Introduction

The mission of the Lions’ SightFirst program is to build comprehensive eye care systems to fight the major causes of blindness and care for the blind or visually impaired. The program funds high quality, sustainable projects that deliver eye care services, develop infrastructure, train personnel and/or provide rehabilitation & education in underserved communities.

Lions, through SightFirst, have played a leading role in the fight against onchocerciasis (oncho), a parasitic eye and skin disease that has blinded thousands of people primarily in Africa and Latin America. Since 1993, SightFirst has awarded nearly $30 million to support the distribution of ivermectin treatments to more than 65 million people. An additional $2 million from SightFirst has been invested to help eliminate the disease in Latin America by 2012. And, with monies from Campaign SightFirst II, Lions will provide ongoing treatment for millions more in Africa.

This paper, prepared as part of a long range planning effort mandated by the SightFirst Advisory Committee (SAC), recommends strategies to guide future SightFirst onchocerciasis programming.

Onchocerciasis

Disease Profile

Onchocerciasis is a parasitic infection endemic to Africa, parts of Latin America and the Middle Eastern country of Yemen. Nearly 37 million people are infected with the disease, of which approximately 300,000 have been blinded. The oncho parasite is transmitted by a black fly that breeds near rivers, thus the disease is often referred to as river blindness. Oncho causes various skin ailments and if the parasite invades the eye, the infection can lead to low vision or blindness. Annual doses of ivermectin, a drug manufactured and donated by Merck & Co. as Mectizan®, prevent further progression of visual disabilities and blindness and lessen the frequency of transmission. While ivermectin helps to control the disease by suppressing the parasite’s ability to reproduce, the search remains for a macro pharmaceutical to eliminate the disease entirely.

Oncho Control

Launched in 1974, the Onchocerciasis Control Project (OCP) was a mass scale aerial insecticide spraying program in West Africa which aimed to eliminate the black fly responsible for transmitting the oncho parasite. With the development of ivermectin some years later, the focus of OCP changed to widespread distribution of the drug (1988-2002). Since 1995, the African Programme for Onchocerciasis Control (APOC) has been the coordinating body responsible for ivermectin treatment programs in Africa. And a similar organization, known as the Onchocerciasis Elimination Program of the Americas (OEPA), does the same in Latin America. These organizations, along with their non-government organization (NGO) partners coordinate and fund Community Directed Treatment of Ivermectin (CDTI), a strategy wherein local community members are chosen and trained to distribute annual doses of the drug and then monitor and evaluate its effects.

The achievements of OCP, APOC, OEPA and their NGO partners have resulted in significant reduction of blinding oncho. As a result, the focus of oncho control efforts is shifting from blindness prevention to tropical disease control and elimination. APOC, for example, has been directed to complete its oncho related objectives by 2015, after which, it is anticipated that the CDTI network will be used as a platform for other public health initiatives.

SightFirst & Onchocerciasis

SightFirst has provided support for oncho control activities since 1993. To date, nearly $30 million has been approved for 17 projects in 15 countries including Brazil, Columbia, Ecuador, Guatemala, Mexico and Venezuela in Latin America; and Cameroon, Democratic Republic of Congo (DRC), Ethiopia, Guinea, Mali, Nigeria, Senegal, Sudan and Uganda in Africa.

Currently, SightFirst support for oncho falls into three categories. These include: 1) the Carter Center partnership projects in Ethiopia, Nigeria, Sudan and Latin America; 2) partnership projects with other NGOs in Senegal, Guinea, Cameroon and Mali and; 3) the primarily Lions-led project in Democratic Republic of Congo. These projects have been responsible for supporting the distribution of nearly 120 million ivermectin treatments for more than 100 million people.

While the results are impressive, these projects have not always lent themselves to significant recognition of and involvement by Lions. The nature of the treatment programs provides limited opportunity for Lions hands-on volunteer service. And, Lions financial support of oncho efforts, while significant, has, at times, been undervalued by partners and lacking in media reports.
**SFLRP Working Group Recommendations**

In November 2007, the SFLRP Working Group convened a meeting with Dr. Silvio Mariotti of the World Health Organization (WHO) to review the history of onchocerciasis control, discuss current disease control trends and informally analyze SightFirst oncho efforts to date. Also present were Ed McManus and Phoebe Sebring, consultants for the SFLRP effort, Rebecca Daou, LCIF Division Manager, and Joshua Friedman and Karim Bengraine of the LCIF Sight Programs Department. Additional information was gathered by Phil Albano and Kristen Eckert of the LCIF Sight Programs Department during their attendance at the APOC/JAF and OEPA meetings later that same month. With this information, the SFLRP Working Group has developed the following conclusions and recommended strategies for future SightFirst support of oncho:

**Conclusions**

- As the nature of oncho activities shifts from blindness prevention to tropical disease control and elimination, it is recommended that SightFirst support for the disease be gradually scaled back between now and 2015 and significantly reduced by 2020. This will allow SightFirst to focus limited resources on those programs that more closely align with its mission. The strategies outlined in the section below provide a framework for oncho support during the transition period.

- In light of limited resources and the considerable time typically required for the development of new pharmaceuticals, SightFirst support of fundamental research for oncho treatment does not appear a feasible opportunity.

**Recommended Strategies & Changes Moving Forward**

1. **Geographic Restriction**

   **Definition:** Future support should be focused on existing SightFirst oncho projects that have exhibited success. In addition, SightFirst monies should be primarily used to help these projects develop locally sustainable mechanisms for ivermectin distribution so that activity is not suspended once SightFirst support is concluded.

   **What does this mean?:**

   - Oncho project applications from new countries/communities should not be considered.
2. Eye Care Integration

Definition: Future support might also be used to help transition projects from ivermectin distribution to the development of comprehensive eye care services. As more SightFirst oncho projects adopt this strategy, efforts might be more appropriately classified as SightFirst comprehensive eye care programming.

What does this mean?:

✓ SightFirst may provide funding to support activities not included in past oncho projects. For example, monies might be used to train CDTI workers in primary eye care or purchase basic eye care equipment to help strengthen the local eye care services.

3. Lions Advocacy

Definition: The Lions involved in SightFirst oncho projects should be provided with resources to help advocate for greater government support of ivermectin distribution as well as the improvement of local eye care services.

What does this mean?:

✓ SightFirst may now provide funding to aid in the development of advocacy and public awareness type resources and training for Lions.

4. Budget Reallocation

Definition: Since 1993, SightFirst has awarded nearly $30 million to support oncho activities, making it one of the leading NGO contributors worldwide. During planning for Campaign SightFirst II, it was estimated that an additional $22 million will be needed for future oncho activities.

What does this mean?:

✓ Given the SFLRP Working Group recommendation to scale back oncho support, the SAC may want to revisit the funding matrix to determine if some of these monies might be more appropriately allocated to another disease/program area.
SAC Prerogative: Applications requesting funds for oncho projects with objectives that vary from those stated above may be considered on a case-by-case basis.

Next Steps

Should the SAC approve the strategies outlined above, the SFLRP Working Group recommends the following next steps with regards to implementation:

- The SightFirst grant application, including funding criteria and guidelines, would need to be revised and new written resources developed for oncho projects.
- LCIF Sight Programs staff should train regional technical advisors from Africa (and to a lesser extent, Latin America) and inform Lions in these regions about the new strategies and grant application process.
- LCIF Sight Programs staff should begin to communicate the new strategies to all oncho partners.