

# GSA Advisory Board Summary

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## Summary

The Advisory Board met virtually with the GSA Executive on the 1<sup>st</sup> of March to review the GSA 2020 Annual Report and Operational Strategy for 2021. Following an overview presentation from the GSA Executive, the Advisory Board congratulated the GSA on a successful year, undertaken during the difficult times caused by the ongoing COVID-19 pandemic. The Board was impressed by the overall activity of the Alliance including the growth of new groups focusing on malacology, engineering and genital schistosomiasis. They highlighted the rapid development and current key strengths on communication and digital engagement, the coordinated information sharing on the impact of the pandemic, the strengthened relationship and support of the WHO as the global policy leader, the growing elimination focus across the community and its development into a concrete movement. The increased engagement in 2020 with in-country programmes and the participation of experts from endemic areas in GSA activities together with the new Ambassador programme were met with approval.

The Advisory Board raised the following points:

### COVID-19

- The impact of COVID-19 needs to be monitored, particularly impact on the ground in meeting deliverables and targets. Expectations and goals may need to be reviewed and redefined to ensure they are realistic and feasible as COVID-19 variants develop and the public health priority landscape changes.
- There are strategic opportunities for NTD partnerships and networks to create fresh resonance in light of the pandemic, looking at how these can be leveraged, how advocacy can be strengthened for NTD partnerships and programmes.

### Performance & Strategy

- The current deliverables in the strategy are process-based. What about targeting impact and outcome objectives to mobilize schistosomiasis efforts? Maybe this is something that can be considered in the development of the 5-year strategy.
- A 5-year strategy serves a long-term vision and could be useful, it does not necessarily support operational strategies and actions because these can change. A tighter operational strategy can focus on 1–3-year timescale.
- The new WHO Road map has long-term targets, what provisions are there for interim reporting and benchmarking? Can the GSA contribute to data reporting and advocacy?
- What does the funding future look like for the GSA?
- The formation of the Ambassadors programme is very welcome and a key recommendation is to maximise leverage of this this year.

### Research

- How will the urban schistosomiasis focus continue now that the Urban SCH work stream has been discontinued? It may be appropriate to review this.
- Progress of the paediatric PZQ formulation needs to be communicated to the community.



- Research data are needed on the impact of SCH infection and nutrition, prioritization of research on the impact of schistosomiasis would be good.
- The malacology focused work stream could work on developing a short brief on the opportunities and barriers in malacological interventions for non-expert, public health practitioners.
- There are several gaps which need to be promoted and advocated for by disease specific networks, such as GSA, from operational realities on the ground, the impact of the changing COVID-19 situation, realistic quantitatively measures for monitoring and evaluation.

#### Elimination Focus

- For the elimination target to be achieved there needs to be changes in the programmatic decisions at country level. Concept needs to switch to elimination. Can the community work on a document that will guide programmes on switching from control to elimination mindset? This can include mapping to identify those eligible for treatment, guidance on how to reach all who are eligible for treatment, proof of concept etc.
- Historically high-level objectives have been focused on the treatment of school-aged children, in an elimination framework, other objectives are needed for realising an elimination agenda.