An estimated 450,000 people live in Kono District, a remote region of Sierra Leone that was the epicenter of the country’s ten year civil war. Today, destroyed infrastructure, mountains, nearly impassable rivers, and otherwise isolated communities continue to pose enormous barriers to accessing healthcare.

In April 2013, Wellbody Alliance launched a community-based TB program to increase case detection and treatment for those who currently struggle to receive care in this resource-limited setting. Funded by the WHO’s TB REACH wave 3 Grant, Wellbody’s TB program consists of three core components:

1. initiation of a contact tracing program
2. provision of support to community DOTS providers to assure a comprehensive community-based TB program
3. implementation of GeneXpert diagnostic services for HIV-infected persons as well as those with sputum smear negative results but high clinical suspicion.

Together, these three core interventions represent a novel approach to TB case finding in Sierra Leone. TB diagnosis around the country was previously based on a passive model in which individuals who presented to the clinic or hospital with signs or symptoms of TB were sent for sputum smear and possibly a chest x-ray. Wellbody’s TB program, in contrast, promotes more active case finding. A corps of 120 community health workers is the first in Sierra Leone to be trained to conduct TB screenings through both house-to-house and contact tracing methods. These efforts have paid off. During the first six months of the program, over 180,000 people were screened, yielding 372 TB positive cases.

Wellbody works closely with the District Health Management Team and the National TB and HIV Programs during the implementation and evaluation phases of the program. Close partnership with the National TB Program allows Wellbody to monitor and advocate for a constant availability of reagents, lab slides, anti-tuberculosis drugs, and other resources that will allow for proper diagnosis, treatment, and follow up. The close collaboration with local and national government also serves valuable evaluation and clinical improvement purposes. To analyze the program, data is collected from both Kono District and the neighboring Kailahun District, which serves as a control population. This will allow policymakers to evaluate TB care in the country and determine the feasibility of scaling up this three-pronged program in a country with high burdens of TB but limited access to care.