

Women in Swaziland bear the brunt of the intersecting TB and HIV epidemics, which presents major public health challenges to the country. The National TB Program, with the support of TB REACH funding, has embarked on an initiative that involves maternal and child health, preventing mother-to-child transmission (PMTCT) of HIV and the prisons in an effort to intensify TB case detection.

Antenatal clinics present a unique opportunity to systematically screen all pregnant women accessing PMTCT and other maternal and child health services through a dedicated TB Screening Officer. With this project, TB screening has become standard procedure for all women seeking antenatal or post-natal care in Swaziland. Eight TB Screening Officers have been engaged through the initiative, each stationed at a Public Health Unit where antenatal care is provided.



Swaziland

Swaziland NTP (National Tuberculosis Control Programme)

Similar systematic TB screening has been implemented among prisoners, both old and new inmates, as well as for Correctional Services staff members and their families, representing another opportunity for early case detection.

Also through the TB REACH project, GeneXpert systems were installed at five strategic sites where a majority of pregnant women in the country receive their antenatal and PMTCT services, thus providing fast and accurate TB diagnosis for this vulnerable part of the population. These same GeneXpert sites also serve the major prisons in the country, through the auspices of the National Sample Transportation System, which enables rapid transport of sputum samples for GeneXpert diagnosis.

The goal of this TB REACH project is to detect 1181 additional TB cases out of the 83059 suspects projected to be screened, among women receiving antenatal and PMTCT services, as well as among inmates in the prison system. So far, thousands of pregnant women, prisoners and their families have been screened using the GeneXpert system, resulting in 304 TB cases diagnosed, with 53 cases of Rifampicin resistance, within the only four months of implementation.

In order to ensure proper results monitoring, TB screening tools and recording and reporting materials have been supplied. Data validation is conducted on a quarterly basis with all TB Screening Officers and Regional TB Coordinators. This has improved overall data quality for these intensified TB case detection activities.

Early results indicate that TB REACH has assisted the NTP to increase TB case detection among high risk populations that had previously been underserved. It has particularly helped to pave the way for roll-out of the GeneXpert system in Swaziland and strengthened the partnership with Correctional Services in the fight against TB.

Linking Maternal and Child, PMTCT Services and the Prisons to Intensify TB Case Detection





FINDING AND TREATING PEOPLE WITH TB IN THE WORLD'S POOREST COMMUNITIES

TB REACH

The first wave of projects
increased case detection
by an average of 26%
compared to
the previous year

More than nine million people around the world become ill with tuberculosis (TB) each year. About one-third of them fail to get an accurate diagnosis or effective treatment and are more likely to die from this curable disease.

By supporting the many partners working in the field, TB REACH offers a lifeline to people among this missing 3 million by finding and treating people in the poorest, most vulnerable communities in the world. In areas with limited or non-existent TB care, TB REACH supports innovative and effective techniques to find people with TB quickly, avert deaths, stop TB from spreading, and halt the development of drug resistant strains.

- TB REACH was launched in 2010 and will run until 2016, thanks to a CAD\$ 120 million grant from the Canadian International Development Agency.
- TB REACH is committed to getting funds to our partners with a very short turnaround time.
- TB REACH has committed nearly \$50 million to partners working on 75 projects in 36 countries covering a wide range of interventions.
- Preliminary analysis from Wave 1 shows that efforts of partners led to an increase of 26% in TB case detection over an area of 100 million people, while some areas saw increases of more than 100%. The average cost per person covered is US \$0.15.

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