

# Reducing Blinding Trachoma in Ethiopia

## The impact of the Amhara Trachoma Control Program, 2018–21

CBM Australia has supported the Amhara Trachoma Control Program (ATCP) - a four-year project designed to reduce the spread of blinding trachoma in 12 areas in the Amhara region of Ethiopia.

The project sought to reduce the prevalence of blinding trachoma by raising awareness about how the disease is transmitted due to poor hygiene. Communities saw improvements through better water supply, improved hygiene and sanitation, health services that were more accessible, and screening and referrals for treatment for people with active trachoma. In 2020 as COVID-19 emerged as an additional threat, this reinforced the need for good hygiene behaviours.

### Preventative medication means less disease

Preventative trachoma medication was made available in the targeted communities, with 141,000 people accessing the medication over the project period. This amounted to 89% of the community, which exceeded WHO's recommended coverage rate of 80%. The project team placed particular emphasis



on ensuring that these Mass Drug Administration drives included people with disabilities.

Over the project period, 3042 people with active trachoma were identified and treated. Without treatment, blindness would have been the result. Antibiotics was effective for 98% of these cases, with only 2% needing surgery.

***“The project improved the quality of life of people by reducing blinding trachoma”*** - Local health worker

### Clean Water

Around 10,000 people in rural villages now have access to clean drinking water, through 20 village water supply schemes, which have been constructed with community labour and local materials. Water quality is assured, while new pumps and taps mean that women and girls no longer have to walk long distances to collect water. People with disability are also able to access these water points.

***“Now, my family fetches at least 3 to 4 jerricans a day from the new water source for cooking, drinking, washing clothes, and taking a bath. My children are keeping healthy because they wash their faces and get a bath more often”*** - Community woman



***“Due to the water scheme, we started to drink clean water, free from mollusc and snails. We thank you indeed”*** - Local leader

### **4000 household latrines**

In 2018, around one third of households in the community did not have a toilet (pit latrine). Reasons for not having a latrine were lack of space (48%), lack of someone to construct it (21%) or unavailability of construction materials (13%). With support and encouragement

of the project, now 80% of households in the target area have a pit latrine – that’s 4,000 new latrines that the community has installed, benefitting around 20,000. With a such a big reduction in open defaecation around villages, the locality is cleaner and the spread of diseases, including trachoma, is reduced.

### **Toilets in schools**

Five primary schools now have new disability inclusive toilet blocks, designed with ramps for greater accessibility. With nice toilets, complete with simple hand washing facilities, brooms, mops, mirrors and water storages, children are no longer going to the toilet in the bushes around the school. This is benefitting 2,400 children, meaning kids are less likely to get sick and miss out on school. Girls are more likely to go to school if there is a toilet.



### **Flow on effects: more girls in school**

Having better water has more impacts than just reducing disease spread. The project team reports that it is leading to increasing enrolment and attendance of girls in schools.

“As soon as a water scheme was installed in a rural village, more girls started going to school. This is because now girls don’t have to spend time walking long distances to fetch water.” – Project worker