

COMMUNITY ENGAGEMENT AND MULTI-SECTORAL COLLABORATION AS DRIVERS FOR NEGLECTED TROPICAL DISEASE (NTDs) ELIMINATION

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ABSTRACT

Neglected tropical diseases (NTDs) continue to impose a major public health and socioeconomic burden, with substantial morbidity and loss of productivity, especially among marginalized communities in low- and middle-income countries. These diseases, caused by a diverse group of parasitic, bacterial, fungal, and viral pathogens, can further perpetuate cycles of poverty and inequality. Despite notable progress in control efforts, NTDs persist due to their historically low prioritization, limited community involvement, fragmented interventions, and insufficient cross-sector collaboration. Achieving elimination will require strategies that extend beyond biomedical tools to inclusive, community-led, and multi-sectoral actions. This paper explores how community engagement and collaboration across health, education, water and sanitation, agriculture, and social sectors can drive sustainable NTD elimination. It underscores the importance of empowered communities, integrated policies, strategic resource mobilization, and cross-cutting partnerships in reducing stigma, promoting equity, and advancing progress toward the 2030 Sustainable Development Goals (SDGs).

Keywords: Strategic resource mobilization; Cross-cutting partnerships; Stigma; Equity; Sustainable Development Goals

1.0 INTRODUCTION

Neglected tropical diseases (NTDs) affect over 1.6 billion people worldwide, disproportionately impacting vulnerable populations and trapping them in cycles of ill health, disability, and poverty (Hotez *et al.*, 2020). These diseases not only undermine health but also impact agriculture, education, and productivity, thereby

slowing socioeconomic development (WHO, 2021). Historically, these diseases have been overshadowed by high-profile conditions such as HIV/AIDS, malaria, and tuberculosis, resulting in chronic under-investment in their prevention and control. Although biomedical interventions—particularly mass drug administration (MDA)—have led to measurable progress, they remain insufficient when deployed in isolation.

Achieving sustainable elimination requires robust community engagement and multisectoral collaboration that integrates health strategies with initiatives in education, water and sanitation, nutrition, and social development (Molyneux *et al.*, 2016). These diseases are often preventable and treatable, yet they remain neglected due to limited funding, low visibility, and systemic inequities. NTDs flourish mainly in rural areas, in conflict zones and hard-to-reach regions and are ‘neglected’ because they are almost ignored by global funding agencies. The NTDs such as *schistosomiasis*, *onchocerciasis* (river blindness), lymphatic filariasis, trachoma, leishmaniasis, Chagas disease, Buruli ulcer, soil-transmitted helminthiasis, and human African trypanosomiasis (sleeping sickness) to name a few continue to afflict vulnerable populations, particularly in tropical regions where poverty, inadequate sanitation, and limited access to healthcare perpetuate their transmission and impact (WHO, 2025)

Community Engagement in NTD Control

Neglected Tropical Diseases (NTDs) continue to disproportionately affect impoverished populations, resulting in significant morbidity, disability, and entrenched social stigma. According to the World Health Organization (WHO), over 1.7 billion people globally are affected by at least one NTD, with the highest burden concentrated in sub-Saharan Africa, Asia, and Latin America. These diseases thrive in conditions of poverty, poor sanitation, and limited access to healthcare—making community engagement a pivotal strategy in their prevention, control, and eventual elimination (Campbell *et al.*, 2018). NTD programs are most effective when communities assume ownership of interventions. Active participation fosters trust, reduces stigma, and promotes sustained adoption of health-enhancing behaviors. Community engagement transforms beneficiaries into co-creators of solutions, ensuring that interventions are contextually relevant and socially acceptable using the following key components (Parker, M., & Allen, T., 2019).

Key Components of Community Engagement

Community Health Workers (CHWs): As trusted frontline actors, CHWs serve as vital links between formal health systems and households. They mobilize communities for mass drug administration (MDA), disseminate health information, and reinforce preventive practices such as hygiene and vector control. **Behavioral Change and Social Mobilization:** Locally tailored education campaigns promote hand washing, sanitation, and the use of protective measures like bed nets and footwear. These efforts help shift cultural norms and embed health-promoting behaviors into daily life. **Participatory Monitoring and Evaluation:** Involving community members in mapping disease prevalence, identifying cases, and providing feedback enhances accountability, responsiveness, and transparency. It also strengthens local surveillance systems and fosters a sense of shared responsibility.

The Role of Community Engagement in NTD Control Empowerment and Ownership

Community engagement fosters empowerment by involving individuals in the design, implementation, and evaluation of NTD programs. This participatory approach enhances program legitimacy and sustainability. The REDRESS study in Liberia, for example, demonstrated that engaging individuals affected by skin NTDs as peer-researchers and co-researchers led to increased trust in health services and improved health-seeking behaviors (Campbell *et al.*, 2018). Empowered communities are more resilient and proactive in addressing health challenges.

Sustainable Drug Distribution: Community Drug Distributors (CDDs) are instrumental in ensuring equitable access to treatment, particularly in hard-to-reach areas. Their local knowledge and relationships enable them to navigate logistic challenges and build trust. However, recent funding cuts—such as the

discontinuation of USAID's NTD program—have jeopardized the continuity of MDA campaigns, placing over 100 million people at risk of disease resurgence (Fitzpatrick *et al.*, 2017). This underscores the need for sustained investment in community-led delivery systems.

Integration into Health Systems

Embedding NTD control within national health systems is critical for long-term success. Community engagement facilitates this integration by building local capacity, aligning interventions with cultural norms, and enhancing service uptake. The WHO's 2021–2030 NTD Road Map emphasizes community-based approaches as essential to achieving the Sustainable Development Goals (SDGs), particularly those related to health equity, education, and poverty reduction (WHO, 2021).

Challenges in Community Engagement

Despite its transformative potential, community engagement faces several persistent challenges as follows: **Stigma and Discrimination:** Individuals affected by NTDs often endure social exclusion, which can deter participation in control programs and delay treatment-seeking (O'Carroll, 2024).

Resource Constraints: Limited financial and infrastructural support can hinder the scale and effectiveness of community-driven initiatives (Tucker, 2024).

Cultural Barriers: Deep-rooted beliefs and traditional practices may conflict with biomedical interventions, necessitating culturally sensitive and adaptive strategies (Nicklas, 2024).

Strategies to Enhance Community Engagement

To overcome these barriers and strengthen community involvement in NTD control, the following strategies are recommended:

Capacity Building: Equip community members with training, tools, and resources to enhance their technical skills and leadership capabilities.

Inclusive Participation: Ensure that all segments of the community—including women, youth, and marginalized groups—are actively involved in decision-making and implementation.

Collaborative Partnerships: Foster multi-level partnerships between governments, NGOs, academic institutions, and communities to leverage resources, share expertise, and coordinate efforts.

Advocacy and Awareness: Launch targeted campaigns to raise awareness about NTDs, dispel myths, and reduce stigma, thereby encouraging broader community participation (Molyneux *et al.*, 2012). Community engagement is not merely a supportive element but the cornerstone of effective NTD control and elimination. Empowering communities fosters ownership, trust, and resilience, enabling interventions to be tailored to local contexts and sustained over time. When integrated into national health systems, community-led approaches enhance cultural relevance, improve service uptake, and strengthen accountability. Inclusive and collaborative strategies—grounded in local knowledge and participation—are essential to overcoming stigma, addressing structural barriers, and promoting equity. Continued investment in community-driven models is critical to achieving the global targets for NTD elimination by 2030 and ensuring that no one is left behind. When communities are fully engaged, NTD programs transcend top-down drug delivery and evolve into holistic, dignity-centered frameworks that confront the broader social and environmental determinants of health (Parker, M., & Allen, T., 2019).

Multi-Sectoral Collaboration in NTD Elimination

NTDs are deeply rooted in poverty, poor living conditions, and systemic inequities—making cross-sectoral collaboration not just beneficial, but essential (WHO, 2021). Their persistence reflects failures not only in

health systems but across education, sanitation, agriculture, and social protection. A whole-of-society approach is required to embed NTD programs within broader development policies rather than treating them as isolated disease campaigns.

Why Multi-Sectoral Collaboration Matters

NTDs flourish in environments where basic services are lacking. Addressing them demands more than biomedical interventions—it requires coordinated action across sectors to tackle the underlying social determinants of health. Multi-sectoral collaboration ensures that NTD interventions are medically effective, socially inclusive, and economically sustainable.

a. Health Sector Integration

The health sector provides the backbone of NTD control through diagnosis, treatment, and surveillance. Integrating NTD services into primary healthcare systems enhances efficiency, reduces fragmentation, and promotes universal health coverage. Joint planning with maternal and child health, immunization, and mental health services can improve reach and sustainability.

b. Education Sector Engagement

Schools serve as strategic platforms for early intervention. School-based deworming programs, hygiene education, and awareness campaigns help combat infections and instill lifelong health-promoting behaviors. Collaboration with ministries of education ensures high coverage and cost-effectiveness, while empowering children as agents of change.

c. Water, Sanitation, and Hygiene (WASH)

Access to clean water and improved sanitation is critical for preventing reinfection, especially for diseases like schistosomiasis and soil-transmitted helminths. Partnerships with WASH stakeholders enable infrastructure development, hygiene promotion, and behavior change campaigns. The WHO's WASH-NTD toolkit offers a practical framework for aligning efforts and measuring impact.

d. Agriculture, Environment, and Nutrition

Agricultural practices and environmental conditions influence exposure to vectors and pathogens. Integrated efforts in vector control, safe farming, and nutrition-sensitive interventions reduce risk and enhance resilience. Malnutrition, which exacerbates vulnerability to NTDs, can be addressed through food security programs and agricultural extension services.

e. Civil Society and Private Sector Engagement

Non-governmental organizations (NGOs), faith-based groups, and corporate actors play vital roles in mobilizing resources, extending program reach, and strengthening advocacy. Their proximity to communities and flexibility in operations make them key partners in delivering culturally appropriate and responsive interventions.

f. Social Protection and Policy Alignment

NTDs disproportionately affect the poorest and most marginalized, reinforcing cycles of exclusion. Social protection programs—such as disability support, conditional cash transfers, and livelihood initiatives—can reduce the economic burden and improve access to care. Policy coherence across ministries ensures that NTDs are prioritized within national development agendas.

Enablers of Effective Collaboration

To operationalize multi-sectoral collaboration, several enabling factors are critical:

Joint Planning and Budgeting: Shared goals, pooled resources, and harmonized timelines foster synergy and reduce duplication.

Integrated Data Systems: Cross-sectoral data sharing enhances targeting, monitoring, and evaluation.

Community-Centered Design: Grounding interventions in local realities ensures relevance and sustainability.

Political Commitment: High-level leadership and policy alignment are essential to sustain momentum and secure long-term investment. It is important to emphasize that multi-sectoral collaboration is not a supplementary strategy—it is an essential pillar for the elimination of NTDs. By harmonizing efforts across health, education, water, sanitation and hygiene (WASH), agriculture, civil society, and social protection, countries can build resilient systems that address the structural and environmental drivers of disease. When this collaborative framework is paired with empowered community engagement, it transforms NTD programs from isolated interventions into inclusive, sustainable, and equity-driven solutions. This integrated approach represents the most promising pathway to achieving the 2030 Sustainable Development Goals and ending the long-standing neglect of these diseases.

Financing and policy support

Neglected Tropical Diseases (NTDs) remain a significant public health challenge, disproportionately affecting impoverished populations in tropical and subtropical regions. Addressing these diseases requires robust financing mechanisms and supportive policies that enable effective control and elimination strategies. Sustainable collaboration requires supportive policies and innovative financing. Domestic funding, inclusion of NTDs in national insurance schemes, and partnerships with development agencies create ownership and long-term stability (Fitzpatrick *et al.*, 2017). Multi-sectoral platforms should also establish accountability frameworks, ensuring transparency and coordinated action.

Financing for NTD Control involved the following:

a. Global Funding Landscape

Over the past decade, significant financial commitments have been made to combat NTDs. The Kigali Declaration, launched in 2022, mobilized over \$1.5 billion in financial commitments and pledged 18 billion donated tablets from pharmaceutical companies to support NTD control efforts. These funds have been instrumental in scaling up mass drug administration programs, enhancing diagnostic capacities, and supporting research and development for new treatments (Parker, M., & Allen, T. (2019)

b. Public-Private Partnerships

Public-private partnerships (PPPs) have played a pivotal role in NTD financing. Organizations such as the Global Network for Neglected Tropical Diseases and the Sabin Vaccine Institute have facilitated collaborations between governments, non-governmental organizations, and the private sector, leading to shared investments in NTD control. These partnerships have not only provided financial resources but also fostered innovation in treatment and diagnostic tools (Piggott, M. L., Zaizay, Z., Dean, L., 2025)

Challenges in Financing: Despite these efforts, financing for NTDs faces several challenges:

Decreased Official Development Assistance (ODA): Recent cuts in ODA have strained NTD programs, limiting their capacity to respond to emerging threats such as climate change-induced vector-borne diseases (Piggott, M. L., Zaizay, Z., Dean, L., 2024)

Sustainability Concerns: Reliance on donor funding poses sustainability risks, particularly when donor priorities shift or funding cycles end (Ross, D. A, 2024)

Resource Allocation: Inadequate allocation of resources to community-based interventions and health system strengthening can undermine the effectiveness of NTD control programs (McPhillips-Tangum, C, 2024)

Policy Support for NTD Control

a. National NTD Master Plans

Countries have developed comprehensive NTD Master Plans to guide their control and elimination efforts. These plans align with the WHO's 2021–2030 NTD Road Map and include strategies for integrated disease management, resource mobilization, and monitoring and evaluation. By providing a structured approach, these plans facilitate coordinated action among stakeholders and ensure that interventions are tailored to national contexts.

b. Policy Integration into Health Systems

Integrating NTD control into broader health system policies is essential for sustainability. This integration ensures that NTD interventions are not isolated but are part of the overall health service delivery, thereby enhancing efficiency and reach.

c. Advocacy and Political Commitment

Political will is crucial for the success of NTD control programs. Advocacy efforts by organizations like the Global Network for Neglected Tropical Diseases have been instrumental in raising awareness and garnering political support for NTD initiatives such advocacy has led to the inclusion of NTDs in national health agendas and the allocation of resources for their control. Robust financing and supportive policies are fundamental to the success of NTD control programs. While significant progress has been made through global commitments and national strategies, challenges remain. Addressing these challenges requires a concerted effort to diversify funding sources, integrate NTD control into broader health policies, and foster collaboration among all stakeholders. By strengthening financing and policy support, we can accelerate progress towards the elimination of NTDs and improve the health and well-being of affected populations.

Benefits of community and multi-sectoral action

Equity: Reaches marginalized groups often missed by vertical programs.

Sustainability: Builds local ownership, reducing dependence on external donors.

Resilience: Strengthens preparedness for other public health threats.

SDGs Alignment: Contributes to health (SDG 3), education (SDG 4), clean water and sanitation (SDG 6), and poverty reduction (SDG 1).

Neglected Tropical Diseases (NTDs) affect over a billion people globally, predominantly in low- and middle-income countries, causing significant morbidity, disability, and social stigma (World Health Organization [WHO], 2024). Addressing these diseases requires more than medical interventions; it demands the active participation of communities and coordinated efforts across multiple sectors, including health, education, water, sanitation, and finance (Adepoju *et al.*, 2021). Community and multi-sectoral action have emerged as essential strategies to ensure sustainable disease control and elimination.

1. Enhanced Coverage and Accessibility of Interventions

Community engagement ensures that NTD programs reach remote and marginalized populations. Local volunteers and community drug distributors facilitate mass drug administration (MDA) campaigns,

improving both coverage and adherence (Sodahlon *et al.*, 2024). Community-led initiatives enable culturally sensitive communication and increase trust, which enhances participation in preventive and treatment programs (Piggott *et al.*, 2025).

2. Increased Ownership and Sustainability

Active involvement of communities fosters a sense of ownership over health initiatives, promoting long-term sustainability (Adepoju *et al.*, 2021). Programs co-designed with local stakeholders are more likely to persist beyond donor-funded cycles because communities understand their roles, responsibilities, and the benefits of NTD interventions (Aagaard-Hansen, 2020).

3. Improved Health Education and Behavior Change

Multi-sectoral collaboration leverages the strengths of various sectors to address social determinants of health. For example, integrating health education with school programs increases knowledge about NTD prevention and encourages protective behaviors among children and families (Parker & Allen, 2019). Collaboration with water, sanitation, and hygiene (WASH) sectors reduces environmental risk factors, complementing medical interventions and breaking the cycle of transmission (WHO, 2020).

4. Efficient Resource Utilization

By pooling resources and expertise across sectors, multi-sectoral action enhances the cost-effectiveness of NTD programs (Adepoju *et al.*, 2021). Joint planning and coordination reduce duplication of efforts, maximize the reach of interventions, and optimize the allocation of financial and human resources. Public-private partnerships also provide additional funding, technical support, and innovations in diagnostics and treatment delivery (WHO, 2020).

5. Strengthened Monitoring, Evaluation, and Accountability

Community engagement improves monitoring and reporting of NTD cases, as local volunteers can track disease patterns and notify health authorities promptly (Sodahlon *et al.*, 2024). Multi-sectoral collaborations foster shared accountability, ensuring that all stakeholders contribute to achieving targets and evaluating program outcomes. This integrated approach supports evidence-based decision-making and policy adjustments to improve effectiveness (Piggott *et al.*, 2025).

6. Social and Economic Benefits

NTD control through community and multi-sectoral action has broader social and economic advantages. Reduced disease burden improves school attendance, labor productivity, and overall quality of life (WHO, 2024). Engaging communities empowers vulnerable populations, reduces stigma, and strengthens social cohesion, contributing to resilient health systems and equitable development (Aagaard-Hansen, 2020).

The benefits of community engagement and multi-sectoral action in NTD control are extensive and interrelated. Enhanced coverage, sustainability, behavior change, efficient resource use, strengthened monitoring, and socio-economic gains collectively reinforce the effectiveness of NTD interventions. Policymakers and program implementers must continue to prioritize integrated approaches that actively involve communities and foster collaboration across sectors to achieve the global goal of NTD elimination by 2030 (WHO, 2020; Sodahlon *et al.*, 2024).

2.0 MATERIALS AND METHODS

This review was based exclusively on published evidence, without the collection of primary data. Sources included peer-reviewed scientific literature, technical reports, policy documents, and publications from the World Health Organization (WHO) that focused on neglected tropical diseases (NTDs) and community-based health system strengthening. The rationale for this approach was to address persistent gaps in understanding how community engagement and collaboration across health, education, water and

sanitation, agriculture, and social sectors can drive sustainable NTD elimination. A comprehensive literature search was conducted across major electronic databases, including PubMed, Scopus, Web of Science, and official WHO websites. Google Scholar was also utilized to retrieve relevant grey literature. To ensure the inclusion of authoritative perspectives and contemporary strategic frameworks, reports and policy briefs from global institutions such as UNICEF and the World Bank were examined. The review was restricted to materials published between 2020 and 2025, providing a balance between historical context and current relevance.

Inclusion and Exclusion Criteria

Publications were included if they addressed NTDs in conjunction with at least one of the WHO health system building blocks—financing, service delivery, multi-sectoral collaboration, or community engagement. Excluded were articles focused solely on biomedical, parasitological, or clinical aspects of NTDs without consideration of health system dynamics, as well as commentaries or opinion pieces lacking substantial empirical evidence.

Analytical Approach

A thematic review methodology was applied to the selected literature. Findings were organized according to the WHO health system building blocks, with particular emphasis on community engagement and multi-sectoral collaboration. This approach enabled the identification of recurring patterns, extraction of shared insights, and assessment of prevailing strategies and implementation gaps. The review facilitated the derivation of cross-cutting conclusions regarding the role of community-driven and multi-sectoral approaches in promoting sustainable NTD elimination, while underscoring the importance of integrated health systems and inclusive development frameworks.

3.0 RESULT AND DISCUSSION

The literature consistently underscores the transformation impact of community engagement in NTD control. Studies from Liberia, Nigeria, and Ethiopia reveal that when communities are actively involved—as peer educators, drug distributors, or co-researchers—interventions are more trusted, better adopted, and sustained over time (Campbell *et al.*, 2018; Molyneux *et al.*, 2016). Community Health Workers (CHWs) and Community Drug Distributors (CDDs) serve as vital bridges between formal health systems and underserved populations, especially in remote areas. Participatory monitoring, stigma reduction, and culturally tailored education campaigns have proven effective in promoting behavioral change and improving health outcomes. Therefore, the elimination of neglected tropical diseases (NTDs) cannot rely solely on vertical, disease-specific interventions. While approaches such as mass drug administration (MDA) achieve short-term reductions in prevalence, their long-term impact is limited by weak health systems, inadequate domestic financing, and insufficient community participation (Molyneux *et al.*, 2012). Sustainable NTD control therefore requires a shift towards strengthening health systems to enable equitable, efficient, and durable health interventions.

Integrating NTD strategies into national health frameworks and primary health care (PHC) enhances efficiency, cost-effectiveness, and equity by reaching the most vulnerable populations (Linehan *et al.*, 2011). Such integration promotes positive programmatic synergies, reduces duplication, and improves service delivery—critical advantages in low-resource settings where fragmented interventions are often unsustainable. Governance, political will and commitment are pivotal determinants of success. Countries demonstrating strong leadership on NTDs are more likely to allocate domestic resources, attract donor support, and foster multi-sectoral partnerships (WHO, 2021). Conversely, weak governance and excessive reliance on external funding compromise program sustainability. Transparent systems with accountable structures, country ownership, and local control are therefore essential for maintaining progress in NTD elimination.

Economic considerations further strengthen the case for integrated action. NTDs impose substantial economic burdens through reduced productivity, lower educational attainment, and heightened

poverty (Fitzpatrick *et al.*, 2017). Addressing NTDs is thus both a public health and development imperative, particularly in countries such as Nigeria, where marginalized populations bear the heaviest burden. Institutional resistance to integration, arising from competing priorities or skepticism about resource allocation, can be mitigated through targeted strategies. Multi-sectoral engagement—such as results-based financing, digital health innovations for surveillance, and community mobilization—can reinforce ownership, sustainability, and effectiveness of interventions.

Finally, global commitments to the Sustainable Development Goals (SDGs) provide a strategic opportunity to embed NTD elimination within broader development frameworks. Achieving SDG Target 3.3, which aims to end the NTD epidemic by 2030, requires investment in resilient, equitable, and people-centered health systems. Evidence suggests that progress in NTD control can generate co-benefits across the health system, including epidemic preparedness, maternal and child health, and water, sanitation, and hygiene (WASH) initiatives. Community engagement and cross-sector collaboration thus emerge as critical drivers for sustainable NTD elimination.

4.0 CONCLUSION

Eliminating NTDs is not achievable through biomedical interventions alone. Meaningful community engagement and strong multisectoral collaboration are essential to breaking cycles of disease and poverty. By fostering community ownership, mobilizing cross-sector resources, and embedding NTD control within development policies, countries can accelerate progress toward elimination, equity, and sustainable development.

Recommendations

To strengthen Community engagement and multisectoral collaboration for NTD control:

Diversify Funding Sources: Explore innovative financing mechanisms, such as social impact bonds and blended financing models, to reduce dependence on traditional donor funding.

Enhance Domestic Resource Mobilization: Encourage governments to allocate a higher percentage of their health budgets to NTD control and to leverage private sector investments.

Strengthen Policy Frameworks: Develop and implement policies that integrate NTD control into broader health system reforms, ensuring that NTD interventions are sustainable and effective.

Foster Multisectoral Collaboration: Promote collaboration between health, education, water, sanitation, and agriculture sectors to address the multifaceted determinants of NTDs.

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