WASH impact on the elimination of trachoma: Positive changes between impact and surveillance surveys in Tanzania





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Introduction

The World Health Organization (WHO) recommends a surveillance survey two years after the last trachoma impact survey, which showed a result of trachomatous inflamation – folicular (TF) prevalence <5%. Both surveys evaluate the prevalence of TF, trachomatous trichiasis (TT) and water, sanitation and hygiene (WASH) indicators. Trachoma is considered endemic when disease prevalence in a specified area is at or above 5%. The Tanzania Neglected Tropical Disease Control Program (TZNTDCP) investigated the prevalence of TF and TT in people aged ≥1 in six districts. Impact surveys were completed in 2015 and surveillance surveys in 2018.

Objective

To evaluate the use of improved water sources and sanitation facilities, and their effect on trachoma prevalence in six districts of southeastern Tanzania.

Methodology

Two-stage cluster survey sampling was used. In the first stage, 25 clusters in one district were selected by Probability to Population Size and in the second stage 35 households in each cluster were selected by systematic random sampling.

In each selected household, all individuals age 1 year and above were included in the survey. The heads of households were interviewed on issues of water and sanitation, and categories of available sanitation facilities and water sources were recorded by observation.

Results



Photo 1: Trachoma survey team grader and recorder screen for disease

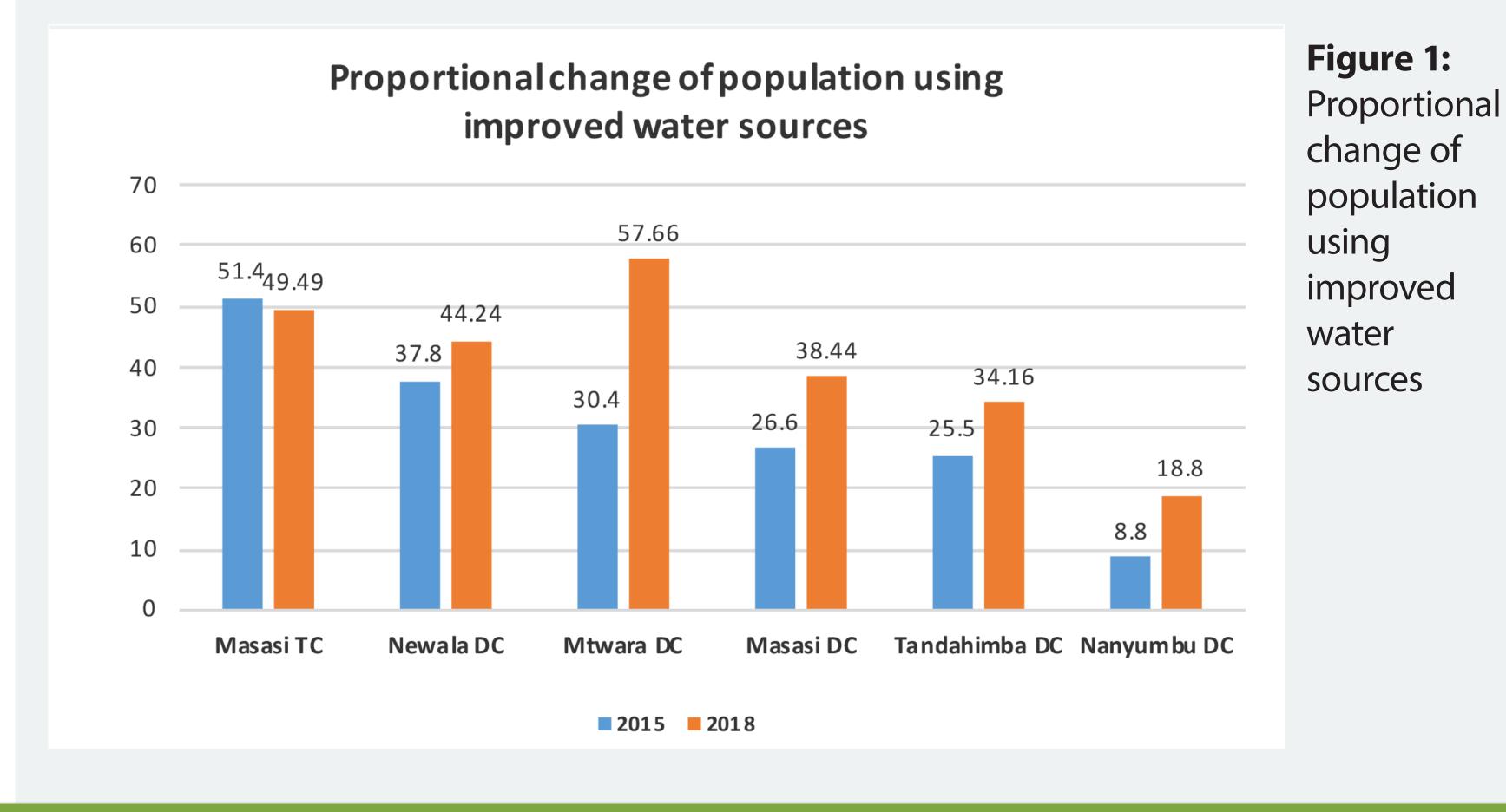
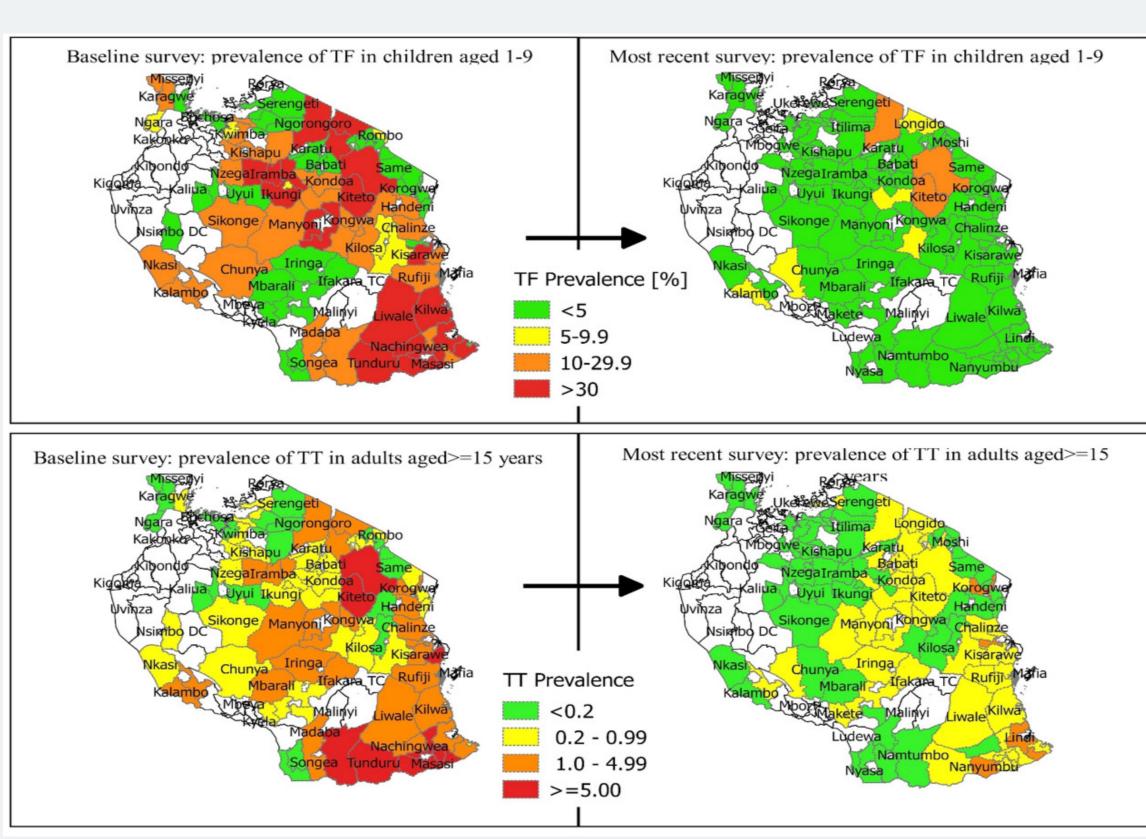


Figure 2: Tanzania's progress toward trachoma elimination, 2014-2018



Approximately three years following the trachoma impact survey, the surveillance survey showed an increased proportion of the population using improved water sources in six districts.

Conclusion

The results suggest that WASH activities are being undertaken in these formerly endemic districts which have attained the criteria for stopping mass drug administration to prevent trachoma.

Using improved water sources will significantly contribute to keeping the TF prevalence below 5%. WASH activities should continue and should be sustained so that trachoma may be eliminated in Tanzania by 2020.

Acknowledgements













