FROM PROMISES TO PROGRESS

The First Annual Report on the London Declaration on NTDs



www.UnitingToCombatNTDs.org

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I. Executive Summary

2012 was a historic year in the fight against neglected tropical diseases (NTDs) as the global health community came together to chart a new course toward a world free of many of these devastating ailments. On January 30, an unprecedented group of partners in the NTD community committed to the control or elimination of 10 NTDs in line with targets set by the World Health Organization (WHO). This commitment was captured in the landmark London Declaration on Neglected Tropical Diseases.

Over the past year, there has been exciting progress:

- Pharmaceutical partners supplied 1.12 billion treatments meeting the increased requests from endemic countries.
- Donors committed funds to support integrated NTD programs, scale up and expand existing programs, increase resources available for mapping, improve program strategies through research, and develop new tools.
- More than 40 endemic countries developed multi-year integrated NTD plans, and Nigeria, Brazil, Cameroon, Honduras and Burundi launched their plans.
- Oman became the first previously endemic country to verify the elimination of trachoma.
- Partners developed a comprehensive London Declaration Scorecard, presented in this report and online, to promote accountability, transparency and evidencebased prioritization. This scorecard tracks the delivery of London Declaration commitments, highlights key milestones and targets, and helps identify priority action areas to ensure that 2020 goals are met.

With these new drug supplies and integrated NTD plans, programs are ready to scale up. Building on these promising beginnings, new partners and resources are urgently needed to be on track toward achieving the WHO goals. By redoubling our efforts, together we can empower communities to break the cycle of poverty and neglect by overcoming the burden of NTDs.

II. Introduction

NTDs and Their Impact

NTDs are a group of infectious diseases that disproportionally affect the world's poorest and most vulnerable populations. It is estimated that more than one billion people are affected by NTDs, including roughly 800 million children. Although these diseases are the most common infections amongst the world's poorest, they have traditionally received little or inconsistent attention on international health agendas. Targeted commitments and investments from a range of partners over the years have reduced the burden of many NTDs, but significant gaps still remain.

WHO's Roadmap: The Path to an NTD-Free World

WHO's Roadmap for Implementation, put forward in January 2012, outlined bold targets for the control and elimination of 17 NTDs. In January 2013, WHO launched its second report (available at *www.who.int/neglected_diseases*) with updated information on the specific targets for each disease and what needs to be done to reach the 2020 goals. Below are the 10 NTDs targeted for control, elimination or eradication as part of the London Declaration on NTDs.

- Blinding trachoma
- Chagas disease
- Guinea worm disease
- Human African trypanosomiasis (sleeping sickness)
- Lymphatic filariasis (LF or elephantiasis)
- Leprosy
- Onchocerciasis (river blindness)
- Schistosomiasis (snail fever or bilharzia)
- · Soil-transmitted helminthiasis (STH or intestinal worms)
- Visceral leishmaniasis (kala azar)

The London Declaration on NTDs

The commitments made in January 2012 were designed to accelerate progress toward the WHO 2020 NTD targets and ensure accountability. Highlights include:

- Sustaining or expanding existing drug donation initiatives to meet the needs of control and elimination programs;
- Providing more than US\$785 million to support NTD programs, strengthen drug distribution, and increase research and development (R&D) efforts;
- Sharing expertise and compounds to accelerate R&D of new drugs; and
- Enhancing collaboration and coordination on NTDs at national and international levels through partnerships among public, private, non-governmental and multilateral organizations in the NTD community and with other sectors such as water and sanitation, and education.

This report includes the first London Declaration Scorecard, designed to track outputs from all of the diverse partners and map out the milestones that need to be met to accomplish control and elimination goals. Annual updates to this scorecard will capture progress made and identify risk areas and challenges that require more attention. A summary version of this scorecard appears on page 6, while the full version can be accessed at *www.unitingtocombatntds.org*.

III. Progress Report from 2012

As documented in the London Declaration Scorecard, partners have worked to fulfill their 2012 commitments and have met many of their targets. Key findings from the scorecard include:

Drug Supply: Scaling Up to Meet Country Needs

Preventing or treating infections with existing donated or inexpensive drugs can have a great impact on disease burdens for multiple NTDs. One of the key tenets of the London Declaration was that partners agreed to scale up supply of these drugs for NTD programs, which they have done in the past year.

• **Progress in 2012:** Countries increased their requests for drugs in response to the London Declaration commitments, and the pharmaceutical industry fulfilled 100% of all requests. For example, 29 new countries received free supplies of the drugs albendazole or mebendazole for the treatment of STH, increasing treatments provided from 46 million in 2011 to 238 million in 2012. In total, companies shipped 1.12 billion treatments in 2012, either for preventative chemotherapy or for treatment of people with NTDs. Although some scale-up over the current volume is required to meet the 2020 targets, constraints on the supply of existing drugs are no longer a major bottleneck to NTD control and elimination efforts.

Funding: Additional Resources Available But More Needed

At the announcement of the London Declaration, seven private and public donors pledged financial commitments totaling US\$785 million to be disbursed over the next several years. This represents a major accomplishment in an area that had been chronically under-resourced. Donors from the London Declaration followed through with funding to scale up existing programs and launch new initiatives.

• **Progress in 2012:** The *United Kingdom* funding for NTDs increased from £15.3 million in 2011 to £26.3 million in 2012, including support for trachoma mapping, visceral leishmaniasis elimination programs, and WHO's NTD department. An additional £47.3 million was committed for activities starting in 2013; USAID committed US\$89 million, a steady increase over previous years; World Bank resources for health systems strengthening and results-based financing can now be requested by countries to cover NTD funding needs; the *Bill & Melinda Gates Foundation* made grants totaling US\$47 million for research to improve programs and tools; a *group of donors* fully funded the Guinea worm eradication program (see call-out box); Children's Investment Fund Foundation committed US\$22.3 million for activities beginning in 2012, including a national deworming program in Kenya; the Legatum Foundation announced a US\$10 million contribution toward NTD control in Africa as part of The END Fund's launch in June 2012; Lions Clubs International gave a total of US\$2.8 million to NTDs in 2012 and announced new plans to give

US\$2.7 million in 2013; *Mundo Sano*, an emerging partner, increased its commitment to US\$8.7 million and expanded its work to Latin America and Africa; a *consortium of funders* complemented public and national funds in Mali to cover the funding gap for 2012 (see call-out box).

Implementation: Improving Delivery of Drugs and Services

As indicated in WHO's second NTD report, scaling up programs (including implementation, evaluation and monitoring) remains the biggest obstacle to reaching the 2020 targets. Significant steps were taken, particularly with developing new plans for NTD programs in endemic countries and integrating control efforts across diseases. However, the rate of scale-up needs to dramatically increase to be on course to achieve the 2020 targets.

• **Progress in 2012:** To prepare for scaling up programs, more than 40 endemic countries developed new multiyear integrated plans for NTD control in 2012 and five countries officially launched their plans (see calendar). WHO has made integrating drug delivery programs easier with the release of its joint application form for drug requests. As a result of successful mass drug administration (MDA) programs, 96% of the population at risk of river blindness no longer needs treatments

Launch of Nigeria's Master NTD Plan

Nigeria has one of the highest NTD burdens in the world, including the greatest number of lymphatic filariasis and river blindness cases in Africa and the largest number of schistosomiasis cases globally. The Nigerian authorities and others have been combating these diseases in places like Birnin Magaji in Zamfara state, where community leaders have been working with volunteers to educate people and distribute drugs, but programs needed to be scaled up to a national level. The government of Nigeria has recently completed an integrated national plan which will be launched in February 2013 to do just that, but a significant funding gap persists. After the launch of the London Declaration, donors are responding to this challenge. The United Kingdom's Department for International Development and USAID have conducted a joint scoping visit and are establishing complementary programs to expand activities in line with the national plan. In coordination with these donors, the Children's Investment Fund Foundation will fund mapping in 14 Nigeria states for STH and schistosomiasis. In December 2012, a high-level private donor roundtable was hosted by Nigerian philanthropist and NTD donor General T.Y. Danjuma to further engage individuals, corporations and foundations in Nigeria in the broader NTD cause. The commitment and partnership between donor agencies, the Nigerian government and in-country organizations will be able to make an impact that would not have been possible without collaboration.

2

Partnership to Combat Lymphatic Filariasis

LF, commonly known as elephantiasis, is a threat to more than 1.3 billion people in 81 countries worldwide. More than 120 million people are currently infected, with about 40 million disfigured and incapacitated by the disease. WHO's Global LF Elimination Program has made great progress since 2000, supported by donations from GlaxoSmithKline and Merck & Co. In January 2012, a group of partners including Sanofi, Eisai and the Bill & Melinda Gates Foundation joined forces to provide new support to the program. Together, the partners committed to donating 120 million tablets of DEC (diethylcarbamazine) during 2012-2013, allowing WHO to provide preventative treatment for 30 million people not previously covered by donation programs. Since the announcement, the partnership has implemented a large scale-up of production and a 'just in time' logistics supply system. As a result, the partners have provided WHO with more than 60 million tablets over the last year for Malaysia, Madagascar and Myanmar. Beyond 2013, Eisai will begin an LF Elimination Partnership with WHO and will continue to provide DEC free of charge until 2020.

in the Americas, and Colombia officially requested certification for the elimination of the disease. Additionally, Oman was the first previously endemic country to be verified as trachoma-free, paving the way for others in 2013. Strides were also made for diseases that cannot be controlled through MDA programs. For instance, WHO and endemic countries committed to a strategy and defined criteria for the elimination of sleeping sickness, and an epidemiological atlas of sleeping sickness was completed to guide the program.

Research: Developing New Tools and Strategies

Existing tools and strategies can dramatically reduce the burden of NTDs, but new drugs and diagnostics are critical to achieve the 2020 goals for all the NTDs in the London Declaration except for Guinea worm disease.

• **Progress in 2012:** Eight new pharmaceutical companies provided DND*i* access to hundreds of thousands of compounds to be screened for potential new drugs. In addition, two new NTD diagnostic tests have received regulatory approval in 2012: the first ever lateral flow test for sleeping sickness and a new rapid diagnostic test for lymphatic filariasis. Merck Serono launched a public-private partnership to develop a much-needed pediatric formulation of praziquantel, a drug used to treat schistosomiasis.

IV. The Road Ahead in 2013

Achievements in 2012 have laid the foundation for protecting some of the world's most vulnerable populations from NTDs. Next year's London Declaration Scorecard will measure partner progress against 2013 targets and will feature data on the number of people reached by NTD programs. Key milestones for 2013 include:

- **Disease Elimination:** Eliminate trachoma in Vietnam; certify the elimination of Guinea worm disease in Côte d'Ivoire, Sudan, Niger, Nigeria and Kenya; and verify the elimination of river blindness in Ecuador.
- **Drug Delivery:** Provide drugs to ~950 million individuals in high-risk areas (up from 710 million in 2010) to prevent infections or treat several NTDs.
- **Funding:** Increase funding available to achieve 2020 goals, reducing the preliminary ~US\$300 million



Calendar of Key 2012 Events

From Promises to Progress: The First Annual Report on the London Declaration on NTDs

3

estimated annual funding gap for implementation programs.

- **Research:** File for regulatory approval to begin clinical trials on a new drug being developed by Johnson & Johnson, DND*i* and others to kill the adult form of the worms that cause river blindness and lymphatic filariasis.
- **Mapping:** Conduct a global survey to map the burden of trachoma with resources provided by the United Kingdom government; by 2015, the program will sample more than 4 million people in 30+ countries.

A full list of these milestones is available in the London Declaration Scorecard, accessible at *www.unitingtocombatntds.org.*

V. Addressing Gaps and Overcoming Challenges

To meet the ambitious but achievable targets outlined for 2013, and to be on track to meet 2020 goals, the NTD community must address several broad challenges. In November 2012, nearly 500 stakeholders from the NTD community came together at the World Bank to consider strategies to overcome these obstacles in the years ahead. Key ideas discussed at this meeting are listed below. The full meeting report is available at *www.unitingtocombatntds.org/content/ntd-reports*.

• **Program Scale-Up:** Despite being one of the largest public health programs globally, reaching over 700 million people in 2010, NTD programs must rapidly scale up to achieve the 2020 targets. Endemic countries need additional human resources, robust systems and technical capacity to expand and scale

Private Sector Mobilization in Mali

Since 2007, Mali had been successfully conducting a mass drug administration (MDA) program with funding from USAID to prevent and treat the most prevalent NTDs. Following the coup d'état in March 2012, USAID's funding for Mali was frozen, jeopardizing the 2012 effort. Fortunately, The END Fund, an initiative launched in the months following the London Declaration to engage the private sector in the NTD movement, was able to mobilize the necessary US\$1.2 million to re-start the suspended MDA program and ensure treatment continued for close to 12 million people. The END Fund engaged in Mali after being asked by the Malian Ministry of Health, USAID, RTI International and Helen Keller International to assist, and worked closely with these partners throughout the emergency response appeal and program implementation. The consortium of new funders to NTDs included gold mining companies, led by Randgold Resources, and private foundations, including the Vitol Foundation and the Margaret A. Cargill Foundation. In addition, the Hilton Foundation worked with the Carter Center to ensure the continuation of drug distribution for trachoma in the remaining endemic provinces.

up NTD prevention and control efforts, particularly as they work to integrate programs focused on multiple diseases. Much of this work can take place with broader efforts to strengthen health systems. Investments in operational and/or implementation research and partnerships with the private sector can help programs use resources as efficiently as possible and maximize the number of people reached. Improved data collection—including mapping, and monitoring and evaluation—is also required to guide programs and to enhance efficiency and timeliness of reporting.

	2012		2013	
October: Launch of Cameroon's multi-year integrated NTD plan October: Launch of Liberia's integrated MDA for schistosomiasis, STH, LF and river blindness	 November: Uniting to Combat NTDs and Global Alliance for the Elimination of Lymphatic Filariasis meetings at the World Bank in Washington, DC December: Commitment by endemic countries to eliminate sleeping sickness at WHO meeting in Geneva 	 December: Joint Action Forum of African Programme for Onchocerciasis Control, in Bujumbura, Burundi December: Lives in the Balance: Delivering Medical Innovations for Neglected Patients and Populations meeting hosted by DND<i>i</i> and Médecins Sans Frontières December: High-level meeting for private sector engagement in NTDs in Nigeria held in Abuja. 	 January: Launch of Hudson Institute Report <i>The Economic Case for</i> <i>Neglected Tropical Disease Control and</i> <i>Elimination</i> January: Release of WHO's second NTD report: <i>Sustaining the drive</i> <i>to overcome the global impact of</i> <i>neglected tropical diseases</i> January: Announcement of Nigeria's multi-year integrated NTD plan launch January: Launch of the London Centre for Neglected Tropical Disease Research 	

Calendar of Key 2012 Events

- Funding: Assuming current funding continues, there is a US\$3 billion funding gap for program implementation through 2020, based on preliminary estimates. Partners can encourage new donors to join the fight against NTDs, especially working with the private sector in endemic countries. By pooling individual or diseasespecific donations, new and existing donors could jointly fund comprehensive programs for improved efficiency and increased impact. Countries can obtain new funding through existing World Bank and bilateral sources by including NTDs in their national health plans and budgets. Bilateral donors can also consider investing in NTDs by integrating funding with maternal and child health, nutrition, water, sanitation and hygiene (WASH), and other health or development programs.
- New Tools: Accelerating progress to meet the 2020 targets requires new drugs and diagnostics. Better diagnostics are critical to improve case-finding, facilitate post-elimination surveillance and provide surrogate markers for use in clinical trials. New drugs will help fill gaps where good treatments or preventatives are limited or do not exist, and will help combat the threat of potential drug resistance. Industry partners can help develop and bring new products to market with technical and financial resources, and by providing access to biomarkers for diagnostic development. Diagnostic companies need to be encouraged to develop and produce new tools for NTDs as well.
- Enhanced Collaboration: Collaborations and partnerships with existing and new organizations can help overcome the challenges identified above. New

"Little Doctors" Combat STH in Bangladesh

In the last year, Bangladesh's Ministry of Health and Family Welfare piloted a child-to-child approach to health education and deworming through the "Little Doctors" program. The "Little Doctors" program teaches students from upper grades to assist teachers with deworming days. The Little Doctors also share hygiene and other health messages with their classmates and families to help prevent re-infection. In partnership with Children Without Worms, the program currently provides twice-yearly treatment of Johnson & Johnson's mebendazole to 24 million schoolage children annually. The Ministry of Health and Family Welfare provides roughly US\$1 million for the program to support procurement, training, advocacy, communication and drug distribution efforts. "Little Doctors" is just one part of Bangladesh's broader STH program, which scaled up to cover the entire country for the first time in 2012, an accomplishment that would not have been possible without the country's commitment to innovative approaches and strong partnerships in combating NTDs.

Progress Toward Guinea Worm Eradication

With only four endemic countries remaining-Chad, Ethiopia, Mali, and South Sudan–Guinea worm disease is approaching eradication. As part of the London Declaration, a diverse group of funders including His Highness Sheikh Khalifa bin Zayed Al Nahyan, President of the United Arab Emirates, the Gates Foundation, the Children's Investment Fund Foundation and the United Kingdom provided financial support to close the funding gap for Guinea worm eradication. Over the past year, The Carter Center's Guinea Worm Eradication Program, working with WHO, used the new funding to work with the world's newest country, South Sudan, and to maintain support to communities in Mali cut off by civil strife. The program's efforts rely on community volunteers and dedicated staff to reach some of the most remote and challenging settings in the world. Persistence and perseverance is required. With the enhanced effort in 2012, there was a 49% reduction in Guinea worm disease cases reported compared to 2011.

approaches are needed like the *SMS for Life* publicprivate partnership led by Novartis, which uses mobile phones to track malaria drug supplies and prevent stock-outs, and is now being expanded to monitor leprosy and tuberculosis medicine supplies in Tanzanian health facilities. Although drugs are critical tools, they are not enough to achieve all the 2020 NTD targets. The underlying causes of poverty need to be addressed with cross-sector collaboration and better communication with the education, nutrition, and WASH communities. For example, improving communication between education ministries, which collect preventative chemotherapy data, and health ministries, which report the data to WHO, would help shorten the current two-year reporting time delay and help improve program implementation.

VI. Conclusion

The London Declaration on NTDs marked the beginning of a new, coordinated effort to accelerate progress toward eliminating or controlling 10 NTDs. In the year since its launch, partners across sectors have worked toward fulfilling their commitments and delivering results that will significantly impact people's lives. Through innovative partnerships and collaborative efforts, the NTD community made important strides in 2012. Yet, to achieve WHO's 2020 goals, the NTD community must secure the increased resources and political will necessary to initiate and scale up programs to close the remaining gaps. In doing so, together we can move toward a world free of these devastating diseases.

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5

2012 Progress Towards London Declaration 2020 Goals

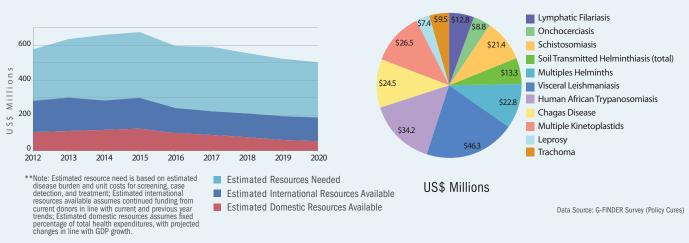
Diseases		WHO Coverage & Impact Milestones	Drug supply	Research Milestones*	Program Support Milestones	Description of Status (2011 data unless noted)
Lymphatic Filariasis						538 million people treated in 53 of 73 countries (39% coverage)
Trachoma						38.6 million cases treated in 37 of 51 countries
Soil Transmitted Helminthiasis						275 million children treated in 64 countries (31% coverage)
Onchocerciasis	Africa					80 million treated (77% therapeutic coverage
	Americas					96% of at-risk population no longer requires treatment (2012)
Schistosomiasis						33.5 million treated in 28 countries, of 237 million requiring treatment
Leprosy						219,075 new cases detected, ~100% of new cases treated
Guinea Worm						541 cases in 2012 (preliminary data), 49% decrease from 2011
Visceral Leishmaniasis						62,800 cases treated
Chagas Disease						~8,500 people treated
Human African Trypanosomiasis						6,743 cases reported (6,631 T.b. gambiense 112 T.b. rhodesiense), ~100% treated

delay; or 90-100% of requested treatments shipped anticipated; or 80-89% of requested treatments shipped Delayed, additional action required; or 0-79% of requested treatments shipped Not applicable, or no target identified Based on preliminary data

6

*Five additional research milestones are for multiple diseases. Three of five are delayed.

Estimated Implementation Funding Gap for NTDs Programs**



Research & Development Funding by Disease (2011)

This report and the London Declaration Scorecard were compiled by The Uniting to Combat NTDs coalition of private and public sector organizations. These organizations are among those that have endorsed the London Declaration on NTDs. For more information and for links to other NTD related material, please visit: www.unitingtocombatntds.org