TB REACH CATHOLIC RELIEF SERVICES-USCCB

Finding and treating people with TB in

Democratic Republic Of Congo

- Working with traditional healers and screening prisoners, miners and other high risk groups leads to dramatic increase in case detection
- 55% increase in screening activities in the province and more than 100% increase in TB notifications compared to the same period in the previous year.
- Working with communities has improved project sustainability



Bukavu - Traditional healers are held in high regard in the Democratic Republic of Congo (DRC), as is the case in many Central African countries. Many people in Bukavu and the surrounding area never go outside the traditional healthcare framework to visit a public health facility, relying instead on these traditional community practitioners to take care of their health needs. Furthermore, the poor infrastructure and huge distances between towns can make accessing public services difficult. Thanks to an innovative project started by Catholic Relief Services (CRS) in partnership with the Provincial Tuberculosis Programme, these traditional practitioners are now receiving support in providing more modern health care to thousands of people. With more than a quarter of a million estimated cases of tuberculosis (TB) per year in the DRC, the 10th highest number in the world, and low levels of testing, it was

clear that an active model of case detection would have to be implemented by CRS. Since it is the philosophy of CRS to work within communities, honouring traditional beliefs and structures, the project chose an approach that utilizes local groups, taking advantage of the community support these groups typically enjoy. Through training offered by the project, traditional healers have been able to increase their knowledge about TB, thus increasing the trust already accorded in them by their communities. Working in tandem, traditional healers and workers within the public health facilities of South Kivu have increased screening for TB testing by 55% in the first half of 2011. These efforts have yielded incredible results as more than 2,000 TB cases have been identified through only nine months of the project whereas less than 1,300 cases were notified in the entire 12 months before the project began.



Additionally, health care workers from mobile unit teams are working with community health volunteers to reach the most underserved populations, targeting prisoners, miners and contacts of TB cases. In these areas of particular need, nurses and lab technicians have been trained in up-to-date TB diagnosis, health centers have been provided diagnostic equipment along with training in its use, and community awareness of TB symptoms and treatment has been fostered by community health volunteers and traditional healers. With both traditional healers and health facility staff providing the same messages on the importance of and methods for diagnosis and treatment, TB case finding has increased and health outcomes have improved as well.

