

# Supporting National TB Programs to Expand DOTS



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## *PATH to help implement USAID's global TB program*

In September 2004, the United States Agency for International Development (USAID) awarded PATH a five-year, US\$5.9 million contract to help implement its global tuberculosis (TB) program. In the first year, PATH will provide a wide range of technical support to high-burden countries. This support will strengthen countries' capacity to effectively use grants from the Global Fund To Fight AIDS, TB, and Malaria and from existing USAID projects. PATH will also support laboratory assessments, development and implementation of social mobilization activities, and operational research. For more information about this award, please see [http://www.tasc2.org/Documents/GH\\_TB\\_SOW.pdf](http://www.tasc2.org/Documents/GH_TB_SOW.pdf).

In 2003, PATH received an indefinite quantity contract from USAID called the TB Technical Assistance Support Contract (TB TASC2), designed to allow USAID Missions and Bureaus to easily access high quality technical assistance and support for their TB activities. Ultimately, partnering with national TB programs will enable greater capacity for stewardship to lead in-country TB control efforts, which is key to the long-term success of any country program. For more information on this award, please see [www.tasc2.org](http://www.tasc2.org).

## PATH's TB Strategy

PATH works in partnership with national TB and HIV/AIDS programs, the private sector, and local and international technical agencies to help implement and expand DOTS and innovations in DOTS delivery. PATH's TB activities range from baseline assessments and capacity building to project design and implementation. Our strong comparative advantage to support national TB programs in key areas is based on our core competencies:

- 1) Technology development and transfer, including implementing clinical trials and field demonstrations of new diagnostics, strengthening laboratory networks for drug resistance surveillance and quality control of smear microscopy, and stimulating demand for new diagnostics.
- 2) Communications for social change, including developing and launching comprehensive communications and social mobilization strategies— from community-level theater to mass media; and monitoring and evaluating the impact of social mobilization activities on TB case detection, treatment outcomes, and TB/HIV.
- 3) Health systems strengthening, including building capacity and introducing sustainable systems for public-private partnerships, TB/HIV collaborative activities, nongovernmental and community-based organizations (NGOs and CBOs), and DOTS expansion; developing tools to support pre- and in-service health providers; designing surveillance and monitoring systems; conducting analytical work to support evidence-based planning; and introducing innovations to enhance and monitor equity in access.

## Technologies

PATH is internationally recognized for its development of cost-effective, appropriate technologies to address public health needs. During the past 15 years, PATH has developed and commercialized diagnostic tests for malaria, syphilis, HIV, hepatitis B, pregnancy, and vitamin A deficiency. The development and commercialization process for these tests involved laboratory-based research at PATH in collaboration with public and private partners, clinical and field trials to determine test performance, and technology transfer to developing world manufacturers. During the past several years, PATH received USAID funding to develop rapid serological tests for TB disease. Test prototypes were evaluated through clinical trials in India, Botswana, and Ukraine. To further strengthen these efforts to identify an affordable and accurate TB diagnostic, we are currently collaborating with the Foundation for Innovative New Diagnostics to design experiments to evaluate novel combinations of antigen/antibody targets for use in a rapid serological test.

## The CORE Group

PATH holds a co-chair position in the USAID-sponsored Child Survival Collaborations and Resources Group (the CORE Group), a network of 30 US-based NGOs working together with member organizations in more than 140 countries to promote and improve primary health care programs for women and children and the communities in which they live. While CORE has only been active in TB control for two years, it has already completed several remarkable activities, including hosting two technical update workshops; developing and translating TB technical reference materials (into Russian); producing several case studies; and providing a highly regarded TB training course to private voluntary organization managers from around the world.

## Cambodia

For over 20 years PATH has been a leader in communication for social change. PATH currently applies its expertise in this realm to expand DOTS in Cambodia, including developing the integrated communications strategy for the country's national TB program. Beginning in 2003, PATH started building local capacity for social mobilization and effective client communication, first with national TB program staff and then to provincial TB supervisors. PATH developed training curriculum, a TB educational flipchart, and TB posters for staff at decentralized levels to disseminate consistent messages about TB symptoms, care seeking, and treatment adherence. In addition, PATH has:

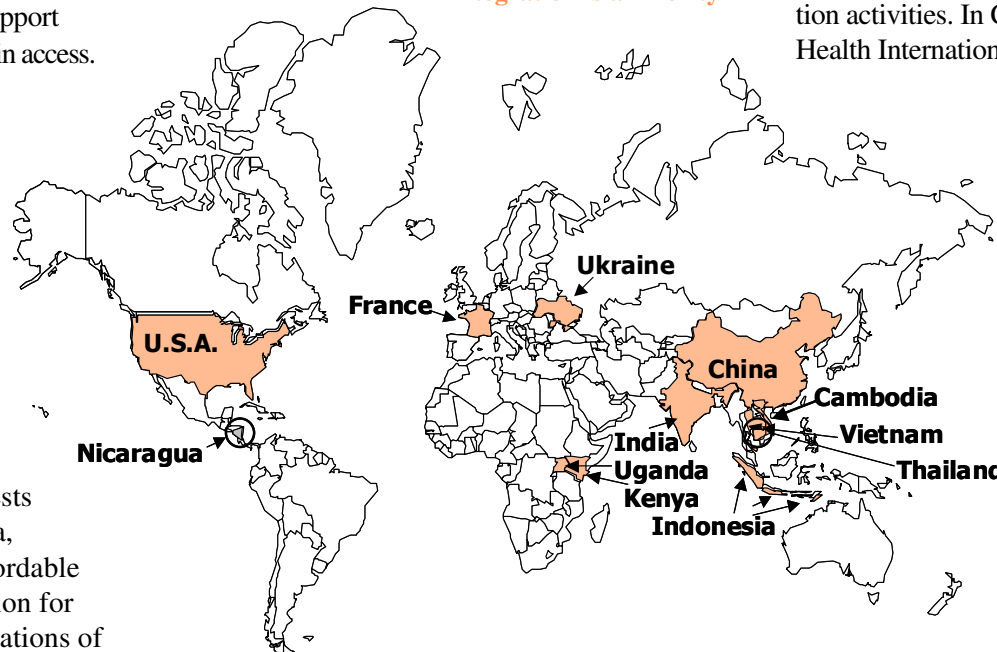
- Helped health workers increase their client-communication skills.
- Promoted south-to-south partnerships by organizing opportunities for national program staff to learn from Thailand's successes in communication for social change.
- Produced two television spots about TB and HIV following the launch of collaborative TB/HIV activities in Cambodia.

In 2005, PATH will begin engaging village volunteers to conduct local communication activities. In Cambodia, PATH is supported by USAID, through the Family Health International (FHI) IMPACT project.

## Indonesia

In Indonesia, PATH provides analytical expertise to help the national TB program staff use existing data for decision-making and monitoring program progress. PATH has been collaborating closely with this program, as well as the World Health Organization (WHO) and the Royal Netherlands Tuberculosis Foundation (KNCV) to evaluate the Indonesia health system and individual-level factors that contribute to wide variance in district-level case notification rates. This work has offered an initial evaluation of attributable benefit to case notification of investments in training, laboratory infrastructure, and advocacy. The results will also inform the development of future interventions. In addition, PATH provides technical assistance for an on-going prevalence survey in the country.

PATH Offices Where TB Integration is a Priority



## Kenya

The overall goal of PATH's HIV, AIDS, and TB efforts are to build, adapt, and scale up innovative programs that respond to demonstrated local needs, have local ownership and measured impact, and can be effectively sustained to increase safe behaviors for HIV and TB prevention and care at the community, country, and global level. To this end, in 2000, with support from USAID through FHI's IMPACT project, PATH conducted a community and patient-centered behavioral study on TB and TB/HIV in Kenya. The study looked at stigma, alternative treatment seeking, psychosocial and structural barriers to care, perceptions about symptoms, and knowledge. Based on this assessment, PATH developed a communication strategy for fighting TB in Kenya. In collaboration with the National Leprosy and TB Program, PATH also:

- Developed a series of print materials, including flyers that featured short, realistic stories of fictionalized clients on the road to recovery. The flyers were broadly distributed in the community, to primary care clinics (including antenatal care and maternal and child health clinics), hospitals, and schools.
- Designed an instructional brochure for non-TB health care providers, to help improve referrals to government TB clinics.

## Support to Ukraine in Implementing its National TB Program

In the last ten years, both TB incidence and mortality have risen sharply in Ukraine. The increase in mortality rates is likely due to late detection, multi-drug resistance, and, until recently, shortages of TB drugs. Furthermore, the burgeoning HIV epidemic will likely drive TB incidence up in the coming years. As in all former Soviet countries, conventional TB case detection in Ukraine relies on mass screening using miniature chest x-ray (fluorography), a highly inefficient approach. In addition, 90 to 95 percent of new TB patients are usually hospitalized for six to eight months, separating them too long from family and communal ties. In the past, DOTS met with resistance in Ukraine, but now the approach is being better received. In 2000, WHO initiated a pilot DOTS introduction project in Donetska Oblast, and the KNCV received European Union funds in 2003 and started implementing a DOTS pilot project in Kyiv City.

PATH has received a total of US\$2.5 million through USAID's Child Survival and Health Grants Program and the USAID Regional Mission in Kyiv to undertake the *Support to Ukraine in Implementing its National TB Program*. The primary goal of the project is to improve TB case detection and management in selected locations through the implementation of the WHO-recommended strategy, DOTS, thereby helping to reduce TB's public health risk. The project began in October 2003 and continues through September 2006.

The project sites include the predominantly urban setting of Donetska Oblast (population 4.8 million) in eastern Ukraine; Kyiv, the largest city in Ukraine; and at least three other oblasts, soon to be determined. Key objectives are to:

- Improve capacity for DOTS expansion by advocating for political support for DOTS at all levels of government.
- Improve the quality of TB diagnostic services in selected oblasts.
- Improve use of monitoring and surveillance data for TB program management.
- Reduce diagnostic delay, increase case detection, and improve adherence to TB treatment.
- Improve provider practices to diagnose and treat TB.

Activities to date have included extensive baseline research in each of the main project areas; training of trainers and roll-out training in smear microscopy quality control; development of a revised TB surveillance system currently being piloted in four oblasts; training in materials development; training in interpersonal communication and counseling skills for TB medical personnel; and the development of local working groups on a variety of key TB-related topics. The project has 13 local partners, including the National TB Institute, the Ministry of Health, the WHO Office for TB Control in Ukraine, KNCV, and the World Bank TB/HIV/AIDS Control Project.

**PATH's mission is to improve the health of people around the world by advancing technologies, strengthening systems, and encouraging healthy behavior.**

**[www.path.org](http://www.path.org)**

For further information on PATH's contribution to global TB control, please contact:

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**PATH is currently accepting applications** for experts in the following fields: TB control, TB/HIV collaborative activities, monitoring and evaluation, and social mobilization. If you are interested in joining the PATH team as staff or as a consultant, please visit [www.path.org](http://www.path.org).

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