Schistosomiasis:

Objectives

The main objectives of the SCI are:

1. To encourage development of a sustainable schistosomiasis control programme in sub Saharan Africa.
2. In the selected countries:

   To reach at least 75% of school-age children and other high-risk groups with chemotherapy - praziquantel and albendazole.

   Reduce schistosomiasis-related morbidity in high risk groups.

   Reduce prevalence and intensity of schistosomiasis infections.

   Reduce burdens due to intestinal helminths in the targeted populations.
3. Create a demand for sustained schistosomiasis control.
4. To promote access to anthelminthic drugs and good case management in the regular health system.

The monitoring and evaluation plan will generate the information to prove whether the objectives have been met.

Funding

The Bill and Melinda Gates Foundation's Global Health Programme has granted a £20 million award to establish the SCI at Imperial College London. The award will be used primarily to bring treatment against schistosomiasis and intestinal worms (where appropriate) to many individuals in Africa at high risk of serious disease.

The Bill and Melinda Gates Foundation's Global Health Programme is focused on reducing global health inequities by accelerating the development, deployment and sustainability of health interventions that will save lives and dramatically reduce the disease burden in developing countries.

Partners

The SCI's major funding partner is the Bill and Melinda Gates Foundation, and the major operational partners are the Department of Infectious Disease Epidemiology, Imperial College London; the Harvard Center for Population & Development Studies, Boston; and the World Health Organisation, both in Geneva and the African Regional Office. The SCI

will be a new and important partnership contributing to the World Health Organisation's work in schistosomiasis research and control activities.

The SCI will also work closely with a number of other organisations:

- The World Food Programme - by assisting the WFP to deliver deworming pills together with the food they provide through the School Feeding programme.
- International Dispensary Association (IDA), Holland, to provide high quality reasonably priced drugs to certain countries.
- The Danish Bilharzia Laboratory (DBL) Denmark, which has an excellent track record of research and training in Africa. In particular DBL will assist SCI to reach the goal of treating millions of people in Uganda by training health personnel in 20 or more districts. SCI expects that DBL will participate in other selected countries during the expansion phase.
- The Carter Center, Atlanta, which is currently distributing drugs against onchocerciasis and lymphatic filariasis in Nigeria. SCI hopes that the experience gained in Nigeria will be put to great use for schistosomiasis control.
- The Center for Disease Control, Atlanta, (CDC) which will assist SCI by providing an independent monitoring service for measuring the SCI achievements.
- The Partnership for Child Development (PCD), based in the same Department at Imperial College London (DIDE), PCD and SCI have overlapping mission statements, and will collaborate and share resources in several countries.
- African public and private organizations, and government ministries in several possible implementing countries such as Burkina Faso, Cameroon, Ghana, Kenya, Níger, Nigeria, Malawi, Mali, Sudan, Tanzania, Uganda, Zambia.
- NIH, The Wellcome Trust, DFID, and The United States Agency for International Development (USAID) are all donors which may contribute directly or indirectly to the initiative against schistosomiasis by supporting research or control operations.
- The World Bank which through its FRESH initiative (Focussing Resources Effectively for School Health) and loans to developing countries is pushing forward the school health programmes in many countries.
- The London School of Hygiene and Tropical Medicine with the Department of Infectious and Tropical Diseases. In particular Dr. Simon Brooker will assist SCI in the development of surveillance maps, and use of GIS technology as required in the SCI participating countries.

Who does the SCI Serve?

The SCI will assist countries to target people who are at high risk of serious disease (morbidity) from schistosomiasis. Particularly vulnerable people include: school aged children, women, and adults in occupations involving water - such as irrigation farming and fishing.

How does the SCI Operate?

The SCI will collaborate with international agencies, governmental and non-governmental organizations, and private companies to achieve its objectives for schistosomiasis control.

The SCI will seek to develop the necessary health education, administrative infrastructure, technical competence, and evaluation methods to advance schistosomiasis control in Africa. The control strategy will be developed by each country, but will probably focus on mass treatment of school-aged children and high-risk groups.

The SCI will investigate the advisability of combining the primary intervention against schistosomiasis with other interventions that may be co-administered. For example, in some areas, it may be deemed appropriate to combine administration of praziquantel with albendazole to reduce concomitant infections with soil-transmitted helminths.

The SCI will seek to:

- Stimulate African countries to consider mass treatment of schistosomiasis with praziquantel, for appropriate population groups.
- Assist African countries to prepare applications to the SCI for the development of national schistosomiasis control programmes.
- Provide praziquantel on a large-scale basis, initially in the selected countries.
- Furnish technical assistance, as required in these countries, to assure effective implementation of national schistosomiasis control programmes.
- Evaluate and monitor control effects in the selected countries, to assess the implementation and health consequences of the SCI

Applications from country teams will be reviewed by the SCI's Technical Advisory Panel. The SCI is committed to collaboration with country teams to assist in the development of a successful application. Future expansion of the SCI will depend on how successful the programme is in the pilot countries.

Phase 1 (October 2000 – April 2002)

During the first planning phase, the SCI was based at Harvard School of Public Health, in Boston. The feasibility of implementing schistosomiasis control in a number of African countries, was determined, and partner organisations were identified for the planning and full-scale implementation of control operations. The implementation phase will depend on successful collaboration with a number of partners, including international agencies, non-governmental organizations, bilateral donors, and pharmaceutical companies.

The SCI staff and consultants have approached Ministries of Health in a number of countries; among them Cameroon, Ghana, Kenya, Malawi, Mali, Niger, Nigeria, Sudan, Tanzania, Uganda, and Zambia – to assess the current status of schistosomiasis control and the potential benefit of those countries of participation in this initiative.

Phase 2 (May 2002)

The SCI Unit establishment.

Imperial College in London was awarded a full grant with a start date of June 1, 2002 with five components:

1. The SCI Implementation Unit, directed by Dr. Alan Fenwick, based at Imperial College and responsible for the management of the initiative.

2. The SCI Surveillance and Monitoring Unit, to be directed by a recruited scientist to be appointed by Imperial College.

3. The World Health Organisation, which will develop the global strategy for a fight against schistosomiasis and intestinal helminths.

4. The Harvard Center for Population Development Studies directed by Professor Michael Reich which will be responsible for much of the operational research.

5. The National Country Programmes which will implement the control programmes in the selected countries.

Interested countries will be invited to participate in the development of a detailed application to be considered for the intervention phase of the SCI. All applications will be reviewed by an advisory panel to be convened by the SCI.