

## **Call for Expressions of Interest and Proposal**

#VN030 – APW - leprosy screening using an integrated approach

### **1. Background:**

Leprosy, or Hansen's Disease, is an infectious disease caused by *Mycobacterium leprae*, that despite curative therapy is still a lasting health problem in many areas, including in Viet Nam. If symptoms of leprosy are not recognized, a delay in diagnosis can result in severe disability. In Viet Nam, Leprosy used to be considered one of four incurable diseases and has historically been associated with heavy social stigma and discrimination by the community. In 1982 the National leprosy control program (NLCP) was established, with Multi-Drug Therapy (MDT) implemented one year later (in 1983) which led to a remarkable improvement in the epidemiology situation of the disease. As a result, Viet Nam achieved the elimination target at the national level in 1995 with a prevalence rate of 0.7 per 10,000 population. Viet Nam achieved the elimination target at the provincial level in 2000. In the period 2016-2020, the prevalence of leprosy in the community decreased from 0.02 per 10,000 population to 0.01 per 10,000 population.

Although Viet Nam set up the goal of eliminating leprosy in 1995 and sub-elimination was achieved in all provinces since 2000, leprosy is still a major public health problem. In recent years, it is estimated that about 100 to 200 new cases are detected every year in Viet Nam. The rate of disability type 2 (visible lesions) including complications of Erythema Nodosum Leprosum, sudden eruption of multiple painful nodules, finger loss, or severely impaired vision is present among 20% of new cases. New cases were detected through voluntary reporting, mass surveys, and contact examinations. Whereas leprosy became a neglected disease over the past decades, consequently, the leprosy program has no longer received financial support from the central government. The aim to eliminate leprosy at the national level and disability due to leprosy by 2030 is facing a risk of not being achieved.

The majority of leprosy incidence is concentrated in high-risk areas with unfavourable conditions for health service accessibility, low level of awareness among health workers and broader population, and limited capacity in the health system to detect leprosy. To sustain the momentum toward the end of leprosy transmission, focusing on addressing leprosy in these areas requires a multi-disciplinary approach that addresses the various barriers to treatment and control of the disease. The purpose of this APW is to provide comprehensive support to strengthen the locality's capacity for leprosy screening, detection, treatment, and management. This includes increased capacity for local health workers, and technical support to screening, early diagnosis, and treatment of new leprosy cases in combination with raising awareness in the population.

The leprosy rate is the highest among people who are ethnic groups living in the northern mountains or west highland in which, local people have limited access to normal health care services, such as screening of hypertension, TB or dermatology diseases. Result of screening from previous years indicated among people screening for leprosy, 30% have TB symptoms, 17,7% have hypertension; and common skin disease (prurigo and eczematous dermatitis) accounts for 31% of screened people. To provide more patient-centered care to address these conditions, it is proposed to conduct an integrated screening model of 3 these diseases for those people who are living in areas most vulnerable to leprosy.

As leprosy has become a neglected disease and resources from the central government and non-governmental organizations are limited, it is crucial to ensure that the aforementioned activities can be sustained and managed by local health authorities.

## **2. DESCRIPTION OF ACTIVITIES TO BE CARRIED OUT**

### **Method(s) to carry out the activity**

The activity under the APW is to be implemented by the APW holder in collaboration with local health care workers who oversee leprosy in the identified provinces. The timeframe of the activity is from 15 Aug to 31 Dec 2024. The detail of key activities includes:

- Activity 1: Train physicians in screening, diagnosing, treating, and managing leprosy and common dermatological diseases, support the treatment and management of patients with leprosy and related dermatological conditions. The impact of the training will be assessed through conducting a KAP survey of trainees before training and six months after the training to measure changes in knowledge and practice on screening these diseases in their routine work. In addition, a quarterly individual report of trainee on his/her routine work on screening and detection of these diseases will be submitted to NHDV to monitor progress of the trainees after the training.
- Activity 2: Practical demonstration for active case finding for leprosy using integrated approach with other diseases (such as common dermatological diseases, tuberculosis, and hypertension)
- Activity 3: Conduct discussion with local authorities regarding provincial roadmap for achieving the goal of zero leprosy.
- Activity 4: Analyse the gathered information and finalize report on screening, diagnosing, treating, and managing patients and other relevant services, and training impact.

### **Training materials**

- The training uses updated training materials, including presentations on detection, symptoms, and primary treatment for three diseases: Leprosy, hypertension, Dermatology and TB; and guidance on screening of these diseases at the community level. These documents have been already developed and applied from previous screening activities that already received support from WHO and will be updated through this work. The training materials are to be used by trainees, the software is shared among trainees through social network (Zalo), as well as uploaded on the website

of the NHDV so that trainees and other health care workers can easily access them at no additional cost.

### Output/s

- The capacity of local healthcare workers is strengthened through hands-on training in screening, detecting, diagnosing, and managing leprosy and common dermatological diseases.
- Leprosy patients with early symptoms are diagnosed and treated promptly, preventing disability.
- Patients suspected of having other health issues, such as tuberculosis and hypertension, are referred for diagnosis.
- Awareness within the local government regarding the roadmap for achieving zero leprosy is increased.

### Deliverables:

- Updated training materials for local health workers on screening, diagnosing, and managing leprosy and other diseases, including pre-training and post-training assessments
- Report on screening data and analyses for leprosy, common dermatological diseases, tuberculosis, and hypertension in the selected provinces; .

Assessment of local capacity to support and sustain a roadmap for achieving zero leprosy using local resources

### 3. Planned timelines (subject to confirmation and approval process)

Start date: 15 Sep 2024

End date: 31 Dec 2024

### 4. Technical Supervision

The selected APW holder will work under the supervision of:

|                      |  |        |              |
|----------------------|--|--------|--------------|
| Responsible Officer: | Vu Quang Hieu, Technical Officer, DC-HE Team | Email: | vuh@who.int  |
| Manager:             | Dr. Annie Chu, UHC-DC team Coordinator       | Email: | chua@who.int |

### 5. Specific Requirements

- **Team Leader's requirements:** holds a PhD degree and/or a post graduate qualification in dermatology diseases; has at least 10 years working experiences in clinical management, diagnosis, and treatment for dermatology diseases including leprosy; has been involved in the development of national guidelines on leprosy, has directly been involved in and provided technical support for development of training materials and conducting training courses on dermatology diseases and leprosy.

Preference is given to expert(s) who have experience participating in the WHO supported activity.

- **Team members' requirements:**

- **Teachers/ facilitators:** have post graduate qualifications in dermatology diseases; have at least 5 years' experience in clinical management of dermatology diseases and leprosy
- **Assistant teachers/ facilitators:** hold a medical degree qualification; have at least 3 years' experience in clinical management of dermatology diseases and leprosy; familiar with conducting training workshops and experienced in logistic arrangement

**6. Place of assignment:** in Hanoi

The APW holder will work at their own base on the update of training documents and communication material

**7. Cost**

All bids will be evaluated based on the submitted proposals with detailed budget breakdown in term of the technical requirements, timeliness, and value for money.

**8. Travel**

It's required to travel to some provinces which are identified by the APW holder.

Please take note of the following when submitting application/proposal:

The contractor will be responsible for paying taxes, if any.

Those who are interested can contact our focal person with contact detail at the end of the announcement before 23<sup>th</sup> Aug 2024

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