

Community organizations: A lifeline for tuberculosis patients in the DRC

BACKGROUND

The Democratic Republic of Congo (DRC), with 36,000 deaths, accounted for the highest number of tuberculosis (TB) deaths in Africa in 2012. In areas where health care systems are already stretched beyond capacity, people suffering from TB experience difficulty accessing proper diagnosis and treatment. Engaging the support and talent of communities in these areas—including empowering former and current TB patients—helps to increase TB case detection and support patients in completing difficult treatment regimens. With support from USAID, PATH has worked with Initiatives, Inc. since 2011 to assess and strengthen the organizational and technical capacity of the Club des Amis Damien (CAD), a civil society organization (CSO) in the DRC.

CAD plays a crucial role in TB control in the DRC. Using former TB patients like the members of CAD to identify and refer possible TB cases in the community and to support patients on long-term treatment regimens has proven to be very effective. As one CAD member stated,

"We help sensitize the community about TB, conduct home visits to monitor treatment, provide one-on-one support to MDR-TB patients undergoing difficult treatment regimens, distribute treatment adherence packages to MDR-TB patients, and refer people to the nearest health facility for services." By helping to build strong CSOs that can implement community interventions in hard-to-reach areas, more patients can be reached closer to where they live.

As the organization's technical and managerial capacities increase, CAD is becoming a strong pillar of sustainable TB control in the DRC through the creation of a truly grassroots organization of anti-TB activists. CAD's network grew from just a few branches in 2010 to 20 branches by 2013, spread across five project provinces. In 2011, CAD referred 9% of all new smear positive cases diagnosed across all health facilities where CAD branches are installed. This quota increased to 14% in 2012 and further to 19% in 2013.



CAD office before PATH intervention



CAD office after PATH intervention

¹ WHO Global Tuberculosis Report 2013

CAD MAKES A DIFFERENCE

One woman shared her CAD experience with project staff. "I was screened and found positive for tuberculosis at the health center in Kinshasa where I was receiving care. I was scared, because I had already lost one of my sisters to tuberculosis."

Barely able to stand, she was finally diagnosed with MDR-TB at a university clinic and sent to Bondeko Health Center for treatment. "I continued to battle terrible side effects including body aches and vertigo and began to have trouble standing upright and walking," she continued. Lacking the support needed to reach the health center, she became "worried about how I would complete the treatment."

After being connected with CAD, a CAD member was able to accompany her during treatment sessions, bring her medications, and check in on a daily basis. "I met with CAD members in Bondeko, where I had begun treatment...I began to feel better and better, and today I'm carrying on with my treatment."



A CAD member hands a treatment adherence package to an MDR-TB patient



A CAD member hands out MDR-TB drugs

The achievements of CAD and other community organizations continue to have a lasting impact on local efforts to fight TB. As one former patient helped by CAD states:

"After receiving support from CAD members, I joined the association, which enabled me to overcome the loneliness from which I had been suffering for so long. Today I am cured and I continue to support and advise other MDR-TB patients through the Club [CAD]. This is my contribution to the fight against tuberculosis in all its forms."

CAD's increasing capacity to identify TB cases in the community and to connect TB patients to effective treatment services is just one example of how PATH is helping civil society organizations to become key partners in the global fight against TB.



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