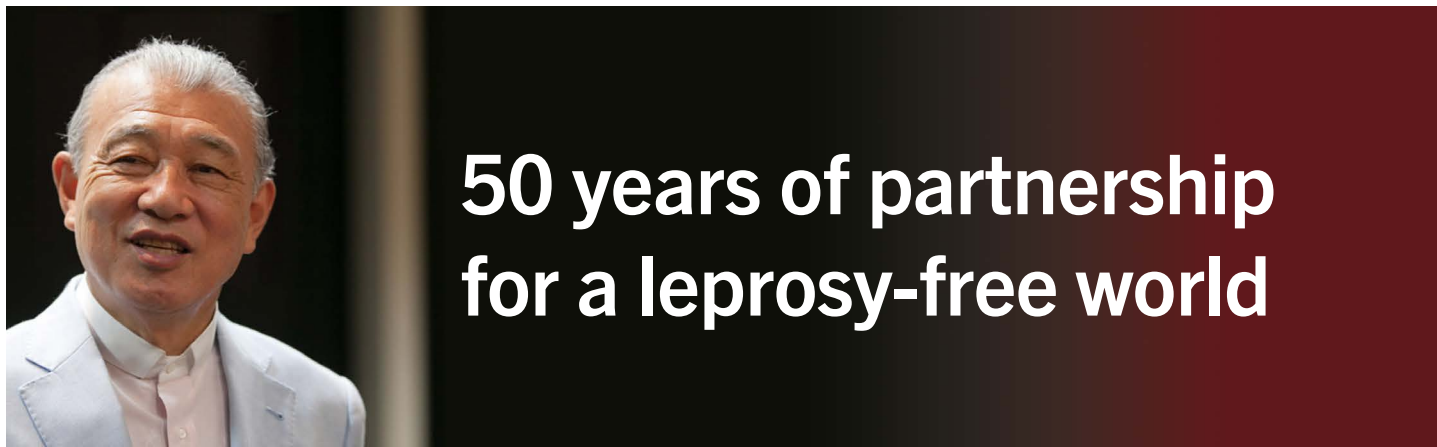


LEPROSY BULLETIN

NO. 126 APRIL 2025



Message from the ambassador

This year marks the 50th anniversary of cooperation between the World Health Organization (WHO) and The Nippon Foundation/Sasakawa Health Foundation (TNF/SHF). During this period, TNF/SHF has contributed more than 200 million US dollars, a modest amount in comparison to the contributions of member states and other organizations. More than the amount of support, it is the continuity of cooperation between our organizations that has facilitated progress toward a leprosy-free world.

For example, for five years, 1995–1999, TNF's contribution of 50 million US dollars enabled the distribution of multidrug therapy (MDT) free of charge. As a result, more than 10 million patients received treatment, and the goal of eliminating leprosy as a public health problem at the global level by 2000 was reached. TNF then provided additional support as part of WHO's "final push" strategy to assist the 12 countries that had yet to achieve elimination at the national level. With the exception of Brazil, all were successful.

In the 2000s, my efforts to address leprosy as a human rights issue led to the adoption of a resolution along with a set of principles and guidelines by 192 member states at the United Nations General Assembly in 2010. Elimination of discrimination against persons affected by leprosy and their family members has since had a place in WHO's regularly updated Global Leprosy Strategy.

Despite significant progress, leprosy remains a problem. To achieve zero leprosy, our organizations must work together even more closely. Amid the unprecedented funding challenges facing WHO and other international organizations, I am convinced that the WHO–TNF/SHF partnership can serve as a model for the future.

Yohei Sasakawa

WHO Goodwill Ambassador for Leprosy Elimination

Contributing to this issue:

Dr. Tedros Adhanom Ghebreyesus
Director-General, World Health Organization

Papa Mamadou Diagne
President, ASCL/MTN (Senegal)

Dr. Fezile Mkhize
Mister Supranational 2024

LEPROSY IS CURABLE. MEDICATION IS FREE. STOP DISCRIMINATION NOW.

WHO Director-General reflects on 50 years of partnership with TNF/SHF

The following interview with Dr. Tedros Adhanom Ghebreyesus, Director-General of the World Health Organization, was conducted by email in April 2025.

Leprosy Bulletin (LB): From the perspective of the World Health Organization (WHO), what is the value that each side brings to this partnership?

Dr. Tedros: WHO has brought to this partnership its technical expertise and global coordination capacities, connecting countries and stakeholders around this common goal. During the same period, The Nippon Foundation/Sasakawa Health Foundation (TNF/SHF) has demonstrated its steadfast commitment to leprosy elimination through high-level advocacy and funding support.

The partnership combines policy influence with dedicated resources, creating a unique synergy in the fight against leprosy. It has contributed to reducing the global leprosy burden and continues to pioneer innovative approaches to address the last mile challenges in leprosy elimination.

LB: How would you describe the significance of the partnership's duration?

Dr. Tedros: The 50-year duration of this partnership is extraordinary in global health and serves as a model for other collaborations. The partnership not only demonstrates the commitment of both organizations but also the complex nature of eliminating leprosy, which requires persistent, multi-generational effort. Leprosy is an ancient disease with medical and social ramifications. Few health-focused collaborations have sustained such longevity while maintaining their original mission. This enduring partnership has enabled sustainability in our efforts to eliminate leprosy despite evolving global health priorities.

LB: What has changed about the fight against leprosy as a result of the partnership?

Dr. Tedros: The main changes in the fight against leprosy that our partnership has contributed to are the reduction in the burden of leprosy and its impact on people affected by the disease. We have moved from an era when leprosy was widely prevalent with limited treatment options to one where elimination of the disease as a public health problem globally was achieved by 2000. This was largely possible due to the support of TNF/SHF, which enabled WHO to introduce multidrug therapy (MDT) globally and scale up its access from 1995 to 1999.

This major success eventually generated a second change: the move towards interruption of transmission and elimination

of leprosy. This policy was adopted in 2023 in alignment with the WHO NTD road map 2021–2030.

A third change has been how the partnership has helped broaden the focus of action against leprosy beyond medical interventions. Now, we address key social aspects such as stigma and discrimination, for example, thanks to the establishment of the position of a UN Special Rapporteur focusing on the human rights of persons affected by leprosy and their family members. Our partnership has driven this comprehensive approach, which is embodied in our Global Leprosy Strategy 2021–2030 and its call for zero disease, disability, and discrimination.

LB: The fact that the partnership is ongoing despite over 50 years of efforts reflects the difficulty of eradicating leprosy. What are some of the remaining challenges?

Dr. Tedros: Despite progress, we face significant challenges. Transmission of leprosy continues in endemic hotspots with new cases detected among children, which indicates ongoing community spread. The disease disproportionately affects marginalized populations with limited healthcare access. Longstanding stigma remains deeply entrenched in many societies, hindering health-seeking behaviour, early diagnosis, and treatment. Maintaining political commitment and resources becomes increasingly difficult as the number of cases declines, leading to reduced surveillance and expertise.

LB: How might these challenges be overcome?

Dr. Tedros: Overcoming these challenges requires a multi-faceted approach.

It is important that we strengthen integrated active case-finding strategies in high-burden areas while maintaining passive surveillance capabilities in low-endemic regions. The geographic concentration of cases in specific regions requires tailored approaches rather than one-size-fits-all solutions.

Integrating leprosy services into general healthcare systems ensures sustainability while developing innovative diagnostic tools will help identify cases earlier. We need enhanced community engagement and increased coordination, particularly involving persons affected by leprosy. Education campaigns must continue to address stigma through sharing accurate information. Cross-sector collaboration among health, social welfare, and education sectors can address the broader determinants affecting leprosy.

And critically, political commitment and increased domestic and donor funding are crucial to our last mile efforts in the fight against leprosy.

LB: Please add anything that you would like to say about Yohei Sasakawa’s role as WHO Goodwill Ambassador for Leprosy Elimination and its place in the partnership.

Dr. Tedros: Mr. Sasakawa’s role as WHO Goodwill Ambassador for Leprosy Elimination has been transformative. He has added the much needed human and social dimension to the medical side of the disease. His personal engagement with affected communities around the world has enabled local solutions to the challenges. Mr. Sasakawa has advocated for meaningful participation of people affected by leprosy and for a greater focus on socio-economic aspects. His high-level advocacy with political leaders has kept leprosy on the global health agenda when it might otherwise have been overlooked. The Global Appeal initiatives he has championed have engaged diverse stakeholders from religious leaders to corporate executives in addressing stigma. And his simultaneous role as chairman of TNF has provided a unique bridge between TNF/SHF and WHO that strengthens our institutional partnership through personal commitment and passionate leadership.



Chairman of The Nippon Foundation and WHO Goodwill Ambassador for Leprosy Elimination Yohei Sasakawa and WHO Director-General Dr. Tedros Adhanom Ghebreyesus confirmed their partnership at the 77th World Health Assembly in Geneva, Switzerland (May 31, 2024).

LB: We are now at the halfway point of WHO’s Global Leprosy (Hansen’s Disease) Strategy 2021–2030. Considering the impact of the COVID-19 pandemic and other factors, how would you assess the progress toward this goal? What key actions do you believe are necessary to ensure its achievement?

Dr. Tedros: COVID-19 significantly challenged our progress toward the 2030 targets and disrupted essential leprosy services worldwide. Case detection decreased not due to reduced transmission but because of disruption in surveillance and service delivery.

However, the pandemic also accelerated innovations in community-based approaches and digital health solutions that have the potential to strengthen our programs in the long-term. The achievement of elimination of leprosy in Jordan, for example, provides encouragement to other countries.

Moving forward, key actions that we must sustain include rapidly restoring and strengthening disrupted services, accelerating implementation of post-exposure prophylaxis through strengthened contact survey, enhancing community engagement, leveraging digital tools for training and surveillance, and ensuring domestic financing commitments.

Recovery from the pandemic must serve as an opportunity to build back more resilient and integrated program implementation.

LB: How do leprosy elimination efforts fit within the current global public health landscape?

Dr. Tedros: The current global public health landscape presents both challenges and opportunities for leprosy elimination.

Health systems worldwide are simultaneously recovering from the COVID-19 pandemic while confronting multiple threats, including antimicrobial resistance, climate-related health impacts, and non-communicable diseases.

At the same time, the pandemic has heightened awareness about infectious diseases, strengthened laboratory networks, and demonstrated the importance of community health workers – all potentially beneficial for leprosy programs.

New challenges, including geopolitical and financial, are placing increased strains on the budgets of governments, health organizations, and partners globally. Now more than ever, we need to work together, with solidarity and efficiency, to ensure those most in need receive the health services and care they require.

The increased focus on universal health coverage, underpinned by primary health care, creates opportunities to integrate leprosy services with those directed against other neglected tropical diseases, notably through the WHO-recommended skin-NTD approach.

These interventions can also be mainstreamed within the general healthcare system. Similarly, increased attention to health equity and social determinants aligns well with addressing the socioeconomic factors that underlie leprosy transmission and impact.

Partnerships like the 50-year-long collaboration between WHO and TNF/SHF are shining examples of how we can advance health agendas effectively and in a sustained way, and in doing so serve the most vulnerable.

WHO Goodwill Ambassador and Chairman of The Nippon Foundation Yohei Sasakawa looks back on 50 years of an unprecedented partnership

On Mar. 26, 2025, Dr. Takahiro Nanri, President of the Sasakawa Health Foundation (SHF), interviewed Yohei Sasakawa, WHO Goodwill Ambassador for Leprosy Elimination and Chairman of The Nippon Foundation (TNF), about the 50 years of partnership between WHO and TNF/SHF.



The interview took place at the Sasakawa Health Foundation's office in Akasaka, Tokyo.

Dr. Takahiro Nanri: Fifty years ago, The Nippon Foundation (TNF) and the Sasakawa Health Foundation (SHF) began supporting national governments in addressing leprosy as a public health issue through the World Health Organization (WHO). At the time, this approach was unprecedented. What led TNF and SHF to adopt this strategy?

Yohei Sasakawa: The late Ryoichi Sasakawa cared deeply about taking action to reduce suffering caused by leprosy. He recognized that in order to eradicate this kind of problem on a global scale, it would be important to coordinate the effort through WHO.

Also, Dr. Morizo Ishidate, SHF's first chair, used to say that public health problems could only be solved by working with national governments.

At the time, there was strong suspicion toward working with governments due to corruption. While caution was needed, later developments proved that involving national governments – especially health ministries – was vital in controlling leprosy. Private foundations and other nongovernmental organizations typically have to offer support in a limited way to a certain geographical area or a certain group of people, and they do excellent work this way. But given that TNF/SHF wanted to address the problem of leprosy on a global level, I think that partnering with WHO was the right choice.

Nanri: A 50-year collaboration between a private foundation and a United Nations agency is remarkable. What factors have contributed to the long-lasting partnership between TNF/SHF and WHO?

Sasakawa: To achieve an ambitious goal, one needs passion, the mental strength to overcome challenges, and the commitment to persevere until results are achieved.

On the TNF/SHF side, we have been fortunate in many ways – for example, in the continuity of leadership. Unlike in many organizations where leadership turns over every five or ten years, often accompanied by significant shifts in priorities or policies, our leadership has remained consistent in direction. This does not mean a lack of change or innovation, but rather that a shared long-term vision has been carried forward by successive leaders. This continuity has allowed us to pursue sustained efforts and maintain trust with our partners over time.

Nanri: In addition to your leadership roles within TNF, you have been the WHO Goodwill Ambassador for Leprosy Elimination for over 20 years. Two words that you mentioned – “passion” and “continuity” – seem to be relevant here as well. How have you interpreted the goodwill ambassador role, and why have you stayed so active and committed?

Sasakawa: A goodwill ambassador is typically used by an organization in a symbolic way at tape-cutting ceremonies and so on. I imagined the role differently. I saw the affiliation with WHO as an opportunity to stimulate and promote the organization's leprosy elimination activities.

Nanri: You are also well known for using your goodwill ambassador role to meet directly with heads of state to bring the matter of leprosy to their attention. Could you tell us about your thinking behind this strategy?

Sasakawa: To get things moving in a society, you need to secure understanding at the top level.

The number of patients affected by leprosy is small compared to that of those affected by diseases such as HIV/AIDS, tuberculosis (TB), or malaria. This means that the government's budget allocation for leprosy is usually also small. One reason to meet with heads of state is to convince leaders of the need for a larger allocation.

Some top leaders are not aware that leprosy is a problem in their country. My visits are opportunities to raise their awareness.

Nanri: In addition to meeting with representatives of the top level of government, you also insist on visiting areas where leprosy is endemic and talking directly with persons affected by leprosy. Could you share the reasons or context behind your visits to these areas?

Sasakawa: I believe it's important to see the situation firsthand before making any decisions.

If I only looked at reports in an air-conditioned room, I wouldn't really understand the seriousness of the situation. To do my work properly, I need to see the conditions that people are living in and how their faces fill with emotion when they speak of their situations. The only way to see this is to go myself.

Nanri: For a while now, it has been said that we are in the "last mile" of the leprosy elimination effort, but we still have not reached the goal. What are some of the remaining challenges?

Sasakawa: As I mentioned earlier, one of the challenges is budget allocation. When governments decide the allocation to fight a disease based on the number of patients affected by it, the allocation for leprosy remains small.

Another challenge is that even in areas where the disease still exists, knowledge and awareness of leprosy are fading. This lack of awareness contributes to lack of action.

In many places in the world, there is also a lingering influence of old ideas that complicates the integration of treatment for leprosy into general healthcare services.

Nanri: We have been talking about leprosy as a medical challenge. TNF/SHF and you personally were also instrumental in bringing attention to leprosy as a human rights issue. How did you come to frame leprosy in this way?

Sasakawa: WHO focuses on curing disease. When I became the WHO Goodwill Ambassador for Leprosy Elimination, "human rights" was not mentioned.

However, when one looks at the situation on the ground, there are many people who have already been cured of the disease but still have disabilities. There are also issues of discrimination, with many discriminatory laws and practices still in place.

United Nations agencies are set up to tackle problems thematically, and so they tend to exist in siloes. The agency that deals with disease is separate from the one that deals with human rights, and so on. Our success in gaining recognition for leprosy as a human rights issue in the United Nations General Assembly has helped to raise awareness that the medical and social aspects of leprosy are interrelated.

Nanri: Driving all of our efforts to eliminate the disease and related discrimination are the people directly affected by

it. You have been a pioneer in creating opportunities for persons affected by leprosy to speak out and form their own organizations. What are your thoughts on these people's organizations and their potential?

Sasakawa: First of all, considering the discrimination experienced by persons affected by leprosy, I think it takes a lot of courage for them to form an organization. These organizations should be seen as part of a quest for human dignity, and it is very important that we support them.

I wish that TNF/SHF could reach all parts of the world to give support to every one of them. Unfortunately, there are some places that we can't reach. I want them to know that TNF/SHF will continue providing support as best it can.

Nanri: Next, I would like to ask you about the "Don't Forget Leprosy" campaign, which was launched during the COVID-19 pandemic and is still ongoing. What are your thoughts on this campaign?

Sasakawa: As attention and resources shifted toward COVID-19 during the pandemic, the possibility of leprosy being forgotten increased.

When I recently visited Norway, where leprosy used to be prevalent, people seemed to be surprised by the fact that leprosy still exists. When people don't meet or see people affected by leprosy as part of their everyday lives, they think that it is a disease of the past.

I value the slogan "Don't Forget Leprosy" because people who do not normally think about the disease feel startled into awareness that the disease still exists. I hope that this awareness encourages them to learn more and take action.

Nanri: When we launched this campaign, we initially thought it would only be relevant during the COVID-19 pandemic. However, as you pointed out, this is an important message that should be shared at all times.

In closing, I would like to ask one more question.

You have been working on leprosy for a long time, yet there are still unresolved aspects of the issue. What are your thoughts on the future roles of TNF/SHF in addressing this?

Sasakawa: If TNF/SHF doesn't keep up its efforts, activities for leprosy elimination worldwide will fall apart. I am convinced of this, without a doubt.

I hope these two foundations will continue their work for the next 50 or 100 years, staying true to the vision set by Ryoichi Sasakawa and Dr. Morizo Ishidate. I believe this long-term commitment is key to resolving all the issues associated with this disease.

VIEWPOINT



Dr. Takahiro Nanri
President, Sasakawa Health Foundation

Dr. Nanri holds a Ph.D. in community development and has dedicated his career to supporting and empowering vulnerable people. After serving for seven years as Executive Director of the Sasakawa Health Foundation, he assumed the role of President in June 2024.

<https://www.shf.or.jp/en>

Sasakawa Leprosy (Hansen's Disease) Initiative puts persons affected by leprosy at the heart of what we do

The Sasakawa Leprosy (Hansen's Disease) Initiative has been supporting persons affected by leprosy for over 30 years, since the 1990s. This support can be described in terms of three phases.

Phase 1: Promoting representation

In the first phase, the Initiative supported persons affected by leprosy to stand up and speak for themselves at international forums and policy-making venues. For instance, we arranged the first-ever opportunities for persons affected by leprosy to speak at the International Leprosy Congress (1993) and the United Nations Sub-Commission on the Promotion and Protection of Human Rights (2005). Persons affected by leprosy are now actively engaged in various spheres of the international community.

Phase 2: Encouraging organization

In the second phase, the Initiative supported persons affected by leprosy in forming and developing their own organizations so that they could empower themselves and represent their collective voices. Thus far, 37 organizations in 22 countries have received assistance. To provide a platform where representatives of these organizations could gather and exchange information, the Initiative began holding a "Global Forum of People's Organizations on Hansen's Disease" every three years, starting in 2019. The third forum is scheduled to take place July 4–6, 2025, in Bali, Indonesia.

This year, the Initiative is also launching a project focused on strengthening the management capabilities of 11 organizations in Africa. The first workshop was held in Senegal, March 8–11, 2025 (see report on page 7). Each of the four participating organizations developed a strategy and an action plan, which will be implemented with our support.

Phase 3: Nurturing leaders

The third phase has been built around the theme "development of next-generation leaders." In fiscal year 2024, a pilot project called the "Sasakawa Leprosy Initiative (SLI) Young Scholar Program" was implemented in two

countries: Colombia and Indonesia. Seven persons affected by leprosy between the ages of 18 and 35 were selected for their potential to become role models and future leaders. These "scholars" received education and training organized according to three components:

1. Foundational knowledge (modules on leprosy, human rights, leadership, and organizational management as well as basic skills such as writing reports);
2. Practical application (opportunities to plan and implement small-scale projects to support communities of persons affected by leprosy);
3. Self-reliance (mentor-guided discovery of personal interests and strengths as well as tuition support for vocational schools and skill-building programs).

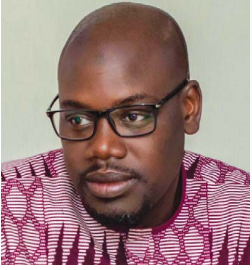
Initial results of the pilot project suggest that the scholars have increased their knowledge, motivation, and commitment to serving as role models for the community of persons affected by leprosy. For some participants, participating in the project opened a path to securing self-reliance through stable employment. Based on the results, the project is expanding in fiscal year 2025 to include two additional countries, India and Bangladesh, with a goal to support 100 scholars by 2030.

The primary beneficiaries of the Initiative's vision for a leprosy-free world should be the persons affected by leprosy themselves. With this essential point in mind, we will continue to put persons affected by leprosy at the heart of all that we do.



Four persons affected by leprosy selected to participate in the SLI Young Scholar Program meet with their mentors in Makassar, Indonesia (June 13, 2024).

REPORT



Papa Mamadou Diagne
President, Association Sénégalaise Contre la Lèpre et les Maladies Tropicales Négligées (ASCL/MTN)

Papa Mamadou Diagne has been affected by leprosy since 2009. As president of ASCL/MTN, he is involved in advocacy for rights and access to care, awareness-raising for social and environmental behavior change, education and training, and development of individualized rehabilitation plans for empowerment and inclusion.

Capacity-building workshop for organizations of persons affected by leprosy held in Senegal

From March 8 to 11, 2025, a capacity-building workshop organized with the support of the Sasakawa Leprosy (Hansen's Disease) Initiative took place in Dakar, Senegal. Four Africa-based organizations of persons affected by leprosy participated: Purple Hope Initiative Nigeria (PHIN); National Association of Persons Affected by Leprosy - Sierra Leone (NAPAL-SL); Tanzania Leprosy Association (TLA); and the Senegalese Association Against Leprosy and Neglected Tropical Diseases (ASCL/MTN).

The workshop focused on project proposals as well as administrative and financial management. As a host and participant, I was particularly impressed by the spirit of solidarity and commitment of the various actors present. This event brought together voices from various backgrounds, all united by the same cause: to improve the living conditions of persons affected by leprosy. The discussions were rich, frank, and constructive, which made it possible to identify common priorities and practical solutions to the challenges we face.

Some key takeaways from the discussion include:

Persistent challenges of stigma and discrimination: Despite advances in the treatment and management of leprosy, stigma continues to be a major barrier for those affected. Discussions highlighted the importance of increased awareness to deconstruct myths and change mindsets in local communities.

Need for capacity building of local organizations: The workshop highlighted the urgent need to strengthen the capacity of organizations of persons affected by leprosy. It is essential to provide them with the necessary tools so that they can play an active and effective role in leprosy management at the community level. This includes continuing education, networking with other organizations, and improving access to financial and logistical resources.

Importance of cross-sectoral collaboration: Another key point in the discussions was the importance of collaboration among civil society organizations, governments, and international organizations. The fight against leprosy must not be limited to medical actions alone, but must also encompass social, educational, and economic aspects.

For participants from the four organizations, the workshop was an enriching experience, both on a human and a professional level. The discussions highlighted the crucial importance of strengthening the organizations so that they can not only better defend the rights of persons affected by leprosy, but also manage projects and financial resources effectively. Better administrative and financial management is essential to ensure the sustainability and impact of initiatives for the benefit of this community.

Workshop participants expressed their hope for more support from foundations for local efforts to build the capacity of community-based organizations. Other forms of support that would be welcome include exploration of innovative solutions for addressing stigma, direct support for outreach programs, and support for sustainable development projects that integrate persons affected by leprosy into long-term economic, educational, and health solutions. The aim must be to ensure not only the elimination of leprosy, but also the full social inclusion of those affected.

Strengthening the organizations of persons affected by leprosy is fundamental. When our organizations are strong, persons affected by leprosy can become leading actors in the fight against the disease. These organizations give us the opportunity to advocate for our own rights and get involved in decision-making processes that affect our daily lives. In addition, these organizations play a key role in reducing stigma, providing a space for support and exchange for those affected.



Workshop participants Gorgui Diallo (left) and Papa Mamadou Diagne (author) brainstorm strengths as part of their SWOT analysis (Dakar, Senegal, Mar. 9, 2025).

Mister Supranational 2024 reports on visit to Ethiopia

Contributed by Dr. Fezile Mkhize, winner of the Mister Supranational 2024 title, representing South Africa

As Mister Supranational 2024, I have an array of responsibilities that align with our organization's ethos – Inspirational and Aspirational – and it is with these words at the forefront of my mind that I traveled to the beautiful country of Ethiopia.

In January, I spent seven days in Ethiopia as an awareness-raising representative for the Supranational Organization in collaboration with the Sasakawa Health Foundation. I was able to immerse myself within Ethiopian culture and have found its greatest treasure to be its people.

In Addis Ababa, we were welcomed and cared for by the incredible Dr. Lema and her phenomenal team at the Armauer Hansen Research Institute (AHRI). We visited the ALERT hospital, the Institute, various branches of the Ethiopian National Association of Persons Affected by Leprosy (ENAPAL), the Addis Ababa Leprosy and Disability Rehabilitation Association (ALDRA), and the Ministry of Health. In addition to learning about present issues, we gained an understanding of the extensive and incredible history of the facilities as well as how much work has gone into decreasing the number of cases within the country over the years since their founding.

A key issue that kept being highlighted was the stigma and subsequent discrimination that so many persons affected by leprosy face. Stigma and discrimination persist because of lack of understanding about the disease. Word must be spread that it is not as infectious as previously thought nor is it passed down through family lines.

In Shashamane, we visited the hospital, where we encountered the ulcer care clinic and in-patient facilities as well as the outpatient department that cares for those starting treatment.

We also were able to visit a branch of ENAPAL and hear about the phenomenal work being done there with its members. They provide education and build community in the area, creating a safe haven for those who have suffered from leprosy or are currently undergoing treatment. I was incredibly inspired by the village that had formed there. It was composed

of persons affected by leprosy and their family members, who had come together to generate income streams through agriculture as well as to create support structures for one another, generating a palpable sense of community.

My short but impactful stay in Addis Ababa and Shashamane have stuck with me. I found the greatest issue to be misconceptions around leprosy and mistaken beliefs that then cause persons affected by leprosy the greatest pain – isolation from society. This isolation has caused them various problems, including reluctance to seek health care, inability to find employment, and limited ability to find partners and form bonds with others. These issues are worse than the complications of leprosy as they damage the very soul of a person.

The Supranational Organization, in collaboration with the Sasakawa Health Foundation, is dedicated to raising awareness around the issue of leprosy. We have documented our time and have engaged with those online throughout the globe to create discussions and disseminate correct information regarding those who have leprosy and the fact that they should be incorporated into the general society. This disease is not hereditary nor is it highly infectious. Those who have suffered or are currently suffering from leprosy are capable people who want to contribute to their society and should be praised for their strength in battling through it. They deserve every right and social grace that anyone in society does.



As an awareness-raising representative, Mister Supranational 2024, Dr. Fezile Mkhize, spoke with national television broadcaster FBC from the grounds of ENAPAL in Addis Ababa, Ethiopia (Jan. 25, 2025).

SASAKAWA
LEPROSY
HANSEN'S DISEASE
INITIATIVE

WHO Goodwill Ambassador's Leprosy Bulletin No.126

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The *Leprosy Bulletin's* content is posted online at
<https://sasakawaleprosyinitiative.org/latest-updates/initiative-news/>



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