

**REPORT OF THE FIFTEENTH MEETING OF THE
WHO ALLIANCE FOR
THE ELIMINATION OF BLINDING
TRACHOMA BY 2020**

Geneva, 18-20 April 2011

WHO/PBD/GET/11.01

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ABBREVIATIONS

AFE	Antibiotic treatment, facial cleanliness and environmental improvement
AIO	Annual intervention objective
CBM	Christoffel Blindenmission
CDD	Community Directed Distribution
GET 2020	WHO Alliance for the Global Elimination of Blinding Trachoma by the Year 2020
GHO	Global Health Observatory
IAPB	International Agency for the Prevention of Blindness
ICTC	International Coalition for Trachoma Control
ITI	International Trachoma Initiative
LCIF	Lions Clubs International Foundation
MDA	Mass drug administration
MDG	Millennium Development Goal
NGO	Nongovernmental organization
NTD	Neglected Tropical Diseases
PAHO	Pan American Health Organization
PCT	Preventive chemotherapy and transmission control
SAFE	Eyelid surgery, antibiotic treatment, facial cleanliness and environmental improvement
TF	Trachoma follicular
TT	Trachomatous trichiasis
UIG	Ultimate intervention goal
WHO	World Health Organization

• Introduction

The Fifteenth Meeting of the WHO Alliance for the Global Elimination of Blinding Trachoma by the Year 2020 (GET 2020) was held at the International Conference Centre, Geneva, Switzerland, from 18 to 20 April 2011.

The objectives of the meeting were to carry out the Alliance's annual review of progress towards global elimination of trachoma, to review the implementation of the SAFE strategy, to provide an update on the Neglected Tropical Diseases (NTD) framework, to review and report on a number of meetings and activities, and to present the advocacy document on the global elimination of trachoma by 2020. A description of the "Scope and purpose" of the meeting is attached as Annex 1.

The meeting was attended by 88 participants, making this the largest and most representative meeting of the GET 2020 to date. Participants included 43 national coordinators for trachoma control. A full list of participants is attached as Annex 2.

Dr Boubacar Sarr of Senegal was elected Chair of the meeting and Mr Martin Kollmann (CBM) was elected Vice-Chair. Participants then introduced themselves in turn. A number of administrative announcements were made and the main elements of the agenda were highlighted. Mr Karim Bengraine (LCIF) and Dr. Bernadetha Shilio (United Rep. of Tanzania) were elected rapporteurs.

Dr Ala Alwan, Assistant Director-General of the World Health Organization (WHO), responsible for Noncommunicable Diseases and Mental Health, welcomed participants on behalf of the WHO Director-General. Dr Alwan stressed the importance of the Alliance in combating trachoma worldwide and particularly highlighted the significance of surgical care in saving sight. He emphasized the need to establish links at national level with national services that provide these services, and to seek for synergies with other disease intervention efforts. Dr Alwan said it was rewarding to see a growing number of organizations working with WHO against blinding trachoma. The World Health Assembly has passed resolutions on blindness in the past and it is encouraging now to have milestones and targets for the Action Plan against avoidable blindness. He encouraged the Alliance to keep focused on its task and to multiply its efforts because through the Alliance's work the elimination of trachoma by 2020 is achievable.

On behalf of Dr Hiroki Nakatani, Assistant Director-General of WHO, responsible for HIV/AIDS, Tuberculosis, Malaria and Neglected Tropical Diseases, Dr Lorenzo Savioli also welcomed participants. He pointed out that trachoma is now an integral part of the global strategy for the control of Neglected Tropical Diseases (NTDs), in which trachoma is one of 17 NTDs. Preventive chemotherapy is one of the important components of the NTD strategy, but for trachoma this has to be seen as part of the integrated SAFE strategy that includes prevention and treatment components.

• Report from the WHO Secretariat

Dr Silvio Paolo Mariotti, Medical Officer, GET 2020 Secretary, World Health Organization, Geneva, Switzerland

Dr Mariotti began the report by expressing thanks to the large number of participants attending the meeting. He said there were 88 participants present and it was very gratifying to see so many people taking part. Tracing the history of GET 2020, he showed how attendance at the annual Alliance meetings had steadily risen from 39 (including four country representatives and 17 representatives of NGOs/interested parties) in the first GET 2020 meeting in 1996 to 88 participants (including 43 out of 57 suspected endemic country representatives and 45 representatives of NGOs/interested parties) in 2011. In particular, there had been a steady increase over the past six years (though attendance in 2010 was down from the general trend due to travel difficulties caused by the volcanic eruption in Iceland).

Trachoma monitoring forms

Trachoma monitoring forms are the WHO GET2020 tool to monitor progress towards ultimate intervention goals (UIGs) and annual intervention objectives (AIOs) at national and global levels. With full integration of trachoma into the global NTD framework, data at district level are crucial for operational decisions and monitoring. Thus, timely completion of the forms and the involvement of implementing partners are essential so that complete and consistent information can be provided. Trachoma monitoring forms are being received from a growing number of countries. Forty-two out of 44 forms have been received in 2011, of which most have been received in good time. An increasing amount of data is now becoming available on the basis of surveys which was a great improvement on the situation of several years ago when most data were based on estimates. Data are cross-checked with other implementing partners such as the International Trachoma Initiative (ITI) that share their programme data with WHO.

Dr Mariotti reminded participants of the elimination targets of various countries. Ghana, Iran, Morocco and Oman have already achieved elimination; 34 countries have target dates ranging through to 2020. Of these eight countries have target dates in the years up to 2014, 14 countries have 2015 as their target date, one has 2018 as its target date, and 11 have chosen 2020 as their target for elimination (though four of these are not confirmed). Twenty-six countries have endemic trachoma in more than 10% of districts, 15 countries have it in more than 30% of districts, and four countries still have endemic trachoma in more than 50% of their districts. Data on the coverage of districts with AIOs for surgery showed that 20 countries were past the 50% mark, and that five countries had reached 100%. Coverage of AIOs for antibiotics was over 80% (the target) in 15 countries, and coverage of AIOs for facial cleanliness was past the 80% target in 17 countries.

A review of the trachoma monitoring forms showed that targets for the provision of antibiotics are more likely to be achieved than targets for surgery, which takes longer. Many countries now include trachoma prevention in their national planning, though there is concern that AIOs should include targets that are achievable, and planned interventions are more realistic than in the past. Political support has increased since trachoma control was integrated into the NTD framework. However, some challenges remain. Not all countries have baseline data and have therefore not received the donation of azithromycin since they do not have the data available to do planning. Also, while data sharing at national and international levels has improved considerably, and there is an increased amount of data on district-level coverage, data sharing has still not been fully achieved. Additionally, the extent of government investment in national programmes remains variable.

Recent events

Dr Mariotti informed participants of a number of recent events and activities, namely:

- The 3rd Global Scientific Meeting on Trachoma was held in Baltimore in July 2010.
- Surveillance plans were developed in Ghana and Mali.
- China committed itself to trachoma elimination with a target date of 2016.
- Major bilateral donors included SAFE as the strategy for trachoma.
- The Pan American Health Organization (PAHO) started planning for the elimination of trachoma in the Americas region in 2010.
- In the Pacific islands, partners began working for the elimination of trachoma.
- The WHO-NTD roadmap is being developed, with tools for funding gap analysis and monitoring and evaluation.
- The web page of the WHO programme on the Prevention of Blindness and Deafness (PBD) has been revised and would be updated in the coming month.

Recommendations from the 14th meeting of GET 2020

Dr Mariotti reviewed the 10 recommendations from the 14th meeting of GET 2020 in 2010. Most of those requiring action from the Secretariat had been dealt with.

Discussion

It was pointed out by participants that trachoma control is much more than chemotherapy and that it would be useful to know the epidemiological situation for the SAFE strategy as a whole. Dr Mariotti said that the Secretariat had been requested to update the data on SAFE and was doing so. However, staff resources were limited so everything could not be done at once. The next step

was to update the global epidemiological data on trachoma in order to enable WHO and the Alliance to make more accurate assessments.

Concern was expressed at the fact that coverage with antibiotics and surgery seemed to have declined since 2009. It was explained that this was not simply a problem at national level but at village level. Countries do not always have the latest figures, and the figures supplied to WHO by countries often do not match those provided to WHO by Alliance partners. The Secretariat therefore had to do a lot of checking in order to establish the real situation. The apparent decrease in surgery was possibly due to better data becoming available and to the increase in preventive efforts in recent years.

Participants requested that they should receive copies of all the presentations given during the meeting, and this was agreed subject to the presenters giving their permission. There was also a request that the report of the previous meeting should be made available to Alliance members before the start of the next one. This had not been possible in the case of the report of the 14th GET 2020 due to a problem with a link on the Alliance web site. However, Alliance members were informed that the report of the 15th GET 2020 would be available within eight weeks of the end of the meeting.

• Integrated control of neglected tropical diseases

Dr Aya Yajima and Mr Alexei Mikhailov, Department of Control of Neglected Tropical Diseases, World Health Organization

Dr Aya Yajima and Mr Alexei Mikhailov described some of the challenges in the area of control of NTDs. For instance, there are limited resources both in the Ministry of Health and in donors and partners, there is increasing competition for funding with other health programmes (or even with other countries), many vertical disease programmes operate individually, and partners operate through a variety of activities in different locations and at different times (and sometimes for different goals).

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