ILEP COUNTRY STRATEGY – A Guide for Development

1. PURPOSE

To be effective, ILEP as a Federation of organisations with a common vision of a leprosy-free world requires:

- Effective ways of ensuring collaboration internationally and within countries,
- Clear mechanisms to align core activities at country level with global efforts,
- Commitment to core indicators that will meaningfully track our progress in this effort

The ILEP country strategy is a tool to help guide the above. It provides a framework to help identify and develop appropriate, locally agreed plans, which will ensure that we can optimally contribute towards national strategies, and ultimately the ILEP international strategy and the WHO global strategy.

This document is a guide to facilitate the development of an ILEP country strategy. The final document should be shared with the National Plan and ILEP international. It should be reviewed each year.
## 2. ENSURING OPTIMAL COLLABORATION

**What steps can we take to ensure optimal collaboration and coordination at country level?**

In Sri Lanka the only ILEP Partner is FAIRMED. Therefore this document was developed with the support of the other NGOs (Alliance Development Trust, Kaveri Kalam Mandiram, SUROL) working towards the same goal in the country.

<table>
<thead>
<tr>
<th>ILEP Coordination Goal</th>
<th>What is currently being done to facilitate this?</th>
<th>What actions can ILEP members take to facilitate this?</th>
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</thead>
</table>
| Coordination among ILEP Members/ Other NGOs | • By creating a Dialogue with other NGOs  
• Sharing of strategies and joint programming  
• Meetings with partners | • Regular meetings at least quarterly  
• Sharing of information for better collaboration  
• Using a common reporting format for achieving common goals  
• Training and sharing of resources  
• Obtaining regular feedback for improvement  
• Advocacy among the Religious Leaders |
| Coordination with government | • All organizations are working independently with the Ministry of Health  
• Coordination/ partnership with the universities and the ministry of health | • Coordinating with the district health authorities for prevention and control of leprosy |
| Coordination with organisations of people affected | • In the process of building partnerships with people affected |  |
| Coordination with disabled persons organisations and other stakeholders | • Ad hoc programmes are being conducted | • To be a member of the disability group  
• Try to link with the network |
3. ALIGNING CORE ACTIVITIES

How can we focus our collaborative activities in country to achieve our common goals?

<table>
<thead>
<tr>
<th>WHO Pillar</th>
<th>ILEP Strategy</th>
<th>What is currently being done to facilitate this?</th>
<th>What actions can ILEP members take to facilitate this?</th>
</tr>
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</table>
| 1. Strengthen government ownership, coordination and partnership | Stopping the transmission of leprosy: Zero Transmission                        | • Establish a system to identify lost to follow-up tracing system  
|                                                 | Preventing disability due to leprosy: Zero Disabilities                        | • Partnerships with CBOs developed  
|                                                 | Promoting inclusion of people affected by leprosy: Zero Discrimination         | • Strengthening the national programme  
|                                                 |                                                                                | • Partnerships with Universities and the Ministry of health to support research  
|                                                 |                                                                                | • Support the Social Marketing Campaign  
|                                                 |                                                                                | • To take an active role in coordinating the activities              |
### 2. Stop leprosy and its complications

**Stopping the transmission of leprosy: Zero Transmission**

**Preventing disability due to leprosy: Zero Disabilities**

- Awareness, knowledge and skills of Health staff on early detection, standardised screening methods
- Educational sessions for key community persons
- Active case detection by house to house surveys, screening of persons in schools, mobile clinics, work places etc
- Contact tracing for leprosy post-exposure prophylaxis
- Appropriate services provided for persons affected by disability
- Awareness through Inter-faith groups linking with the district health system
- Developing IEC materials for children
- Support Rehabilitation activities via supporting livelihood, self employment, dependent’s education etc
- Work together with the other NGOs to achieve the tasks

### 3. Stop discrimination and promote inclusion

**Preventing disability due to leprosy: Zero Disabilities**

**Promoting inclusion of people affected by leprosy: Zero Discrimination**

- Resource group of persons affected formed
- Collaboration with other organizations working towards the same goal
- Research on leprosy related stigma
- Stigma for leprosy addressed
- Support in livelihood programmes and education
- Volunteers groups with religious leaders
- Inter-sectoral coordination with all relevant persons
4. ENHANCING CORE INDICATORS AND TRACKING PROGRESS

How can we improve data collection on core indicators?

<table>
<thead>
<tr>
<th>WHO and ILEP Target Indicator</th>
<th>Corresponding indicator in your National Leprosy Strategy</th>
<th>What data/information can ILEP members in your country collect to support this indicator?</th>
<th>What actions can ILEP members take to ensure optimal data for this indicator?</th>
<th>What actions can ILEP members take to ensure progress on this indicator?</th>
</tr>
</thead>
</table>
| 1. Number of children diagnosed with leprosy and visible deformities (G2D) | Proportion of new cases among child cases | • Record all cases accurately in the areas that members are working  
• Investigation of all child cases by the Leprosy PHI | • Reporting on child cases in a regular basis via project officers | • Follow up of all child cases in the project areas to ensure completion of treatment  
• Strengthen active case detection by Screening programmes conducted in schools, pre schools etc |
| 2. Rate of newly diagnosed leprosy patients with visible deformities (G2D) | - Percentage of new G2D cases  
- Deformity percentage at the time of diagnosis | • Recording of all cases  
• Identifying the type of deformities  
• Identify if any support is needed for rehabilitation | • Reporting and notifying the support needed to improve the quality of life  
• Support for livelihood activities | • Regular follow up of these patients  
• Provide necessary supportive accessories such as shoes, splints etc |
| 3. Legislation allowing discrimination on basis of leprosy | The currently prevailing ordinance repealed | • Support to draft the cabinet papers to repeal the ordinance | • Follow up on the process and support where ever necessary | • Advocacy for decision makers to support the cause and to expedite the process |

Country Coordinator – Dr. Nayani Suriyarachchi

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