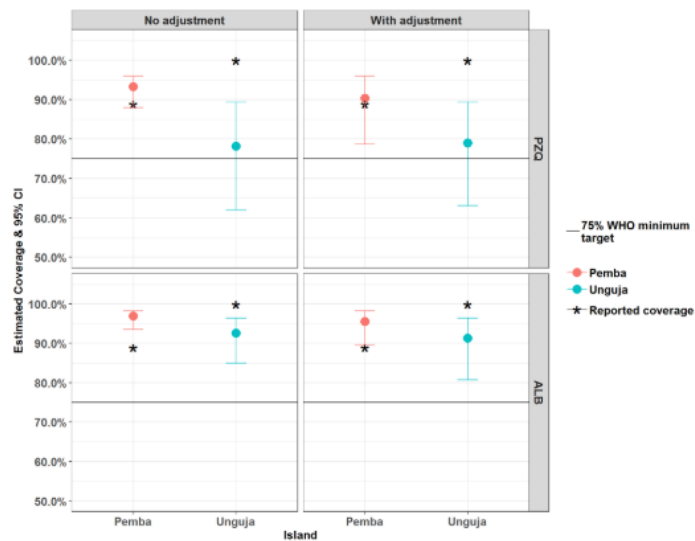
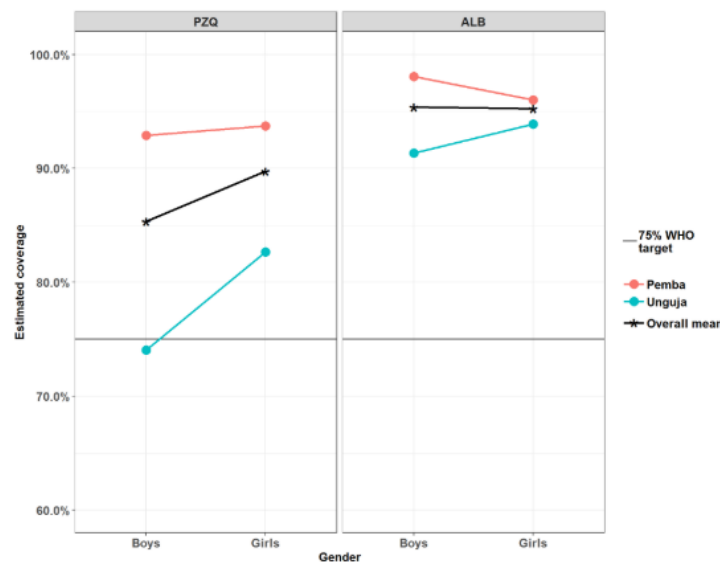


Survey coverage for SAC by island, with and without adjustment for population size



Coverage for SAC split by gender (overall mean in black)



Comments

Coverage in school age children

Island	Reported Coverage	Survey PZQ Coverage (adjusted for population)	Survey ALB Coverage (adjusted for population)
Pemba	88.9%	90.3%	95.6%
Unguja	99.9%	79.1%	91.3%

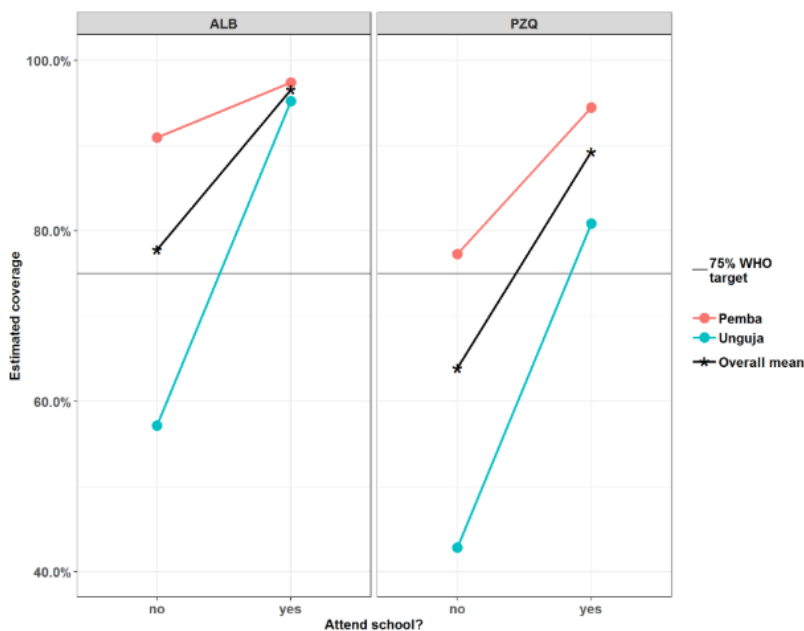
Percentage of non-attending school age children and girls surveyed

Island	Non-attendance	PZQ cov: non-attendance	Girls surveyed
Pemba	6.3%	76%	52.9%
Unguja	6.4%	38%	48.3%

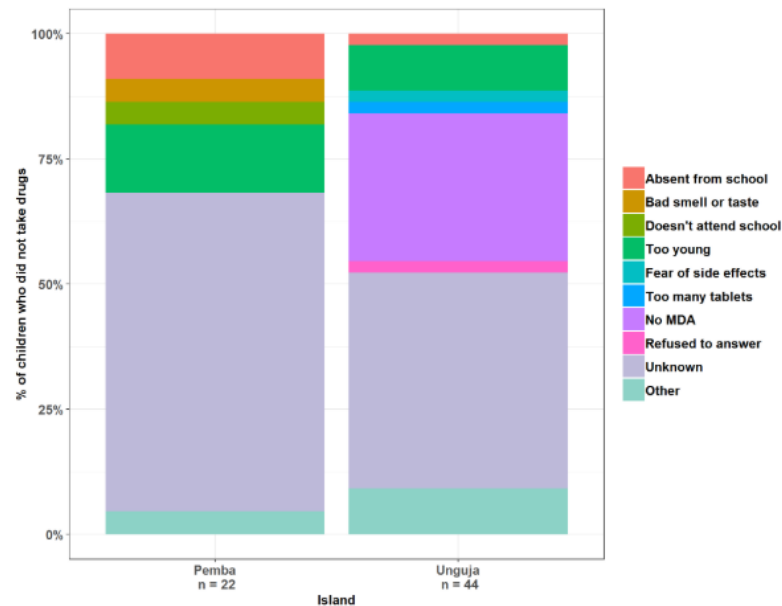
During the 12th MDA on Zanzibar in the first half of 2018 both islands achieved WHO treatment targets for praziquantel (PZQ), reaching over 75% of school aged children (SAC). Survey coverage for PZQ on Pemba was 90.3% and on Unguja was 79.1%. For albendazole (ALB) survey coverage for SAC on Pemba was 95.6% and on Unguja was 91.3%.

On both islands, survey coverage for girls was slightly higher than for boys, 93.7% vs 93.0% on Pemba and 82.7% vs 74% on Unguja. The difference was not statistically significant on either island ( $p > 0.6$ ).

Coverage for SAC split by attendance (overall mean in black)



Reasons for not swallowing PZQ

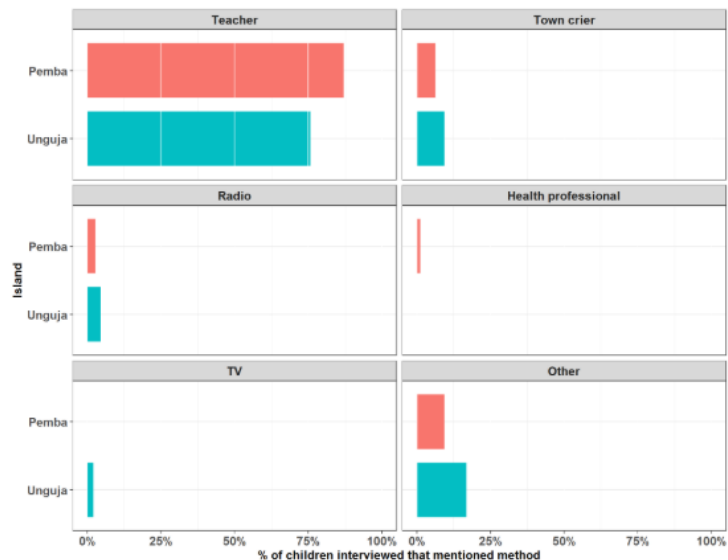


School attendance rates on both islands are very high, 93.7% on Pemba and 93.6% on Unguja. On both islands, children who do not attend school are still less likely to receive treatment ( $p = 0.002$  on Pemba and  $p < 0.001$  on Unguja). Despite this coverage for non-attending SAC on Pemba exceeded the WHO target with 77.2% on non-attending SAC reporting that they swallowed PZQ. On Unguja only 42.9% of non-attending SAC reported receiving treatment.

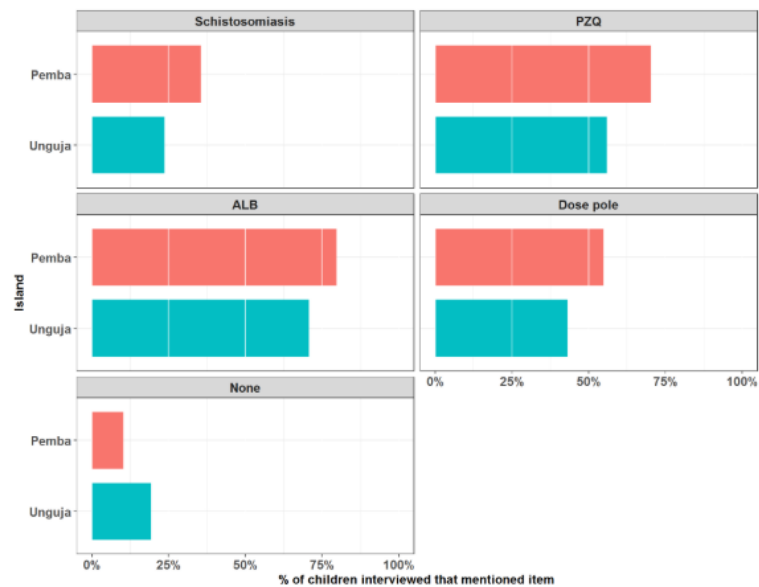
Despite the high survey coverage rates only 70.3% of SAC on Pemba and 55.9% of SAC on Unguja recognized PZQ which is surprising given the size and unpleasant smell and taste of the tablets. Additionally only 54.8% of surveyed SAC on Pemba and 43.1% of surveyed SAC on Unguja recognized the dose pole. This could be evidence of improper dose determination during MDA.

Regarding knowledge of the time and place of the MDA a majority of SAC on both islands (51.5% on Pemba and 61.9% on Unguja) reported that they had no prior knowledge of the MDA (i.e. did not know when or where it was taking place). This could indicate that sensitization methods are not achieving their goals.

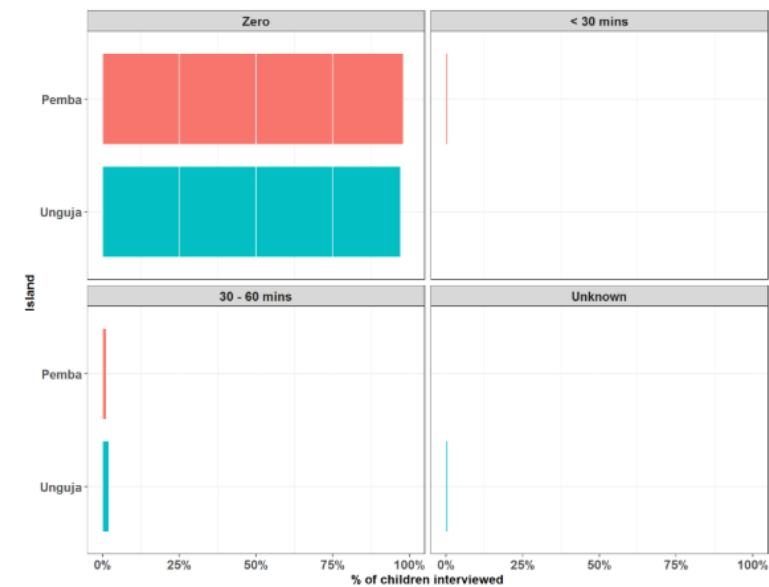
Methods of sensitization for SAC



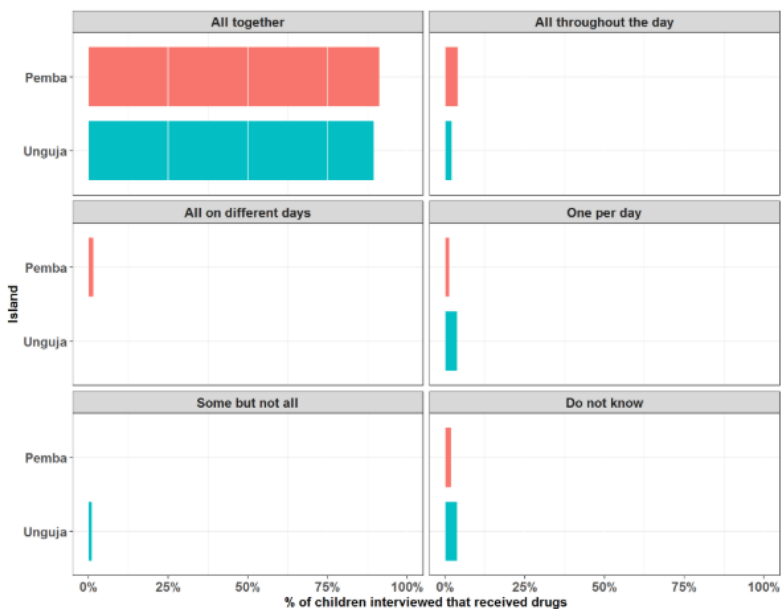
Recognition of words and items



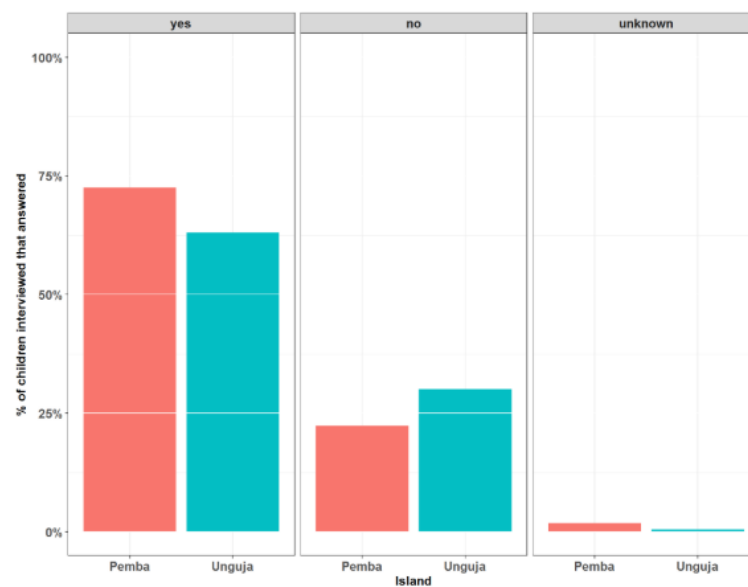
Distance travelled to distribution point



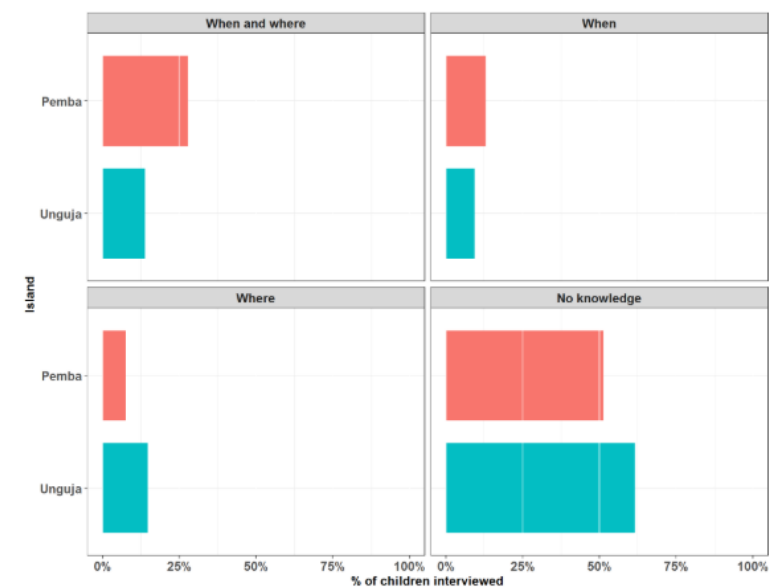
How children took the drugs



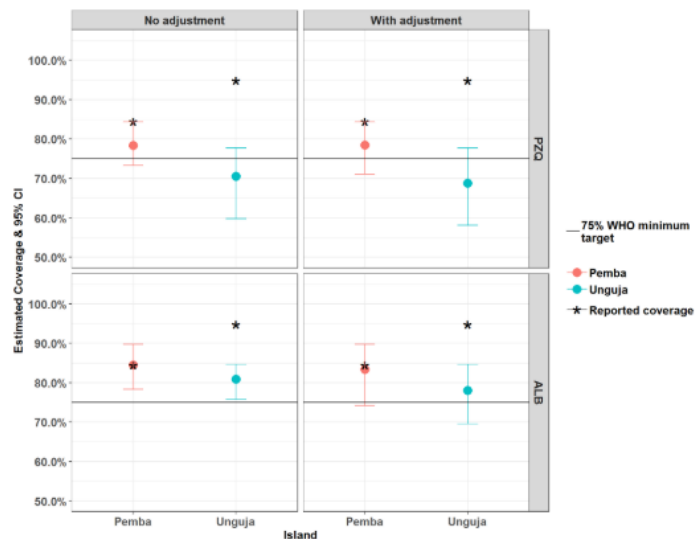
Was the distributor present when drugs were taken



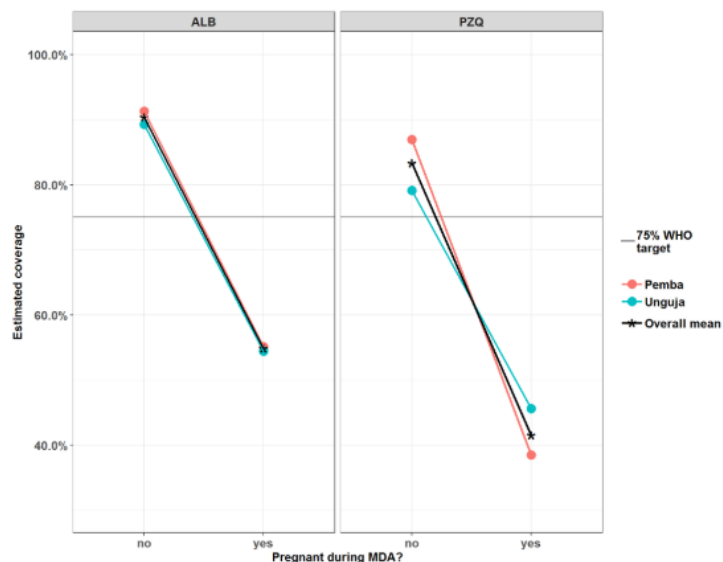
Prior knowledge of MDA



Survey coverage for Adults by island, with and without adjustment for population size



Coverage in adult women split by if they were pregnant during MDA (overall mean in black)



Comments

Coverage in adults

Island	Reported Coverage	Survey PZQ Coverage (adjusted for population)	Survey ALB Coverage (adjusted for population)
Pemba	84.4%	84.4%	89.8%
Unguja	94.8%	77.7%	84.7%

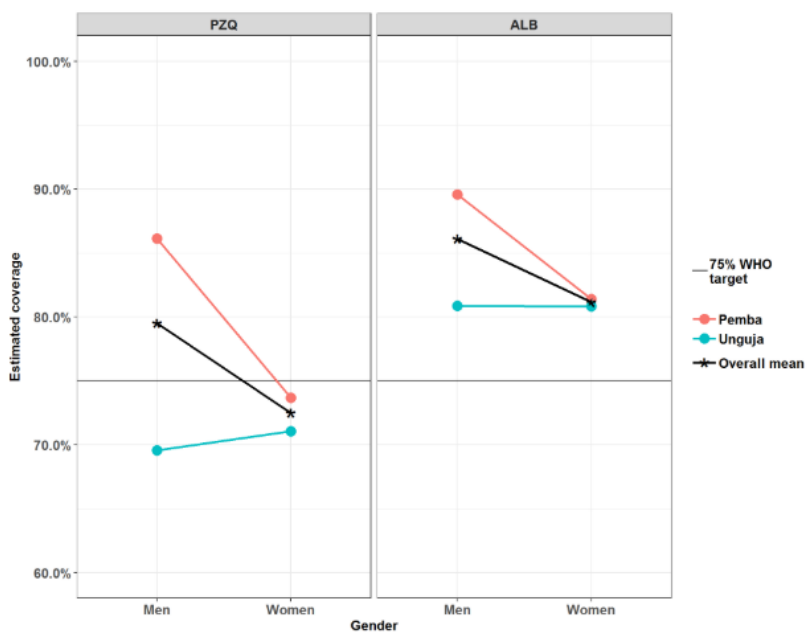
Proportion of women surveyed and impact of pregnancy on coverage

Island	% women in survey	% women surveyed pregnant during MDA	PZQ Cov - Pregnant	PZQ Cov - Not pregnant	PZQ Cov - women overall
Pemba	62.2%	27.4%	38.5%	87.0%	73.7%
Unguja	67.1%	24.3%	45.6%	79.1%	71.1%

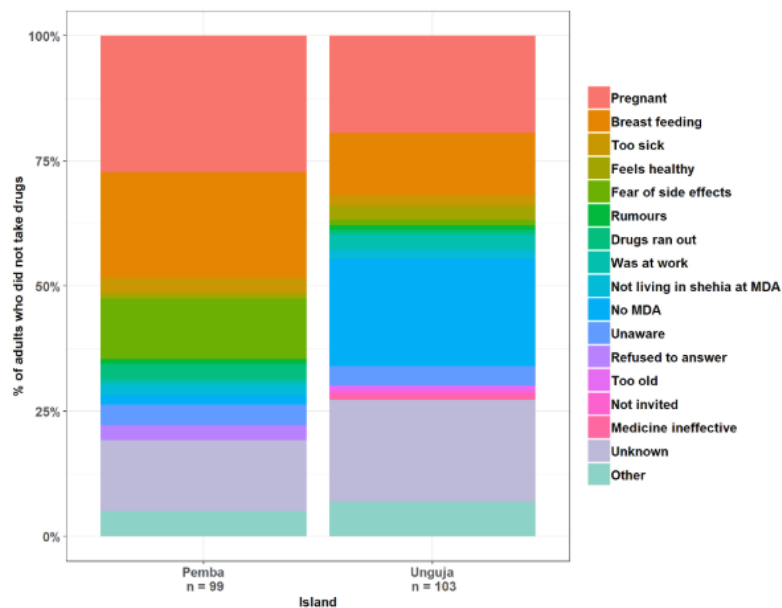
Overall both islands exceeded WHO treatment targets for adults with 84.4% of adults surveyed on Pemba and 77.7% of adults surveyed on Unguja receiving PZQ. For ALB the survey coverage was slightly higher, 89.8% for adults on Pemba and 84.7% for adults on Unguja.

On both islands, more women were surveyed than men, 62.2% of respondents were female on Pemba and 67.1% on Unguja. On Pemba men were more likely to receive treatment than women, 86.1% vs 73.7% ( $p = 0.002$ ). On Unguja women were slightly more likely than men to receive treatment, 71.0% vs 69.6%, however this difference was not significant ( $p = 0.934$ ).

Coverage for adults split by gender (overall mean in black)



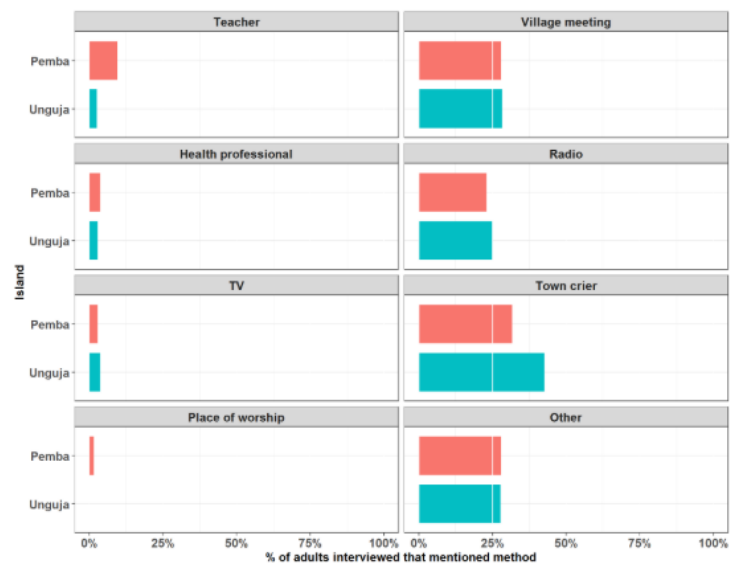
Reasons for not swallowing PZQ



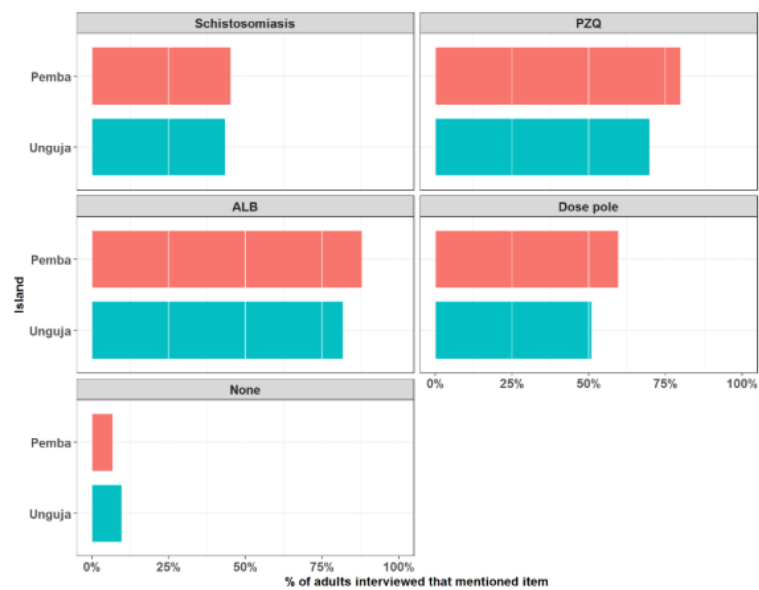
Approximately a quarter of adult women surveyed reported that they were pregnant or breastfeeding during the MDA (27.4% on Pemba and 24.3% on Unguja). The survey coverage for women who were pregnant or breastfeeding during the MDA was significantly lower than women who were not pregnant or breastfeeding on both islands. 38.5% vs 87.0% on Pemba and 45.6% vs 79.1% on Unguja ( $p < 0.001$ ). This could indicate that greater effort needs to be made in familiarising the MDA teams about the WHO's guidance on treatment for pregnant and breastfeeding women. This systematically undertreated demographic could provide a reservoir for continued transmission of schistosomiasis.

More adults than children were aware of when and where the MDA would be taking place, 28.4% on Pemba and 30.0% on Unguja however, 50.0% of adults on Pemba and 41.1% of adults on Unguja reported that they did not know when or where the MDA would take place.

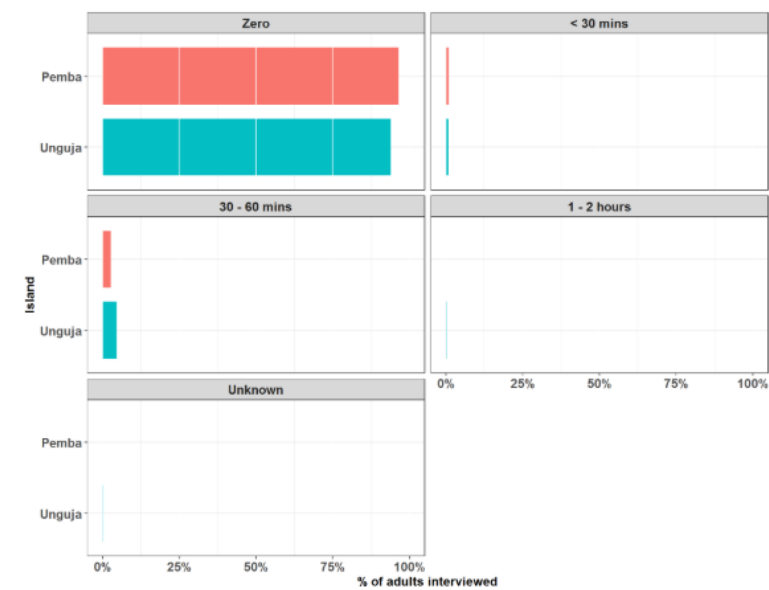
Methods of sensitization for Adults



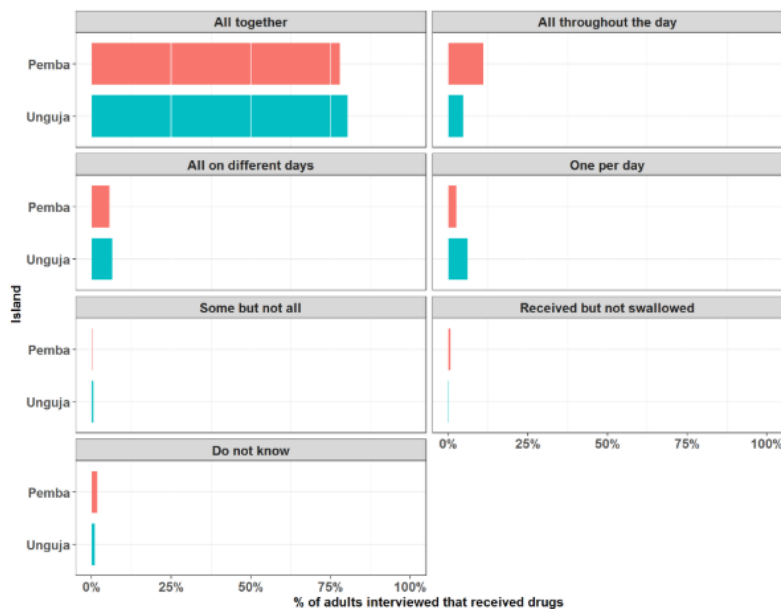
Recognition of words and items



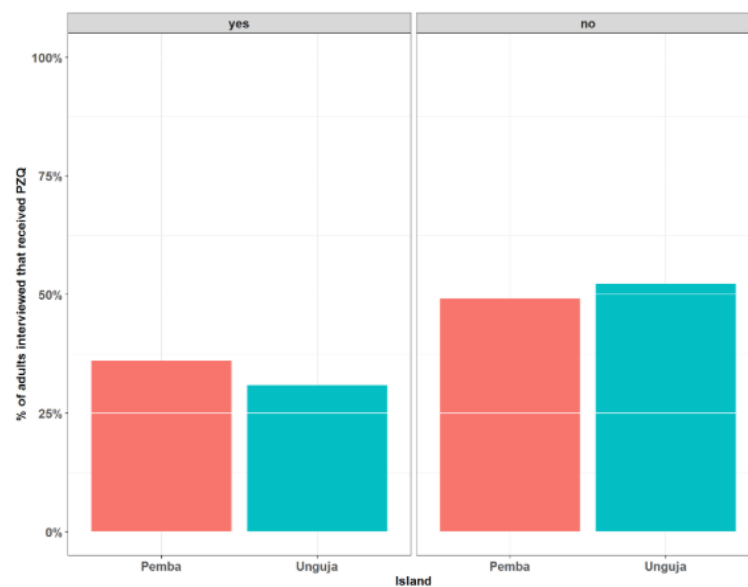
Distance travelled to distribution point



How children took the drugs



Was the distributor present when drugs were taken



Prior knowledge of MDA

