

# FOR THE Elimination OF Leprosy

- Leprosy is curable
- Free treatment is available
- Social discrimination has no place



All smiles: participants of the Global Forum of People's Organizations on Hansen's Disease held in Manila pose for a photo on September 9, 2019.

**MESSAGE**

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## Reflections from Manila

The 20th International Leprosy Congress (ILC) took place from September 11 in Manila. What I appreciated about the congress was the fact that, in addition to the national program managers, health professionals, researchers, NGO staffers, medical students and more who attended, persons affected by leprosy from all over the world were there too and actively participated.

They had arrived a few days earlier to take part in the Global Forum of People's Organizations on Hansen's Disease organized by The Nippon Foundation and Sasakawa Health Foundation. About 60 members of people's organizations from 18 countries participated. A lady from the Philippines said: "There is a long way to go to eliminate stigma and discrimination. We all have to work together on this." I also heard my motorcycle metaphor mentioned more than once: namely, the front wheel represents the fight against the disease and the back wheel the efforts to end discrimination—and both need to turn at the same time for us to make progress.

As I have often said, it is essential for different

stakeholders to work closely together if we are to realize a world without leprosy. In that sense, I think it is very significant that a new global partnership has been formed that sets as its goal "zero leprosy" and brings together individuals and organizations on a platform where everybody can play a role.

The next ILC will be held in India in 2022. India is one of the most committed countries when it comes to tackling leprosy. It conducts nationwide case detection campaigns, it carries out awareness-raising activities in conjunction with local authorities and schools, and is working to amend or abolish discriminatory laws. On the frontline of the fight against leprosy, it has the potential to become a model for other countries through the actions it takes.

The fact that India was chosen as the next host of the congress is a sign of intent on the part of the International Leprosy Association. I believe this represents a major step in the direction of achieving our common goal of zero leprosy.

— Yohei Sasakawa, WHO Goodwill Ambassador

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# Coming Together

People's organizations share experiences and speak with a collective voice.



Local input: participants from the Philippines present their ideas on social enterprise.

The Global Forum of People's Organizations on Hansen's Disease was held in Manila from September 7 to 10, 2019.

Organized by The Nippon Foundation and Sasakawa Health Foundation, the Global Forum brought together representatives of 23 people's organizations from 18 countries. Including observers and resource persons, over 80 people attended.

The gathering followed three regional assemblies held in Africa, Asia and Latin America/Caribbean earlier this year that paved the way for the Global Forum and helped to shape its agenda.

The meeting provided a platform for people's organizations to share plans, ideas and experiences, participate in capacity-building workshops, make recommendations and provide a "people's perspective" on Hansen's disease to international organizations, national governments, partner institutions, media and other stakeholders.

Organizations represented included the veteran Brazilian social movement MORHAN (Movement for the Reintegration of People Affected by Hansen's

Disease), branches of IDEA (Integration, Dignity and Economic Advancement) from some half-dozen countries and CLAP (Coalition of Leprosy Advocates of the Philippines).

One outcome of the earlier meetings was reflected in the wording of the title, which took into account the concerns and recommendations from the African and Latin American/Caribbean assemblies regarding terminology and self-identification. This resulted in using the term Hansen's disease and not leprosy, and people's organizations on Hansen's disease rather than organizations of persons affected by leprosy.

## KEY ISSUES

Over four days, the Global Forum addressed a number of themes that people's organizations have identified as important to them in terms of their organizational capacity, sustainability, and capability to meet the expectations of the people they represent.

There were training workshops on social enterprise, fundraising, management and

## A CALL FOR ACTION

*The following are the conclusions and recommendations agreed at the recent Global Forum of People's Organizations on Hansen's Disease that took place in Manila from September 7 to 10, 2019.*

- Hansen's disease is more than a disease caused by a bacterium. Poverty, institutional, social and political neglect, complacency and the structural invisibility of vulnerable populations contribute to the perpetuation of Hansen's disease.
- There are still gaps in knowledge about Hansen's disease. More investments are needed to research and develop

- new diagnostic tools and effective anti-microbial treatments and for management of Hansen's disease reactions, and to develop new models to manage social aspects of the disease. Greater commitment from government, academic institutions and industry is needed.
- National programs should strengthen timely case detection, disability prevention and rehabilitation during treatment, and develop services for care after cure to include psychological, social and economic rehabilitation.
- The UN Principles and Guidelines for the

elimination of stigma and discrimination against persons affected by leprosy and their family members should be widely disseminated and implemented by governments and civil society.

- All remaining discriminatory laws and practices must be abolished. Although that would represent important progress, it would not be enough for the enforcement of human rights, for which affirmative and reparation measures and policies are needed.
- Full and impactful participation of People's Organizations in policy-making processes concerning Hansen's disease



A platform to share plans, ideas and experiences

networking. There were plenary sessions on human rights, sustainability and public health, followed in each case by group discussions and presentations.

There was also a proposal to organize a joint campaign for World Hansen’s Disease Day 2020, which is now being followed up.

Participants underscored the fact that Hansen’s disease is not just an issue of health but an issue of human rights. Efforts against Hansen’s disease will not be successful if they only treat the bacterial causative agent and do not address the disease’s physical, psychological, social and economic consequences.

They also noted that although the disease is curable, it is still stigmatized, and the continuing stigma remains a barrier to case detection, treatment and inclusion.

“I am a person affected by Hansen’s disease, one the one hand, but on the other I am a principal of a school and am contributing to society. I’m paying tax like other citizens. Why discrimination? Why stigma?” said IDEA Nepal’s Amar Timalisina, speaking on the sidelines of the forum.

“The public have in mind that leprosy is not

curable,” said IDEA Ghana’s Kofi Nyarko. “We have to put a different idea in their mind.”

The meeting recognized that addressing issues of clean water, nutrition, good sanitation, housing, education and dignified work—issues that go beyond health—is critical to a comprehensive strategy against the disease.

It also stressed that at a time of lowered government priorities on Hansen’s disease and the non-uniform distribution of cases, empowered people’s organizations are needed more than ever—both to advocate for sustained Hansen’s disease services that deliver accessible quality treatment and rehabilitation, and to promote dignity, equality and respect for human rights.

As participants in the forum, delegates recognized that they had a responsibility not only to represent their respective members, but also all those who do not have a voice.

Following four days of discussion and debate, the Global Forum issued a summary of the proceedings, including a set of conclusions and recommendations (see below).

For Joshua Oraga from Kenya, the meeting by and large lived up to his expectations, but he didn’t want to see the energy from the global forum dissipate after delegates went their separate ways.

“There is a need for each region to domesticate these outcomes, to fix their own unique issues back home. I would like assistance for another smaller conference in the African region to see how we can move forward,” he said.

“I don’t want to go to another conference in six months’ time and still be talking about the same things. We need to talk about the progress we have made.” ■

must be assured.

- Special attention must be given to the situation of vulnerable populations with Hansen’s disease—especially women, children, immigrants, refugees, the elderly and the homeless—and those living in geographically inaccessible areas.
- Governments should develop measurable action plans recognizing that not only the health ministry but other ministries and agencies must be involved collectively in resolving Hansen’s disease issues.
- People’s Organizations should

- strengthen existing networks and create truly functioning regional and global networks. NGOs and governments should strive to support the formation and sustainability of these networks.
- People’s Organizations must actively advocate for quality Hansen’s disease services within an integrated health structure and system and through their committed participation help ensure the sustainability of the Hansen’s disease program.
  - Governments and other partners should be open and willing to fund projects that address the sustainability

- of People’s Organizations in recognition of the contribution these organizations can make.
- As a step toward reducing stigma and discrimination, there was strong support from some quarters of the Global Forum for the term Hansen’s disease to be adopted as the official term for leprosy worldwide.
  - Although not on the formal agenda of the Global Forum, the participants recognized the importance of preserving Hansen’s disease history and heritage as a record and a guide for future generations.

# Knowledge Is Key

Educating health professionals and the public about Hansen's disease is a must.

I recently had the opportunity to participate in the Global Forum of People's Organizations on Hansen's Disease that took place in Manila.

As a doctor, I know Hansen's disease to be a complex disease that can have devastating physical, social and psychological consequences if diagnosis and treatment are delayed. We cannot tell people with permanent and visible lesions that the disease is "curable", because their lesions are with them for life.

I have stayed in touch with some individuals—former patients of mine who were already marked by disabilities due to Hansen's disease when I first saw them. They say to me, "Thank you for accepting us like this," which makes me sad because it suggests others do not.

As an ex-Hansen's disease patient myself, I'm thankful not to have any disabilities, but as a researcher and health care professional, I am not without feelings of guilt on behalf of my profession. Despite epidemiological data suggesting that the infection is under control, the disease still exists around the world.

I believe this is because Hansen's disease is under-diagnosed. We are not talking about it enough and not teaching students and health professionals how to recognize it.

For a long time we have largely relied on dermatological signs for diagnosis. But for early diagnosis we need to train physicians about the neurological symptoms, which requires more work.

In my own case, while I suspected I had Hansen's disease based on clinical neurological

manifestations, two of my colleagues dismissed my fears and it took a third to confirm the diagnosis.

I hope too that one day we will have serological tests for Hansen's disease, as in the case of HIV infection, that can be used to diagnose the disease.

In the meantime, we need an intense effort to communicate information about Hansen's disease to the public through the media, which is one of the key points for early diagnosis and avoiding disabilities. But it is not easy to talk about the disease when there is a general perception that Hansen's disease is on the decline or no longer exists.

At the forum, persons affected by Hansen's disease discussed their experiences, the challenges they face, and how to overcome them. However, there was not much discussion about actions to raise awareness in children.

This to me is essential: we need to tell people about Hansen's disease from a young age—about the early signs and symptoms, and the existence of an effective cure—so they grow up without stigmatizing the disease.

When my own diagnosis was confirmed, I felt a certain fear—not because of the disease itself but because of its significance in society (and especially among my co-workers), so I did not mention it. Looking back, it was a foolish prejudice, but it was only years later that I started talking openly about it, especially to my patients as I tried to encourage them to accept the disease as just another infectious disease.

Knowledge can defeat prejudice, but even in my own case, changing minds takes time. ■



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## BUILDING FOR A SUSTAINABLE FUTURE

Organizational sustainability is a challenge facing all people's organizations, but the Ethiopian National Association of Persons Affected by Leprosy (ENAPAL) is confident it now has a viable plan taking shape before its eyes.

Thanks to a donation of land from the Ethiopian government and funding from Sasakawa Health Foundation, the organization is erecting a four-story headquarters in an up-and-coming area of the capital, Addis Ababa, that it hopes will generate the income necessary to wean it off reliance on donors.

ENAPAL's ambition is to generate a sustainable income that will help it to capacitate its branches and, as its income grows, support the work of organizations in other African countries too.

Work is now well under way and the

building is due to be completed in 2020.

As ENAPAL's managing director Tesfaye Tadesse explains it, the first floor will be rented out to commercial enterprises, the second floor will consist of office space—some of which may be rented by a partner NGO—the third floor will house accommodation, while the fourth floor will be used for conferences. ENAPAL also eyes tapping into the lucrative wedding business and renting out the top floor for receptions.

With 70 branches around the country and some 20,000 fee-paying members, ENAPAL is finding that the building project has been motivating its membership, with branch associations contributing what they can toward construction—"everything from small monetary amounts, hens, sheep and even



Tadesse (left) and ENAPAL colleagues in Manila

a small goat. It gives them ownership," Tadesse said.

Beyond its income-generating potential, there is one more aspect of the building that excites him. "Fifty years ago, persons affected by leprosy were chased out of Addis Ababa. Now we are reversing that. We are putting up a symbol of ourselves in the capital city. It's a paradigm shift."

# Together, We Can Do This

20th ILC puts focus on partnership as key to accelerating progress against leprosy.

Presenting a united front: opening session of the 20th International Leprosy Congress



Two informal polls that bookended the start and finish of the 20th International Leprosy Congress in Manila from September 11 to 13 suggested that efforts against the disease may be entering a new phase.

During the opening session, American Leprosy Missions President Bill Simmons gave a stirring address in which he talked about the potential of the new Global Partnership for Zero Leprosy (GPZL) to “tip the scale” and have a significant impact on incidence, impairment and stigma. Established on World Leprosy Day 2018, GPZL provides a common platform for diverse stakeholders to make a contribution toward eradicating the disease.

“How many of you here are already involved in the partnership in some way?” Simmons asked the audience. “Please stand up.” Many in the cavernous hall inside the Philippine International Convention center rose to their feet.

**“That’s impressive. That’s very hopeful for the future of leprosy work.”**

Fast forward to the final day, when Dr. Paul Sanderson, chairman of the congress’s International Scientific Committee, was wrapping up proceedings. Noting the tendency for people to say that everyone in leprosy is getting old, he said that of the 1,012 participants, 12% were under the age of 30; 72% were between the ages of 30 and 60; and 16% were over 60. “To me that is very encouraging—a lot of people are in mid-career or at the beginning of their career who are in leprosy,” he said.

He then invited people to stand if it was their first congress. “That’s impressive,” he commented as he surveyed the floor. “That’s very hopeful for the future of leprosy work.”

## JOINING FORCES

It was no coincidence that the opening of the congress included a talk about partnership, as the theme of the 20th congress was just that—global partnership in addressing current challenges: zero transmission, zero disability and zero discrimination.

With reported new cases plateauing at around 200,000 annually, there is general consensus that new initiatives are needed if there is to be a significant impact on the global leprosy situation.

Hence there was a lot of interest in the latest developments in chemoprophylaxis and its potential for interrupting transmission and reducing case numbers, as evidenced by the crowded sessions on the subject. Also garnering attention was the topic of new diagnostic tools that can lead to earlier diagnosis.

Meanwhile, the search for a viable vaccine continues, with an update on the work of the Seattle-based Infectious Disease Research Institute. There was also a presentation on the possibilities of new drugs emerging from developments in the field of structural biology.

Advances in the management of reactions and neuritis was a topic addressed by Professor Diana Lockwood, who noted that reactions continue to be a major problem in leprosy and that health staff need to be taught to recognize them. Neuropathic pain as a consequence of leprosy was also highlighted, with pain portrayed as an “invisible disability.”

In total, there were nearly 800 oral and poster sessions, running the gamut from digital health to human rights, and from nutrition to the preservation of leprosy history and heritage.

The host country’s contributions to leprosy work were recalled in a presentation by Dr. Arturo C. Cunanan, chief of the Culion Sanitarium, among them the fact that the first field trials of multidrug therapy (MDT) were carried out in the Philippines and the first calendar blister packs were produced there.

The voices of those who have personally experienced the disease were well represented, with Jennifer Quimno of the Coalition of Leprosy Advocates of the Philippines presenting the conclusions and recommendations that emerged from a Global Forum of People’s Organizations on Hansen’s Disease held prior to the congress.

## ‘THE NEW FACE FOR LEPROSY’

Professor Lockwood returned to the dais on the final day to introduce a project called “The New Face for Leprosy”—photos and testimony that show persons affected by the disease in a positive light. With stigma and discrimination still a reality, images that give newly diagnosed patients reason to hope are necessary to change mindsets and “turn leprosy into a 21st century disease,” she said.

India, the hub of the world’s leprosy cases, was unveiled as the host of the next ILC in 2022. With the country’s national leprosy eradication program ramping up its efforts against the disease, partnerships blossoming, and research into innovative tools continuing, the 21st congress promises to be interesting indeed. ■

# Bridging Differences

How leprosy work is making a contribution to peace-building in Sri Lanka.

Every year over 2,000 new cases of leprosy are diagnosed in Sri Lanka. People affected by the disease live in all parts of the island nation, belong to various ethnic groups and encounter similar challenges.

Kaveri Kala Manram (KKM), an organisation in the north of Sri Lanka, has been assisting and empowering people affected by leprosy for the past 20 years in partnership with The Leprosy Mission England and Wales.

Under the leadership of Reverend Joshua Sivagnam, KKM endeavors to reach out with kindness to all persons affected by leprosy, irrespective of class, ethnicity or creed.

Through leprosy work, it has managed to generate goodwill and embark on peace-building in a country that continues to encounter pockets of racial disharmony and religious intolerance.\*

## LIFE-CHANGING ENCOUNTER

In 2013, members of KKM encountered Amarasinghe Manjula, a gentleman who had been diagnosed with leprosy and was facing difficulties. Although he was from a different ethnic background, KKM staff offered him the same care and assistance as they would one of their own. Once recovered, Amarasinghe, appreciative of the support and kindness he had received, joined KKM to raise leprosy awareness in his village, Bohagasveva.

## The Sinhala children sang Tamil songs in a show of solidarity and friendship.

Many unifying goodwill gestures started to flow from this encounter. Amarasinghe invited KKM staff to his hometown, where the residents cordially welcomed them in a traditional Sinhala ceremony. The guests fondly recall the Sinhala children sang Tamil songs in a show of solidarity and comradeship.

In turn, each member of KKM's staff has chosen to financially assist a school student in the village to further strengthen this valuable inter-racial friendship. A total of 35 school children benefit from this generous support. KKM also funds nutritious food for 102 students who attend Sunday classes at a Buddhist temple.

In 2017, in a further endeavor to connect the ethnic groups, Tamil families affected by leprosy from the north traveled to meet with Sinhala families further south to share their stories and develop mutual understanding.

In 2018, KKM members again ventured south to celebrate the Sinhala-Tamil New Year together. An

estimated 108 people participated in the celebrations.

## 'A TASTE OF PEACE'

Dhammananda Thero, the executive director of the Walpola Rahula Institute for Buddhist studies, visited KKM's headquarters in Kilinochchi to encourage KKM's unifying work and share his own experiences of social healing initiatives in Tamil areas such as Mullaitivu on the northeast coast.

To fortify peace building in Sri Lanka, Dhammananda Thero kindly invited KKM to visit another town called Kapitigolawale in North Central Province comprising displaced Sinhala families resettled there after ethnic unrest. It borders a Tamil community that was also displaced. In 2018, in a project aptly named 'A Taste of Peace', KKM staff and well-wishers joined families there to cook and enjoy each other's traditional dishes.

In 2019, vanloads of Tamil and Sinhala families affected by leprosy from Jaffna, Bohagasveva and Kilinochchi gathered in Mullaitivu to play games, share lunch, partake in workshops and enact dramas. Divided into mixed groups, they were able to get by with a handful of words in common, some sign language and lots of laughter. It was heartening to see goodwill gestures from both ethnic groups snowballing into so many delightful encounters.



## AUTHOR:

**Dr. Malathy Waran**

Dr. Malathy Waran is a founder member of the Leprosy Association in Sri Lanka and on the board of directors of Kaveri Kala Manram (KKM). Founded in 2002, KKM is a multi-faith cultural and humanitarian organization working to ensure the care and protection of disadvantaged persons, especially those affected by leprosy.



Efforts at peace-building take different forms.

In 2017, KKM started an organization called the Leprosy Association to empower persons affected by leprosy to work together to dispel myths about leprosy and eradicate the disease from Sri Lanka. Among their activities, they have assisted Muslim families affected by leprosy with sustainable housing.

Earlier this year, following the bombing of churches on Easter Sunday that led to a backlash against Muslim communities, KKM and Leprosy Association members visited leprosy-affected Muslim families in Eastern Province to offer protection and promote goodwill.

Many friendships continue to be forged as a result of encounters between different ethnic and faith communities affected by leprosy. In this way, KKM hopes that mutual respect, tolerance and acceptance will increase and lead to a united Sri Lanka. ■

## FOOTNOTES

\* The two main language groups in Sri Lanka are Sinhala and Tamil. The major religions are Buddhism, Hinduism, Islam and Christianity.

# Shoulder to Shoulder

Time with persons affected by leprosy is time well spent, the Goodwill Ambassador finds on his recent visit to Manila.



With Morhan's Francilene Mesquita at the Global Forum

## PHILIPPINES (September 8-11)

I was in Manila recently to address the Global Forum of People's Organizations on Hansen's Disease and speak at the 20th International Leprosy Congress.

I always value the time I spend with persons affected by leprosy, and this was no different. At the forum, which was designed to strengthen ties between their organizations and explore solutions to the challenges they face, I told participants that as individuals there is only so much they can do, but when they come together, they can achieve much. "A single strand of yarn is weak, but many strands form a strong rope."

Later, at a dinner I hosted, I said, "Society suffers from a disease called discrimination and you are the doctors who can treat it." When I asked them if they would let me join them in this effort,

they cheered their assent. I am very proud to fight for a world free from stigma and discrimination with these friends.

**"Society suffers from a disease called discrimination and you are the doctors who can treat it."**

Perhaps I am biased, but I can't think of any other disease where persons affected are as active as persons affected by leprosy. People's organizations are working to end discriminatory laws and restrictive social practices, to improve living standards, and educate the public that leprosy is a curable disease with treatment available free of charge. It is because they have the perspective of those who have actually experienced the disease that they are motivated to continue unceasingly to work for a resolution of the problems surrounding leprosy. I think the whole world needs to listen to their voices. ■

## COMOROS TAKES THE INITIATIVE

This month the Union of Comoros launched a nationwide new case detection campaign. I was not able to attend the launch ceremony on October 15 but I would like to share the details here.

The ceremony took place on the island of Anjouan in the presence of President Azali Assoumani, Health Minister Loub Yacout Zaidou and other high-ranking officials including the governors of the three islands that make up the union, which is located in the Indian Ocean between Mozambique and the northern



High-level backing: dignitaries at the launch ceremony of the new-case detection campaign

tip of Madagascar. Representatives of the WHO and partner organizations were also there, as well as health workers who are involved in the campaign. Altogether, some 1,500 people participated.

This is the first time that a new case detection campaign has been conducted on an island-wide basis on the islands of Anjouan and Mohelie, where almost all cases of leprosy are found.

I visited the Comoros islands for the first time in July 2018 and saw for myself just how challenging the situation is. One statistic in particular stays with me: the country had the highest percentage of child cases in the world, accounting for nearly 40% of new cases. I am very pleased, therefore, that the government has launched this initiative, which is being underwritten by the WHO with funding from The Nippon Foundation.

The campaign is set to run for three months. To ensure that this is not a one-off initiative, there was agreement among the health ministry, WHO, the Damien



Comoros: the small-island state aims to eliminate leprosy by 2025, according to President Assoumani.

Foundation and Sasakawa Health Foundation to discuss what follow-up activities should take place, with detailed discussions set for a later date.

I was particularly encouraged to learn that at the ceremony President Assoumani reiterated the pledge he made to me in 2018 that Comoros will eliminate leprosy by 2025. I hope the campaign will be a success and that the Comoros will become a model for other small-island states in their fight against leprosy.

# GPZL Launches Zero Leprosy Toolkit

Field-tested best practices are organized in five thematic areas and available online.

The Global Partnership for Zero Leprosy (GPZL) recently released the Zero Leprosy Toolkit. This toolkit is a set of field-tested best practices designed to support countries in their work toward ending leprosy and its associated disabilities and stigma.

The tools were written and compiled by members of the partnership's Operational Excellence Working Group. This diverse group of 200 people is made up of national leprosy program managers and international leaders in leprosy control and prevention.

Over the past year, members of the group recorded best practices undertaken by leprosy organizations and programs around the world, developed an inventory of previously recorded best practices, and organized these tools into a free online toolkit for countries.

All the tools in the Zero Leprosy Toolkit have been tested and were selected because of the valuable contribution they have made to countries. They are practice-based and offer a unique contribution to leprosy literature.

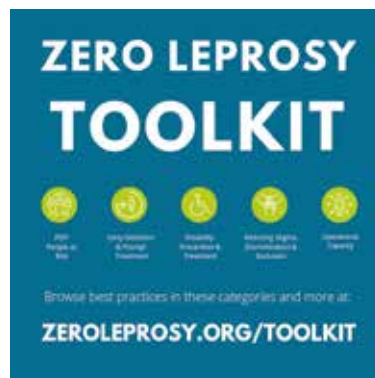
One of the members of the Operational Excellence Working Group that contributed a best practice to the toolkit told GPZL that she had previously published scientific research on leprosy,

but did not have a place to release her programmatic findings to a wide audience before contributing to the toolkit. The toolkit provides a valuable platform for sharing practical information that will help others working in leprosy improve their programs and reach key targets.

The Zero Leprosy Toolkit contains a variety of best practices. You can learn how a district in Bangladesh united over 100 self-help groups of

persons affected by leprosy, and helped strengthen their advocacy work. Another example is an initiative in Nepal where healthcare staff received training in documenting and sharing what they learn on the job. Several best practices describe how to implement post-exposure prophylaxis (PEP), including quality screening of contacts and how healthcare staff can offer quality counseling.

The tools are organized in five thematic areas: PEP/people at risk; early detection and prompt treatment; disability prevention and treatment; reducing stigma, discrimination and exclusion; and operational capacity. The toolkit can be searched by audience and by sub-theme and new tools will be added on an ongoing basis. Access the toolkit at [zeroleprosy.org/toolkit](http://zeroleprosy.org/toolkit). (Andie Tucker, GPZL) ■



## FROM THE EDITOR

### BREAKING TRANSMISSION

Breaking transmission of leprosy will be key to achieving a further decline in case numbers. For that we require new diagnostic tools to allow earlier diagnosis, interventions such as chemoprophylaxis, and eventually, perhaps, an affordable and easy-to-administer vaccine.

Ensuring that health services are able to reach everyone at risk of developing the disease is also essential. As budgets are squeezed and priorities shift, programs may need to rely more on committed organizations of persons affected by leprosy to assist them in their work.

In the meantime, with or without innovative new tools, one of the barriers to early diagnosis is the stigma that still attaches to leprosy. This

makes it difficult for people to come forward for treatment and means they may be transmitting the disease to others when they could already have started multidrug therapy.

Discriminatory attitudes exist in the general community, but can also be found among health workers. How to bring about change? As a contributor to this issue suggests, we need to work with people when they are young so they grow up free of prejudice. Just as childhood inoculations prevent disease, so teaching children early about leprosy and human rights can stop them growing up with stigmatizing attitudes.

If we want to break transmission of leprosy, then we need to break transmission of stigma too.

### FOR THE ELIMINATION OF LEPROSY

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