

Trachoma Impact & Surveillance Survey (TIS and TSS) Failures in Tanzania: What Do Recent Investigations Reveal?

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ABSTRACT

Tanzania has reduced the number of districts requiring mass drug administration (MDA) for Trachoma by 90% (from 71 to 6 districts). These districts have successfully passed the Trachoma Impact Survey (TIS), indicating continuing transmission cannot be sustained. Despite this progress, the Tanzania Neglected Tropical Disease Control Program (NTDCP) must still address districts where Trachoma transmission persists. Four districts failed TIS in 2014, 2016, and 2019 while two districts failed the Trachoma Surveillance Survey (TSS) in 2019, two years after stopping MDA. After failures in 2019, the NTDCP conducted key informant interviews, MDA coverage history, health-facility MDA coverage, and coverage evaluation surveys to identify possible reasons for failures and explore appropriate actions to improve program effectiveness. The program further conducted a desk review to identify critical reasons and factors that have contributed to the failure. During the desk review, the Tanzania NTDCP and partners analyzed data from surveys and MDA conducted in these four districts. The data revealed that all districts have Trachoma follicular (TF) baseline prevalence of >20% in children of 1-9 years of age, though all districts reported MDA coverage of 80%. However, districts reported skipping at least 1 round of MDA. In addition, the data showed low access to water (6-28%) and sanitation (4-29%) in these areas. The four main reasons for non-compliance are absenteeism, incorrect perceptions of MDA, lack of information on MDA, and lack of drug inventory. The data identified some challenges during MDA implementation, such as limitations to comparing national and local data over years, an insufficient number of community drug distributors (CDDs) and MDA supervisors, and Tetracycline not used in MDA of those not eligible for Zithromax. Based on the desk review results, recommendations have been made to the NTDCP to promote increased access to the facial cleanliness and environmental improvement components of the SAFE strategy to decrease trachoma infections in these four districts.

