



The Download Aug 2018

Message from the Chief Scientist

2018 has already been a busy year for Tropical Data and a truly historic time for our joint, global mission to eliminate trachoma.

Through four Super Training sessions we have expanded our network of people supporting the collection of high-quality trachoma prevalence data. From the sessions that ran in the Pacific Islands, South America and Africa, a total of 151 people have been successfully trained at the various levels: grader trainers, graders, recorder trainers and recorders. A particular highlight was our first joint Anglophone and Francophone training! I'd like to thank Shea Flynn from RTI International for her hard work in organising these trainings sessions and wish her the best as she starts her Masters.

In this issue, we share a snapshot of some of the work that has been happening in Niger, as well as tips for preparing your protocol.

Thank you for your continued partnership, support and feedback. We look forward to an even more productive 2018 and beyond!

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EMMA

Protocols

You can find guides to Tropical Data trachoma budget planning, methodology builder template and survey protocols on our website: tropicaldata.knowledgeowl.com/help Please do get in touch with any feedback to help us refine and improve these tools.

Key things to keep in mind when preparing your protocol:

- Establishing your protocol early, before finalising the budget, helps ensure that the two align.
- Once drafted, upload your protocol at application.tropicaldata.org, and Tropical Data epidemiologists will help make sure it meets WHO recommendations.
- WHO defines an Evaluation Unit (EU) for trachoma elimination purposes as "the normal administrative unit for health care management, consisting of a population unit between 100,000-250,000 persons."
- The population-based prevalence survey methodology uses a two-stage cluster random sample with probability of selection proportional to size.
- In any given cluster the aim is to survey a fixed number of households rather than a fixed number of children.
- Data are recorded for both eyes of residents in randomly selected households:
 - o In baseline, impact and surveillance surveys: presence/absence of TF, TI and trichiasis of all residents aged ≥ 1 year.
 - o In TT-only surveys, trichiasis of all residents aged ≥ 15 years
- Where trichiasis is present, TS status should also be recorded and the person asked if they have ever been offered management.
- Include details on any ethics committee approvals, methods for obtaining consent, and provisions in place to treat individuals with active trachoma and manage trichiasis cases.

To date:

31
countries reached

894
surveys conducted

2,678,603
people examined
for trachoma



Photo credit: RTI International/Shea Flynn

Successful mapping in Niger informs SAFE interventions

Last year, the Ministry of Public Health in Niger started working with the Tropical Data team to conduct trachoma surveys.

As a result of the work, interventions have already been carried out and further surveys are now being planned for 2019 with the support of Tropical Data. Nassirou Beido, Epidemiologist for the National Eye Care Programme said that this joint work: "highlighted the strengths, weaknesses, opportunities and challenges of the elimination programme, thus improving the management of the programme".

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Summary of the work:

- At three different time-points, four types of surveys were carried out: baseline, impact, surveillance and TT.
- Significant progress and efficiencies were made over the course of the surveys, leading to an average data processing time of 13 days (with the shortest being 7 days), meaning that programme decisions could be made much faster.

Success factors:

- Increasingly closer collaboration and regular communication between all stakeholders.
- Learning from each other and sharing of best practices.
- More proactive decisions regarding the most epidemiologically sound way to split large districts.
- Standardised training, capacity building and opportunities to share at the international level.
- Improving the speed and accuracy of data collection using Android smartphones, as well as data management, cleaning, analysis and approvals which are accessed via a dedicated 24/7 online system.
- Support from Niger's Ministry of Public Health, other relevant public service departments in Niger, and country partners to eliminate trachoma as a public health problem in the country.



Photo Credit: Left - RTI International/ Shea Fynn; Right - Emma Harding-Esch



TROPICAL DATA

Tropical Data helps countries to collect high quality data by providing epidemiological, training, logistical and data management support to national programmes carrying out all types of cross-sectional surveys on trachoma. More info at: www.tropicaldata.org