

Abstract

Trachoma is an eye infection caused by *Chlamydia trachomatis*. The World Health Organization (WHO) targets to eliminate this disease by the year 2020. Elimination of the disease is dependent on adequate information on its distribution and risk factors in any specific district. The study aimed at evaluating the socio demographic characteristics of parents and guardians and 1-9 year old children infected with active trachoma in the District as well as to establish the prevalence of active trachoma among 1-9 year old children in Samburu Central District. A cross-sectional descriptive study based on the 30 by 7 cluster sampling method was conducted. Through simple random sampling, 30 Manyattas were selected in the District and 7 children selected randomly from households in each of the Manyattas hence a total of 210 children aged 1-9 years were selected. Parents or guardians who were caretakers of the selected children were interviewed and the children physically observed for signs of active trachoma. An interviewer-based questionnaire was used for data collection. The data was analyzed using SPSS version 15.0 where frequencies were used to calculate the prevalence of the disease while Pearson's correlation (r) and chi-square test were used to evaluate association of risk factors and the disease. The results showed that 23.8% of the children showed signs suggestive of active trachoma. Overall, employment status of the children's caretaker was not significantly associated with active trachoma ($\chi^2 (3) = 4.527, P = 0.210$). There was a higher probability of infection with the disease among children from households that had lived in the district for more years compared with those that had existed in the district for fewer years. Additional results also indicate that there was a significant association between active trachoma and taking a bath using water in a basin rather than flowing water ($\chi^2 (1) = 6.12, P < 0.013$). There was also a significant association between disposing garbage anywhere in the home compound and the disease ($\chi^2 (3) = 7.94, P < 0.047$). Further findings from the study indicate that owning a pit latrine may not automatically result in prevention of active trachoma infections.