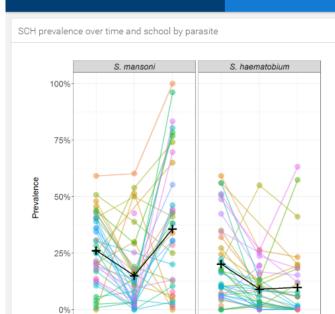
S. mansoni infection categories over time

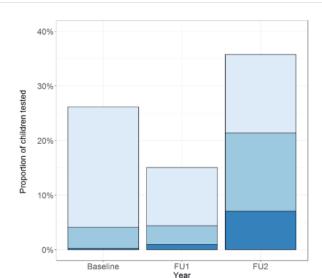


FU2

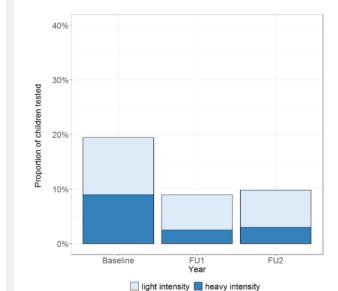
Baseline

FÚ1

FU₂



☐ light intensity ☐ moderate intensity ☐ heavy intensity



Comments

S. mansoni prevalence increased versus the baseline level after having fallen in FU1. S. haematobium prevalence, however, has fallen. Nonetheless, the fall in S. haematobium prevalence is in comparison to the baseline. In comparison to FU1 the prevalence slightly increased.

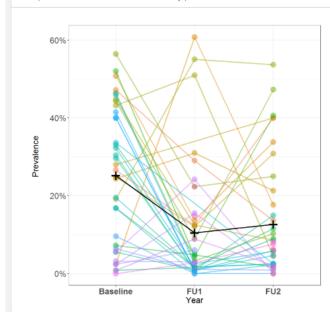
Infection intensity for *S. mansoni* has also increased from baseline to FU2. The proportion of children with moderate intensity infections rose from 3.9% at baseline to 14.3% at FU2. For heavy intensity of infection the proportion went from 0.2% at baseline to 7.0% at FU2.

For $S.\ haematobium$ as well as showing a reduction in prevalence the proportion of children with heavy intensity of infection has also fallen (9.0% at baseline to 3.0% at FU2).

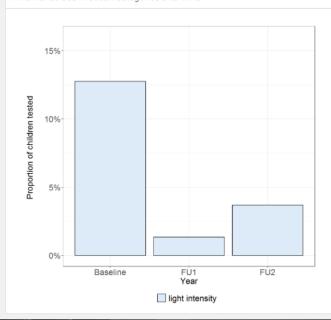


Baseline

FÚ1

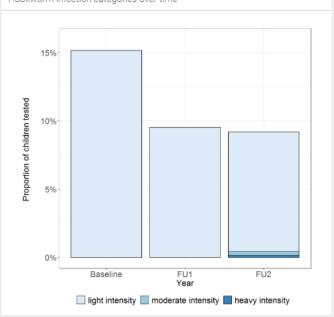






Hookworm infection categories over time

S. haematobium infection categories over time

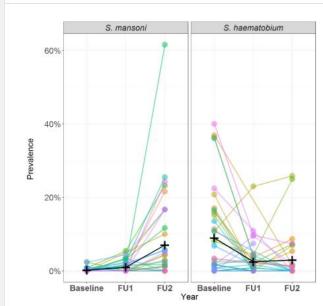


Comments

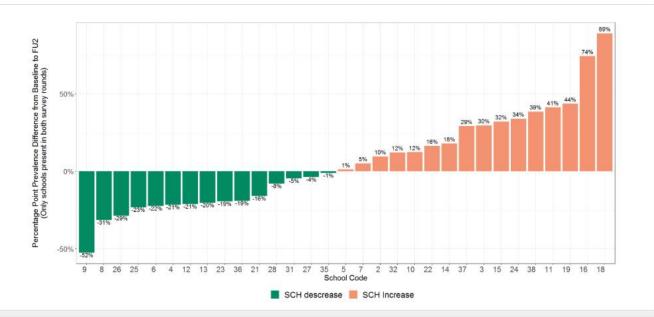
The prevalence of STH has fallen from baseline to FU2 from 25.2% to 12.7%.

The main infections are of Hookworms (15.2% prevalence at baseline to 9.2% at FU2) and *A. lumbricoides* (12.8% prevalence at baseline to 3.7% at FU2). Prevalence of *T. trichuria* is 1.3% at FU2, an increase from the 0.7% prevalence seen at baseline for this disease.





Difference in SCH infection in schools from Baseline to FU2

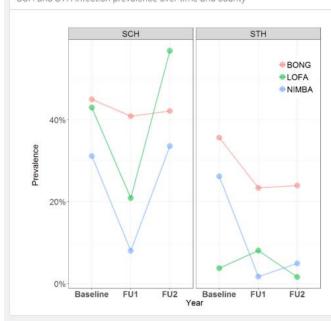


Comments

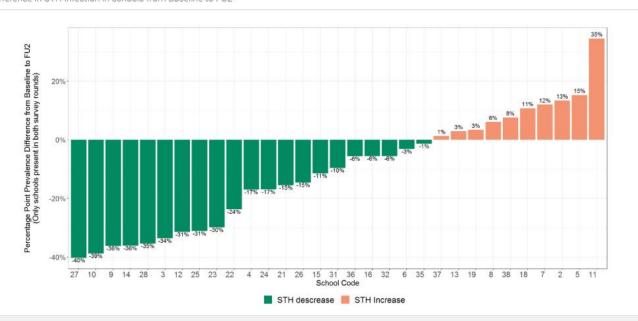
As seen in the category plot, prevalence of heavy infection increased significantly for S. mansoni while they fell for S. haematobium.

The general increases in overall prevalence and that of heavy infections for S. mansoni, masks the underlying variance at school level. The right hand plot shows the percentage point difference for the 31 schools that were part of both the baseline survey and FU2. There was a reduction in prevalence from baseline in fifteen schools and an increase in prevalence in sixteen schools.

SCH and STH infection prevalence over time and county



Difference in STH infection in schools from Baseline to FU2



Comments

The trend at county level is fairly stable for STH, with lower prevalence in FU2 than at baseline.

For SCH it can be seen that prevalence was at the lowest level in all counties at FU1, and has since increased again. In Bong however, the level is still lower than at baseline while prevalence has more than doubled in Lofa and Nimba from FU1 to FU2, with both values surpassing the baseline prevalence.

Comparing STH across schools again highlights the intraschool diversity. While the average prevalence has fallen, still about one third of schools reported higher STH prevalence than at baseline.