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**AMREF**

**KENYA**

# Trachoma - the forgotten public health problem in Kenya

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## Background

- Trachoma is the second leading cause of preventable blindness in the world
- 500 million people are at risk and 150 million are affected
- Trachoma is endemic in 50 countries including Kenya
- Affects mainly Children 5 years and below and women from poor societies
- About 35,000 people are blind due to trachoma in Kenya

## Methods:

- Pilot project started in 1997.
- Project location Magadi division, Kajiado district, Rift valley province
- Trachoma interventions are integrated with primary healthcare activities.

## Objectives:

- To Promote SAFE interventions among the target population
- To provide health education and promotion
- SAFE interventions include: S= eye lid surgery, A= antibiotics, F= Face washing, E= environmental improvement and education

## Results:

- 85% increase in SAFE awareness among the target population
- Reduced prevalence of blinding trachoma (TT) in the intervention area
- 400 community health monitors (volunteers) have been trained in SAFE and remain active
- 34% increase in trichiasis surgery coverage
- 4,000 TEO distributed annually
- 40-78% increase in face washing using leaky tin

## Challenges:

- Mobility increases cross-transmission
- Poor compliance to Tetracycline eye ointment (TEO)
- Lack of adequate water supply and hygiene practices among the target group
- Entrenched cultural practices, such as co-habitation of people and cattle and poor acceptance of latrines reduces effectiveness

## Lessons learned

- SAFE interventions are feasible in nomadic pastoralists, however cross migration reduces the impact of the interventions
- Leaky tin maximizes water use in poor water resources settings.
- Low compliance to tetracycline eye ointment (TEO) remains a major challenge and hence the need for alternative antibiotic such as azithromycin.
- Use of colored beads for data collection and IECs for IEC improves effectiveness



E= Health education in school (PHASE)



F= Face washing using leaky tin to conserve water and prevent contamination



A = Community health worker examining an eye, TEO is used for active infection

## Main activities:

- Testing the feasibility of community - based trachoma control model (SAFE)
- Community mobilization and health education
- Training of community health volunteers (monitors) at household level and community supervisors (motivators)
- Eye assessment and classification using WHO criteria, treatment of active trachoma (TF/TI) and referral of scarring trachoma (TT) for surgery, and cataract harvesting
- Personal Hygiene and Sanitation Education (PHASE) at schools.



S= Surgery: A health worker performing lid surgery

## TRAINING TOOLS



Data collection using beads, explain color coding



Information, Communication and Education (IEC) material "Lessons"