A multi-country protocol development workshop on Community Self-Monitoring (CSM) was launched on July 8th 2013, at the headquarters of the African Programme for Onchocerciasis Control (APOC) in Ouagadougou, Burkina Faso. The five-day meeting, which welcomed five regional Consultants in social sciences and in parasitology and tropical health, is one of the steps of a long process started since 2011.

The issue is that for years, the CSM has been introduced into Community Directed Treatment with Ivermectin (CDTI) to help communities to oversee and monitor the performance of the Community Directed Distributors (CDDs) in order to improve the CDTI strategy. However, introducing the CSM into CDTI has met a number of problems and challenges such as: non-prioritization of the CSM, inadequate human resources, inaccuracy of the APOC guidelines, poor feedback and continued demands of incentives for the CDDs.

According to data collected by APOC in 2011, only 26,549 (16.4%) out of 161,603 communities implemented CSM. The Technical Consultative Committee (TCC) also requested that this operational study be conducted, as there was no documented study on the added value of CSM for CDTI improvement. The present workshop works on recent reviews of country reports which show poor reporting of the process of implementation and how the communities are improving CDTI activities.

The opening session of the workshop was chaired by Dr Afework Hailemariam Tekle, Epidemiologist, on behalf of the APOC Director, Dr Jean-Baptiste Roungou, who was on mission abroad. He insisted on the ultimate goal of this exercise which is, having better understanding of the CSM.

“It will empower the communities. It is a prerequisite to achieve elimination of Onchocerciasis in Africa”. † Thérèse Belobo

† Thérèse Belobo

‡ WHO is not accountable for any erroneous opinions or information expressed or contained in this document.