

THRIVE
CONTROL
AWARENESS
CARE
HYGIENE
PREVENTION
ASSESSMENT
TREATMENT
ACCESS
PROGRESS



PARTNERS
ON NTDs

END in Africa & TOGO

COMMUNITY
CAPACITY-BUILDING
SUPPORT
HEALTH



ENDINAFRICA.ORG

ACHIEVEMENTS

★ Togo scaled up mass drug administration (MDA) to the national level for all 4 endemic diseases (2008).¹

★ In 2009, Togo stopped MDA for LF after all 8 previously endemic districts passed transmission assessment surveys (TAS).²

★ After a post-MDA TAS verified that LF transmission had ceased, a November 2012 coverage validation survey confirmed that coverage levels met or exceeded World Health Organization (WHO) recommendations in all areas.

¹ Prior to the start of USAID support for Togo's NTD Program

² Ibid.



NTDs IN TOGO

Neglected tropical diseases (NTDs) affect all 40 health districts (HDs) in Togo, putting more than 6 million people at risk of contracting one or more diseases. NTDs are debilitating and disproportionately affect the poor and vulnerable, particularly women and children.

While lack of awareness, unsafe health practices, and limited access to safe water and sanitation continue to present challenges, Togo's NTD control efforts have made good progress, particularly against lymphatic filariasis (LF), which has been eliminated from the country. In addition, nationwide mapping found that trachoma is not endemic in Togo. However, schistosomiasis (SCH), onchocerciasis (Oncho) and soil transmitted helminthes (STH) continue to be threats and require continued attention and support from USAID's END in Africa project and other partners.



ALL **40** DISTRICTS ARE
AFFECTED BY NTDs



6 MILLION

AT RISK FOR CONTRACTING NTDs

CURRENT ACTIVITIES IN TOGO

MASS DRUG ADMINISTRATION

- Support Togo's NTD Program (NTDP) in implementing nationwide integrated, community-based MDA for schistosomiasis, onchocerciasis, and STH.
- Work with the United Nations Children's Fund (UNICEF) Nutrition Program to coordinate distribution of albendazole and vitamin A to children under age five.
- Provide one annual round of integrated MDA for SCH, STH and Oncho, targeting 2.2 million people in 29 districts for SCH; more than 2.6 million people in 35 districts for STH; and more than 2.7 million people in 32 districts for Oncho.³
- Praziquantel, ivermectin, and albendazole will be administered simultaneously.

³ The majority of these treatments will target children and at-risk women. Women of child-bearing age will be treated with medication provided by

- Conduct a second annual round of MDA for STH in 4 districts where at least half of the population has that disease.

DISEASE ASSESSMENTS AND MONITORING

- Continue supporting post-MDA surveillance activities for LF.
- Support the NTDP in establishing 25 school-based sentinel sites for parasitological monitoring of STH, schistosomiasis prevalence and worm burden in school-aged children (SAC)

PHOTO CREDIT
Joseph Koroma of FHI360



- Use sentinel site data to determine whether to resume albendazole treatments in the eight districts that stopped MDA for LF in 2009, based on STH infection prevalence.

TRAINING AND CAPACITY BUILDING

- Train supervisors, trainers, and more than 9,000 community drug distributors (CDDs) in drug distribution protocols, community education, and serious adverse event reporting.
- Conduct supply chain management training for more than 700 central, regional, and peripheral health unit (PHU)-level supervisors.
- Incorporate feedback and a review of the previous year's MDA results and challenges into training curricula.
- Train regional and district accountants on financial management and USAID regulations, including the tool for integrated planning and costing (TIPAC) and the fixed obligation grant (FOG) mechanism.



PHOTO CREDIT
Joseph Koroma of FHI360

- Provide short-term technical assistance to strengthen supply chain management and to develop and implement an Oncho elimination plan for Togo.

NTD PROGRAM SUPPORT

- Support the NTDP in making projections and applying for NTD drugs.
- Support the NTDP and partners at meetings of the Global Alliance for the Elimination of Lymphatic Filariasis; the Joint Action Forum for onchocerciasis control/elimination in Africa; and the American Society of Tropical Medicine and Hygiene; and at other international workshops and WHO trainings.
- Organize and support national work planning meetings.

END IN AFRICA

Funded by the United States Agency for International Development (USAID) and managed by FHI360, the END in Africa project aims to reduce the prevalence of five neglected tropical diseases, including trachoma, onchocerciasis, lymphatic filariasis, schistosomiasis and soil-transmitted helminths, in Togo and four other West African countries (Burkina Faso, Ghana, Niger and Sierra Leone).

As END in Africa project lead, FHI360 provides overall program administration support to Ghana's NTDP, while subgrantees Helen Keller International (HKI) and Health and Development International (HDI) support project operations in Burkina Faso (HKI), Niger (HKI), Sierra Leone (HKI) and Togo (HDI). Other END in Africa partners include John Snow Inc., Deloitte Consulting LLP and Liverpool Associates in Tropical Health, which provide respective support in supply chain management, financial performance, and monitoring and evaluation activities.

END IN AFRICA PROJECT, FHI360

1825 Connecticut Ave., NW
Washington, DC 20009
(202) 884-8000
ENDinAfrica@fhi360.org

www.ENDinAfrica.org
@ENDinAfrica

The program is also supported by several other external and national partners, such as UNICEF, the Hope Educational Foundation, the African Program for Onchocerciasis Control (APOC) and Sightsavers, in part for MDA and survey support and STH mapping.

OTHER NTD
PARTNERS
IN TOGO

