: <https://www.who.int/publications/i/item/9789240010352>

COMMITMENT TO END NTDS

Incredible progress has been made against neglected tropical diseases (NTDs) – a group of 20 diseases that debilitate, disfigure and kill. Forty-three countries have eliminated at least one NTD, 600 million people no longer require treatment for NTDs, and cases of some of these diseases that have plagued humanity for centuries, such as sleeping sickness and Guinea worm disease, are at an all-time low. This proves ending NTDs¹ is possible.

Many factors underpin this success, but two are particularly important if progress is to continue.

The first is country ownership. Without countries embracing international targets, translating them into national strategies and then delivering on these, progress would not have been possible. It's essential that countries continue to lead on and take ownership of ending NTDs if we are to carry on seeing tangible results at scale.

The second, is partnership. The movement to end NTDs has been defined by partnerships and collaboration among a wide range of stakeholders. This includes the world's biggest public-private partnership. In 2012, industry partners, donor countries, private philanthropy, research institutions and civil society organisations came together to endorse the London Declaration on NTDs² in support of the delivery of the first World Health Organization (WHO) NTD road map³. This partnership must be continued and expanded, with affected countries and communities at the centre. It is only through coordinated and collaborative action, with each partner playing its part, that we can meet the UN's Sustainable Development Goals (SDGs) and achieve the targets of the WHO's NTD road map for 2030, which include the eradication of two diseases (Guinea worm disease and yaws) and the elimination of at least one NTD in 100 countries.

Efforts to tackle NTDs are a global health success story, but there is still a lot more work to be done before the world is free of NTDs⁴ – with more than 1.7 billion requiring NTD interventions annually.

COVID-19 has also affected essential healthcare services across the world, with NTD programmes having been particularly badly disrupted. COVID-19 has also shown the critical importance of investing in strong primary healthcare systems that can both respond to endemic diseases, such as NTDs, and make the world more resilient to pandemics.

Concerted action is needed to avoid COVID-19, future pandemics and the impacts of climate change, unravelling years of progress and exposing millions of children to preventable diseases. We have a huge opportunity right now to change the lives of those affected by NTDs, who are often trapped in cycles of extreme poverty by being prevented from going to school or being able to work. These diseases are preventable or treatable, so it is in our power to end NTDs.

Therefore, we, the signatories of this declaration, each pledge to do our part at the global, regional, national, community and partner level to ensure that NTDs are eradicated, eliminated or controlled by 2030.

1. By 'end NTDs' we mean NTDs are controlled, eliminated or eradicated, as outlined in the WHO 2030 NTD road map.

2. The London Declaration on NTDs: <https://unitingtocombatntds.org/resource-hub/who-resources/london-declaration-neglected-tropical-diseases/>

3. WHO NTD road map 2012–2020: https://www.who.int/neglected_diseases/NTD_RoadMap_2012_Fullversion.pdf

4. By 'free of NTDs' we mean NTDs are controlled, eliminated or eradicated, as outlined in the WHO 2030 NTD road map.

KIGALI DECLARATION ON NEGLECTED TROPICAL DISEASES

Building on the progress of the London Declaration on Neglected Tropical Diseases (NTDs) and putting individuals and communities at the centre of the NTD response, we, the signatories of this declaration, come together to commit to ending NTDs.⁵

We acknowledge that NTDs are diseases of poverty and inequity. By tackling NTDs we will reduce poverty, address inequity, strengthen health systems, increase human capital and build resilient communities, bringing us closer to achieving universal health coverage and the SDGs. This declaration is for and in service of the 1.7 billion people who continue to suffer from NTDs.

We, the signatories to this declaration commit to the achievement of the SDG 3⁶ target on NTDs and to the delivery of the WHO 2030 NTD road map: Ending the neglect to attain the Sustainable Development Goals: a road map for neglected tropical diseases 2021–2030.⁷

We are collectively committed to the principle of ‘do no harm’ and will deliver on our commitments and contributions, as laid out in this declaration by:

- Working to ensure that people affected by NTDs, – particularly women and girls, persons with disabilities, and minority and underrepresented groups – are at the centre of NTD programmes and decision-making processes.
- Being champions and ambassadors for tackling NTDs by increasing the recognition and relevance of NTDs locally, nationally, regionally and globally and ensuring NTDs are a priority at the highest levels.
- Sustaining a multisectoral and multidisciplinary approach to tackling NTDs, including One Health, that recognises the interactions of human, animal and environmental health and mitigates against the impact of climate change on NTDs.
- Increasing the provision of services that enable equitable access to the prevention, diagnosis, treatment and morbidity management of NTDs.
- Unlocking domestic resources, including strengthening public health infrastructure to deliver effective NTD services, complemented by external resources.
- Identifying sustainable financing opportunities and being stewards of the resources available to maximise impact and value for money.
- Working in a coordinated and integrated manner that is rooted in primary healthcare and is embedded within resilient national systems that serve affected communities.
- Investing in research and innovation in new drugs and diagnostics for areas prioritised in the WHO 2030 NTD road map and, as appropriate, facilitating technology transfer and financing to ensure there is a sustainable supply of commodities for NTDs.
- Improving the collection and use of data to guide programmes, increase their effectiveness and accelerate progress.
- Transparently monitoring and reporting on the progress made on the commitments and contributions laid out in this declaration, to hold each other to account while supporting national ownership of country NTD programmes.

By working together, adopting people-centred approaches and working across sectors, we can meet and sustain the NTD targets in the SDGs and the WHO 2030 NTD road map. We can eradicate two diseases, eliminate at least one disease in 100 countries, and decrease the number of people requiring interventions for NTDs by 90%. These commitments will help relieve suffering, decrease the health-related drivers of poverty, reduce disability and stigma, and improve mental wellbeing and inclusion in society.

5. By ‘end NTDs’ we mean NTDs are controlled, eliminated or eradicated, as outlined in the WHO 2030 NTD road map.

6. <https://sdgs.un.org/goals>

7. WHO 2030 NTD road map and companion documents: <https://www.who.int/publications/i/item/9789240010352>

STAKEHOLDER COMMITMENTS AND CONTRIBUTIONS

Achieving the objectives set out in this declaration depends upon all stakeholder groups working together and fulfilling their obligations. Stakeholders each make a unique and vital contribution. Collectively these translate into progress being made.

As national governments

We commit to demonstrating political leadership and country ownership by:

- Embedding NTD services and interventions in our national health systems.
- Ensuring programmes to prevent, diagnose and treat NTDs are prioritised, fully resourced and fully integrated within national strategic plans for health and allied ministries (such as agriculture, veterinary health, vector control, water and sanitation, gender and family affairs, and environment), following a One Health approach.
- Making sufficient financial allocations and commitments towards NTD interventions.
- Maximising the impact of donated NTD medicines from industry partners by ensuring that the resources needed to deliver these medicines are available.
- Improving disease surveillance, disease mapping, and how data is collected and used – including through improved digitalisation – to better target and deliver NTD services.
- Removing barriers to access such as duties and clearance taxes for donated NTD medicines to ensure these are distributed to vulnerable communities on a timely basis.
- Developing national public health policies on NTD prevention and treatment.
- Ensuring health management information systems are in place to manage NTD data and to provide financial and programmatic reporting on national key performance indicators for NTD programmes.
- Reporting on national NTD progress as part of the follow-up and review mechanism for the 2030 Agenda for Sustainable Development.⁸
- Transitioning from receiving large-scale medicine donations to providing affordable essential diagnostics and medicines within our health systems – starting with those most in need and using domestic resources in collaboration with the private sector. (Sustainability will depend on continuing to receive these donations in the short term and transitioning incrementally to country-procured and -financed diagnostics and medicines in the medium-to-long term.)

As parliamentarians

We commit to:

- Using the political levers at our disposal to raise awareness about the human cost of NTDs – diseases that are preventable and treatable.
- Proposing and adopting legislation and budgets that showcase political will, leadership and accountability on ending NTDs.⁹
- Increasing awareness of the global health security benefits of supporting national NTD programmes.

As mayors and local government leaders of affected countries

We commit to:

- Using our position as brokers between national authorities and local communities to accelerate integrated rural and urban development and create healthy and prosperous environments.
- Engaging and empowering communities and their leaders to identify local public health challenges such as NTDs and their persistent local risk factors.
- Finding both evidence-based and homegrown solutions to NTDs and related public health challenges and being accountable for their implementation.
- Coordinating services across sectors to improve the built environment – including housing, infrastructure development and maintenance, water and sanitation, and environmentally safe waste disposal – to reduce the transmission of NTDs and other communicable diseases.
- Working with civil society organisations (who provide an important bridge between local government and hard-to-reach communities), national government, the private sector and other key stakeholders on ending NTDs.¹⁰
- Ensuring women, young people, persons with disabilities, and minority and underrepresented groups are included in policy- and decision-making.

8. <https://sdgs.un.org/2030agenda>

9. By 'end NTDs' we mean NTDs are controlled, eliminated or eradicated, as outlined in the WHO 2030 NTD road map.

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As continental and regional bodies

We commit to:

- Providing political leadership for the recognition of NTDs as health and development priorities in our regions.
- Supporting coordinated multisectoral action against NTDs in our member states.
- Reviewing progress on ending NTDs¹¹ and taking the necessary steps for course correction.
- Celebrating countries as they achieve key milestones.
- Showcasing and championing best practices towards ending NTDs.
- Providing a platform, such as the ALMA Scorecard, to support regional accountability on achieving NTD targets across member states.
- Coordinating, and where possible harmonising, the approval of and setting of guidelines for tools to prevent and treat NTDs, to minimise the time needed for new diagnostics, drugs and vaccines to be adopted.
- Providing a platform for cross-border strategic planning and synchronisation of interventions to contain NTDs.
- Advocating for the control and elimination of NTDs among member states and other key stakeholders.
- Providing platforms for convening meetings and forums that will promote advocacy and partnerships for the control and elimination of NTDs.

As private-sector and pharmaceutical companies

We continue to commit to:

- Supporting national and international access-to-medicines programmes for NTDs – in alignment with the WHO 2030 NTD road map – through our committed donations of reliable, safe and effective medicines and diagnostics, supported by complementary funding from donors and governments to control, eliminate and/or eradicate NTDs.
- Supporting R&D for new treatments, and their delivery to people and programmes for safe and impactful scale-up, as required to meet the WHO 2030 NTD road map's goals and beyond.
- Together with national and international partners, co-creating sustainable solutions for strengthening local health systems.
- Supporting countries to take ownership of their NTD programmes through the development of national plans that integrate NTD programs into national healthcare systems.

As donors

We, as public- and private-sector donors, commit to deploying our technical and financial resources in support of countries to achieve the WHO 2030 NTD road map goals by:

- Partnering and collaborating with endemic countries to support their plans and stewardship of resources to achieve disease-specific goals while building resilient health systems.
- Engaging other donors to support NTDs and galvanising donor coordination under the leadership of endemic countries.
- Facilitating sustainable financing through collaboration with domestic funding processes and ensuring NTD donor resources complement rather than undermine or replace country resources.
- Collaborating with country governments, academia, the WHO and industry to fund research for new treatments and diagnostics to accelerate progress against NTDs in line with endemic country priorities.

As multilateral organisations

We commit to:

- Investing in health system strengthening by continuing to support integrated service delivery and continuing to finance core programme interventions that support NTD programme interventions.
- Advocating for robust and impact-driven national strategic plans for NTDs, supporting countries in developing their national strategic plans on NTD control, elimination, and eradication, and supporting countries with implementing their NTD programmes.
- Mobilising resources in support of national NTD services, diagnostics and medicine development.
- Making NTDs a pillar of the Global Plan of Action for One Health¹² under the Tripartite Plus Alliance (the WHO, Food and Agriculture Organization of the United Nations, World Organisation for Animal Health, and United Nations Environment Programme) within the broader framework of capacity building, multisectoral coordination and resource allocation.

11. Ibid.

12. <https://www.who.int/groups/one-health-high-level-expert-panel>

As non-governmental, civil society and community-based organisations

We commit to:

- Coordinating our contributions as implementing partners with endemic countries to achieve the goals of the WHO 2030 NTD road map, including advocating for increasing and sustaining domestic resources for NTD programmes, to strengthen their financial stability.
- Enabling enhanced participation of communities affected by NTDs in all levels of NTD programme design, implementation, policy, research, monitoring and evaluation.
- Safeguarding communities affected by NTDs through a 'do no harm' approach, while involving all sections of these communities in the fight against NTDs and building local networks of NTD champions to support advocacy, social and resource-mobilisation goals.
- Establishing evidence-informed practices – based on robust data – for the delivery of sustainable interventions that support resilient health systems and integrated programming at scale and for impact.
- Adopting an inclusive approach to identifying, implementing, monitoring and evaluating NTD projects and programmes, considering gender aspects and the specific needs of different sections of the population (e.g. people with reduced mobility, women, men, young people and senior citizens).

As academic and research institutions

By aligning our sectors with the WHO 2030 NTD road map and working with the affected countries, we commit to:

- Delivering a coordinated and country-led research agenda that places greater emphasis on strengthening research capacity, innovation, access and equity.
- Fostering interdisciplinary research (involving biomedical and social sciences) to build a better understanding across disciplines of how NTDs work, including how NTD services

can be successfully integrated into national and local health systems, and of how this knowledge can be translated into policy and practice.

- Engaging with communities on the development of interventions that can effectively respond to the complex needs of people affected by NTDs in their national and local contexts and, ultimately, making action against NTDs a vehicle to strengthening health systems.
- Advancing comprehensive educational curricula on the prevention, treatment and control of NTDs for all stages of educational development worldwide, with a focus on building the capacity and excellence of the health and research workforce and on creating an enabling environment for international cooperation to attract and consolidate a critical mass of professionals working in endemic countries.
- Advocating for an increase in health R&D expenditure (public and private, as a proportion of GDP) and in national health expenditure (on research innovation and capacity strengthening), in line with the SDGs.
- Supporting the development of robust monitoring and evaluation mechanisms across sectors that can measure the impact of actions to control, eliminate and eradicate NTDs.

As youth

We commit to:

- Using our voice to engage, empower and support youth communities and young leaders – including youth with disabilities – towards delivering and achieving the WHO 2030 NTD road map, thereby making sure that young people are not left behind in the fight against NTDs.
- Bringing our creativity, our energy, our sense for innovation, our skills with new technologies, our thinking and our talent to the fight against these diseases.
- Engaging and supporting international, regional and local decision-making bodies in carrying out advocacy and delivering the WHO 2030 NTD road map.
- Promoting and adopting healthy practices that prevent NTDs and support mental health and wellbeing.