

Sightsavers Deworming Program – DRC GiveWell Wishlist 5 Schistosomiasis (SCH) / Soil Transmitted Helminth (STH) Project Narrative

Country: DRC

Location (region/districts): Ituri Nord

Duration of project: 1 year

Start date: April 2022

Goal

Reduction in the prevalence and intensity of SCH and STH amongst school age children.

Outcome

School aged children (SAC) between 5-14 years¹ within the intervention zone are effectively treated with mebendazole/albendazole and praziquantel as required.

Program implementation areas

With funding from Wishlists 1, 2 and 3, GiveWell's support currently enables SCH and STH mass drug administration (MDA) in eight districts of Ituri Nord, implemented through United Front Against River blindness (UFAR), until March 2022. Support in 23 endemic health districts in Ituri Sud were approved in Wishlist 4, for the period of April 2020 to March 2023.

Wishlist 5 funding would extend support in existing implementation areas in Ituri Nord for one additional year to continue to treat SAC and help control SCH and STH in compliance with the National NTD Program policies, bringing all Sightsavers and GiveWell funded deworming activities in the country to March 2023.

Table 1 below shows the prevalence of SCH and STH and the treatment schedule in 8 districts in Ituri Nord, where 4 districts are due to receive treatment in Year 6 (April 2022 – March 2023).

Table 1: Prevalence and treatment schedule in program implementation areas

District	SCH prevalence	SCH treatment schedule	STH prevalence	STH treatment schedule	Total population 2022 ²	Total SAC ³ 2022
Angumu	8%	Every 3 years (no MDA in 2022/23)	0%	Not required	197,936	69,278
Aru	13%	Every 2 years (no MDA in 2022/23)	1%	Not required	193,255	67,639
Augnba	5%	Every 3 years	23%	Annual	203,905	71,367
Biringi	16%	Every 2 years	18%	Not required	156,087	54,630
Logo	1%	Every 3 years (no MDA in 2022/23)	2%	Not required	126,589	44,306
Mahagi	3%	Every 3 years (no MDA in 2022/23)	1%	Not required	214,380	75,033

¹ and adults where prevalence dictates.

² Based on population projections.

³ Based on estimated 35% of total population.

Nyarambe	92%	Annual	0%	Not required	262,682	91,939
Rimba	1%	Every 3 years	11%	Not required	264,463	92,562
				Total	1,619,297	566,75

Grey highlighted lines are for districts scheduled for MDA in Year 6 as part of Wishlist 5

Prevalence and treatment strategy

GiveWell's continued support will enable another year of SCH and STH MDA in accordance with the WHO-defined minimum thresholds for MDA eligibility⁴.

Adult treatment, which is recommended by WHO in areas of high SCH prevalence (> 50%), is required just for one district, in Nyarambe, depending on the availability of drugs.

Please see the attached spreadsheet, 'Prevalence and treatments Wishlist 5', for the full prevalence detail and treatment targets by district.

Outputs

Output 1: Train health workers, teachers and community members to deliver SCH / STH MDA to schools and endemic communities.

Output 2: Treat school aged children between 5-14 years for SCH / STH through MDA.

Output 3: Ministry of Health coordinates and supports targeted regions / districts to implement the National NTD Plan with focus on SCH/STH.

Key output indicator targets

	Year 6
	Apr'22 – Mar'23
No. of teachers trained on SCH/STH MDA	1,569
No. of health workers trained on SCH/STH MDA	182
No. of CDDs trained on SCH/STH MDA	3,726
No. of school aged children between 5-14 years treated for STH	53,525
No. of school aged children between 5-14 years treated for SCH	232,874
No. of adults treated for STH	-
No. of adults treated for SCH	90,625

Summary of planned budget

	Year 6
Planned program costs	\$163,339

Please see attached 'Wishlist 5 budget' for more detail.

Implementation

Through UFAR, health workers, teachers and community drug distributors (CDDs) will continue to be trained to deliver SCH / STH MDA in a hybrid platform approach (a combination of school and community-based treatment).

⁴ [Helminth control in school age children: a guide for managers of control programmes, Second edition](#), 2011, page 74-75

Supervised by trained health workers, school based treatment will be distributed by teachers to ensure optimal coverage. Non-enrolled or absent children will be treated through community-based MDA by CDDs.

Albendazole treatment will be given alongside praziquantel in 1 district co-endemic for SCH and STH (Augnba), while in the other 3 districts (Biringi, Nyarmbe and Rimba) there will be just SCH MDA in Year 6 (April 2022 – March 2023). At the end of this additional one-year period, a total of 232,874 school aged children are expected to be treated, with 53,525 treated against STH and 232,874 against SCH.

Monitoring and evaluation

Treatment coverage surveys (TCS), used to indicate the success of MDA, will occur after each GiveWell funded MDA.

Inputs from key partners, governments and other stakeholders

Partner	History of work with Sightsavers	Role in the program
United Front Against River blindness (UFAR)	Implements Sightsavers planned interventions in DRC since 2011	Technical support Implementing partner
Ministry of Health	Partnership since 2011	Coordination Implementing partner
Ministry of Primary Education	Partnership with Sightsavers' program for school-based MDA in Ituri Nord since 2017	Implementing partner Sensitization for adoption of healthy behaviour
Pharmaceutical companies	Pharmaceutical companies donate drugs to the MoH for use in Sightsavers programs since 2011	Supplies the quantity of required drugs requested by the MoH
GiveWell	Supported Ituri Nord program since 2017 and Ituri Sud since 2020 (SCH and STH).	Donor
Department for International Development UK (DFID)	Supported Ituri Nord program since 2011 (oncho and LF)	Donor of oncho and LF program in Ituri Nord
Communities	CDDs support MDA. Community led sensitization since 2011 in Ituri Nord	Volunteer support Beneficiaries

Other funding opportunities/fungibility

Through established agreements with the MoH, Sightsavers has been providing support to UFAR to implement NTD MDA in Ituri Nord, since 2011.

To date, other than GiveWell, we have not been able to identify a donor able to fund SCH / STH in Ituri Nord, DRC.