Finding and treating people with TB in Uganda

- Community program leverages a large network of health volunteers to increase case finding
- 50% increase in TB case finding in first nine months of project
- Focus on villages in rural area of Uganda with limited access to basic health services

Entebbe - In Uganda, tuberculosis (TB) is a serious health concern. Despite the government’s provision of free services for TB in its health facilities, many villagers face significant difficulties reaching them and often put off investigating their problems until it may be too late. Curing TB requires at least six months of daily treatment, and without daily supervision (also called directly observed therapy, short-course or DOTS), many patients miss dosages and risk drug resistance. Many have limited understanding or even fear about tuberculosis (TB) and individuals suffering from TB. Bringing these critical services into the community enables education on the condition, faster diagnosis, and convenient treatment options. BRAC, a Bangladesh-based organization, has established a large network of health promoters in northern Uganda, women selected from the villages and trained to provide their community with basic health information, products and services, including those related to TB. To reward promoters for proactively seeking to identify people with TB in their communities, BRAC provides a small incentive for referrals that are confirmed to be cases of TB. In addition, BRAC provides a stipend to promoters when one of their patients completes the course of treatment to acknowledge the supervision and support they provide. In just nine months, BRAC’s program has resulted in a 50% increase in TB case finding in the villages where it works.

One of BRAC’s first patients was twenty-two-year-old Isaac Suwuay, the sole earner in his family of eight. A persistent cough and increasing weakness was causing him to lose work. With little knowledge about proper health care and concern about the costs and hassles of visiting a health facility, Isaac ignored his symptoms and hoped they would subside on their own. Luckily, community promoter Ayoma Liliana heard of Isaac’s symptoms and went to visit him. She explained that a simple test could show if he had TB, which could be cured with free treatment and follow up. With Ayoma’s assistance, Isaac went for sputum testing and learned that he had TB. Ayoma immediately initiated the treatment and provided daily supervision. She also instructed Isaac on how he could avoid infecting others by taking certain precautions. Today, Isaac is cured, once again able to work and help take care of his family.

In addition to the important presence they provide for individual patients, health promoters also play an important role in changing norms and behaviors; they can be powerful agents to reducing stigma and stimulate demand for health services, prompting preventative or timely visits to facilities when required. Unsurprisingly, those who recognize this potential most clearly are often the promoters. Ayoma comments, “My training has helped me take care of my community but it also helped me show my neighbors how to take better care of themselves.”