



Blinding Trachoma in Mali

The International Trachoma Initiative (ITI) is dedicated to eliminating blinding trachoma, the world's leading cause of preventable blindness.

Trachoma can be prevented and cured with inexpensive, time-limited treatment. ITI's work is grounded in the WHO-endorsed strategy called SAFE: **S**urgery for trachomatous trichiasis (TT), **A**ntibiotics (Pfizer-donated Zithromax) to treat active infection, **F**ace-washing to reduce transmission, and **E**nvironmental improvement through access to clean water and better sanitation.

Blinding trachoma is a disease of poverty that affects 63 million people, mostly women and children, in 56 countries. Building on trachoma elimination success in Morocco, ITI currently works in 15 of the countries most affected by trachoma, including Mali, where it has had a country office since 2000.

The Government of Mali (GOM) has demonstrated a strong commitment to eliminating blinding trachoma by 2015, five years ahead of the GET 2020 target. ITI works to directly support the GOM's National Blindness Prevention Program and its partners to provide sight-saving TT surgeries ("S") and to distribute Zithromax ("A"). ITI also advocates for and helps establish the partnerships necessary to address the "F" and "E" components of SAFE.

In addition to being heavily affected by trachoma, Mali is also endemic for many other Neglected Tropical Diseases (NTDs). Through its support for two NTD projects in the country, ITI is building upon existing synergies between trachoma and other NTDs to accelerate their respective elimination goals. A major research grant from the Bill & Melinda Gates Foundation is allowing ITI and the GOM to explore the feasibility of integrating prevention, treatment, and management of trachoma and another NTD, lymphatic filariasis, in the Sikasso region. ITI also supports the implementation of a national USAID-supported program for integrating mass drug administration for five NTDs in five regions.

TRACHOMA IN MALI



Mali Population: 12,649,860ⁱ

Mali Rank on Human Development Index: No.173 of 177 countriesⁱⁱ

Infection:

- More than 24,000 Malians have been blinded by trachoma.ⁱⁱⁱ
- 65,010 Malians have trichiasis^{iv}, the advanced stage of trachoma, and need immediate surgery.
- Over 6.6 million Malians are at risk of trachoma infection. The national prevalence rate for the advanced stage of the disease, trachomatous trichiasis (TT), is 2.51%.^v

- 36% of children aged 1-9 have active trachoma.^{vi}
- Trachoma is endemic in 37 of Mali's 59 Districts.^{vii}

ITI Activities:

- In 2007, ITI supported the administration of 1,767,877 Zithromax treatments.^{viii}
- ITI-supported partners performed 2,916 TT surgeries in 2007.^{ix}
- Mali's National Five-Year Strategic Plan for Trachoma Control, with support and collaboration with ITI, Malian government and other partners, has enabled the national trachoma control program to make great strides towards eliminating blinding trachoma in Mali by 2015.^x

Opportunities:

- Activities for control of five Neglected Tropical Diseases (NTDs)—trachoma, lymphatic filariasis, onchocerciasis, schistosomiasis and soil-transmitted helminthes—are being integrated, due to these facts:^{xi}
 - Many of these diseases overlap geographically.
 - Some of the NTD programs use the same drugs for treatment and the same health workers and community based volunteers for drug delivery.
 - Integration of personnel, drugs, logistics and funding for these diseases maximizes resources and impact of the NTD initiatives.
- Integrated MDAs will extend to other endemic districts over the next four years, allowing coverage to be expanded into regions not yet been reached by the trachoma program.^{xii}

Challenges:

- The remaining national TT surgery backlog is 65,010.^{xiii}
- 3 times as many women suffer from trichiasis and ensuing blindness than men.^{xiv}
- There are only 31 ophthalmologists in Mali.^{xv}
- An estimated 34% of the population is without access to a functional water source within 1 hour travel time (or 1 kilometer). (2007 estimate)^{xvi}
- An estimated 23% of households are without a latrine, or without access to a functional latrine. (2007 estimate)^{xvii}
- 80% of the population share is rural^{xviii}, with 10 percent being nomadic^{xix}, leading to conditions ripe for trachoma infection.
 - Access to improved water source is only 35% rural as opposed to 76% urban.^{xx}
 - Only 45 percent of the population has access to adequate sanitation facilities.^{xxi}

To speak to ITI's country representative in Mali or for more information on trachoma control in Mali, please contact Geoffrey Knox at +212-229-0540 and gknox@geoffreyknox.com or communications@trachoma.org.

The International Trachoma Initiative (ITI) is a non-governmental organization working to prevent, treat and ultimately eliminate blinding trachoma. ITI currently works in 15 countries in Africa and Asia. ITI is a major proponent and facilitator of the SAFE strategy to prevent and eliminate trachoma through Surgery, Antibiotics, Facial cleanliness and Environmental improvement. ITI, created through a public-private partnership of the Edna McConnell Clark Foundation and Pfizer Inc, collaborates with international agencies, governmental, and non-governmental organizations to build targeted support—including Zithromax® donated by Pfizer—for expanded implementation of the SAFE strategy, operational research and program evaluation, education and advocacy. <http://www.trachoma.org>

ⁱ “Trachoma Expert Committee Fact Sheet 2008.” International Trachoma Initiative.

ⁱⁱ Ibid.

ⁱⁱⁱ National Trachoma Prevalence Survey, 1997.

^{iv} “Trachoma Expert Committee Fact Sheet 2008.” International Trachoma Initiative.

^v “Mali Trachoma Data Form (2008).” World Health Organization Alliance for the Global Elimination of Blinding Trachoma, Twelfth Meeting. Geneva, Switzerland: 28-30 April 2008.

^{vi} Global Health Atlas, 2003. World Health Organization. <<http://www.who.int/globalatlas/dataQuery/default.asp>> accessed 20 April 2008.

^{vii} “Mali Trachoma Data Form (2008).” World Health Organization Alliance for the Global Elimination of Blinding Trachoma, Twelfth Meeting. Geneva, Switzerland: 28-30 April 2008.

^{viii} Ibid.

^{ix} “Mali Trachoma Data Form (2008).” World Health Organization Alliance for the Global Elimination of Blinding Trachoma, Twelfth Meeting. Geneva, Switzerland: 28-30 April 2008.

^x “Trachoma Expert Committee Fact Sheet 2008.” International Trachoma Initiative.

^{xi} Ibid.

^{xii} Ibid.

^{xiii} Ibid.

^{xiv} National Trachoma Prevalence Survey, 1997.

^{xv} Programme de Developpement Sanitaire et Social (PRODESS).

^{xvi} “Mali Trachoma Data Form (2008).” World Health Organization Alliance for the Global Elimination of Blinding Trachoma, Twelfth Meeting. Geneva, Switzerland: 28-30 April 2008.

^{xvii} Ibid.

^{xviii} Ibid.

^{xix} “Republic of Mali, Humanitarian Country Profile, August 2007.” IRIN Country Profile. <http://www.irinnews.org/country.aspx?CountryCode=ML&RegionCode=WA> accessed 21 April 2008.

^{xx} Ibid.

^{xxi} Ibid.

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