Ethiopia is among the world’s 22 high burden countries for tuberculosis, (TB) ranking seventh in the world and third in Africa. The National Tuberculosis Prevalence Survey of 2011 revealed that smear positive tuberculosis is found in 108 of every 100,000 people, while 240 in 100,000 have pulmonary TB.

Congregate settings are among the most affected in Ethiopia, as demonstrated by studies which found prevalence rates as high as 3.2% in correctional facilities. Poor ventilation, overcrowding and poor nutrition are among the factors contributing to the spread of the disease, making prison settings especially vulnerable to increased transmission. The absence of good case detection due to lack of skilled service provision only serves to exacerbate the problem.

Through a joint assessment conducted at six correctional facilities by the Federal Ministry of Health (FMOH), WHO, the Federal Prison Administration (FPA) and the German Leprosy and TB Relief Association of Ethiopia (GLRA-E), a decision was made that solutions must be found regarding the problem of TB transmission in prisons. Due to a lack of diagnostic equipment, poor staffing, insufficient training, and a weak linkage between the prisons and the public health system, most prisons have not been providing TB diagnostic services for inmates. This has lead to weak case finding in prisons. Compounding this problem is the fact that even when TB cases are detected in the prison health system, they are not regularly notified to the FMOH.

Therefore, with the support of TB REACH, GLRA is working to improve TB screening, case detection and diagnosis with early initiation of treatment for prisoners at seven detention centers. Specific objectives are to increase overall awareness about TB in the prison community and intensify routine screening and TB case finding among symptomatic inmates, as well as to intensify TB screening and case finding for inmates at points of entry, OPD, exit and mass screening.

As of June 2013, 312 cases of all forms of TB have been found, of which 74 are smear positive. Smear positive notifications have increased by more than double and all forms of TB doubled in the same population, compared to the year prior to implementation of the project. This trend promises continued improvement in the detection and treatment of people with TB who might otherwise go undiagnosed and untreated.