

The role of community case finders in accelerating and sustaining gains in Trachomatous Trichiasis (TT) management in Tanzania

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ABSTRACT

Trachomatous trichiasis (TT) is the inward growing of eye lashes that scratches the cornea and causes pain to the patient. If it is not managed, it can lead to irreversible blindness. It is a health condition resulting from the neglected tropical disease trachoma, and a WASH-born problem that affects mostly poor families especially in villages. For the past six years, IMA has been working with the Tanzania Ministry of Health and other partners to implement the WHO endorsed SAFE (surgery, antibiotics, facial cleanliness, environment) strategy to provide life-changing surgeries for those suffering from TT. The program involves searching for patients, treating, and following up on them to ensure full recovery, leveraging community case finders in each village as volunteers. The quality and success of community mobilization, access to patients, and post-surgery care is greatly due to community case finders.

IMA World Health has trained 1,590 (795 male, 795 female) community case finders in six district councils of Mtwara Region, and for the last five years they have visited 238,400 households and screened 475,896 people. They have referred 35,891 patients to surgical outreach camps for TT management. Out of those, 7,603 patients were confirmed with TT, and the program managed their cases. After surgery, the program used community case finders to communicate to patients regarding medication and proper home care, as well as following up on the recovery of all patients who received TT surgery in Mtwara Region. Operational research to improve services and surgical audits for quality assurance of services used the same community case finders to link with patients and communities. In this study, we will present data on activities and outputs to showcase the role of community case finders for management and linkage to TT patients in Mtwara region over the past five years.

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