

Finding and treating people with TB in

Ethiopia

- Health workers on motorbikes and community health workers expand TB services to 19 underserved districts
- TB case finding has nearly doubled in the first nine months of the project
- Increased services provided to the elderly and disabled, women and children



Hawassa – In Sidama Zone these days it is not uncommon to see health supervisors on motorbikes traveling quickly throughout each of the 19 districts, transporting information and education as well as test samples. These are people who have become bridges between their own rural communities and far-off healthcare facilities. They are part of a project which has newly energized effort to control tuberculosis (TB) in Ethiopia.

TB is often stigmatized and Ethiopia is no exception. The project has made a concerted effort to engage community members, councils, other stakeholders, TB programmes, former TB patients and religious and community leaders to increase awareness about the disease as well as expanding availability of TB services at the community level.

The results are staggering. The project, initiated by Dr. Mohammed A. Yassin, began in November 2010 and since its inception has reported more than double the number of smear-positive cases compared to the previous year. The supervisors on motorbikes oversee a network of locally employed female community-health workers who have been trained by the project, in

concert with Liverpool School of Medicine and The Global Fund. The workers go house to house to identify people suspected of having TB and collect sputum and prepare smears on site. Additionally, they will support whatever treatment is prescribed if the diagnosis is positive.

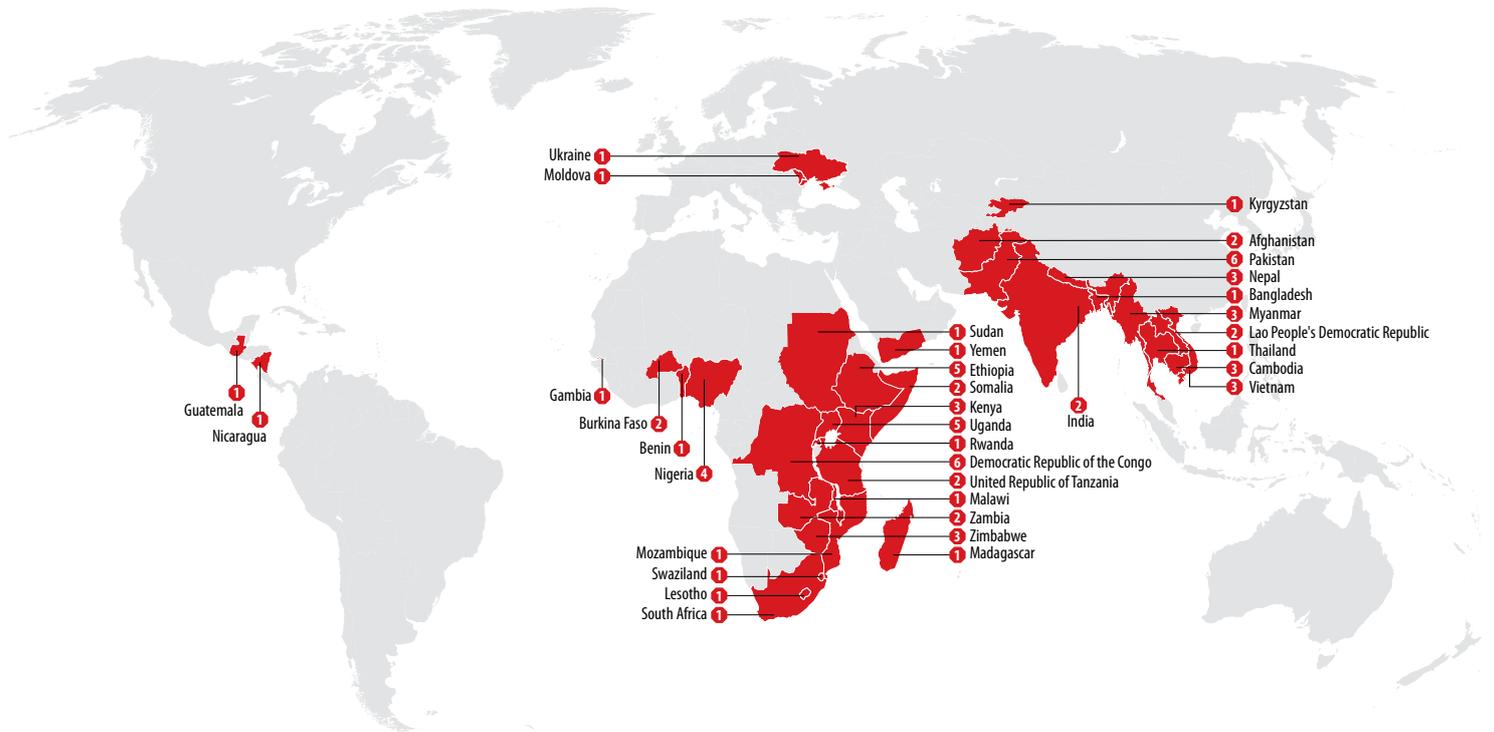
Each worker reports to her supervisor, who takes on the task of transporting smears to the relevant lab, initiates treatment and screens contacts. All of this activity conducted in collaboration with and receives technical support and guidance from Southern Region Health Bureau and Sidama Zone Health Department.

Focusing on the elderly and disabled, women and children, the project has not only brought the three million people living in Sidama Zone within the healthcare system but has also turned TB into a disease that can be talked about out loud. People suffering from TB no longer have to suffer stigma as well. Moreover, they have learned that the disease can be treated and cured without the patient having to leave home. Mrs. GG, a disabled mother of three, says, “Being able to receive my treatment at home is the only way I could get better. Now I can begin to take care of my family again.”



TB REACH

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



Finding 140,000 new cases means saving 70,000 lives and preventing 1.4 million new infections.

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. 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 projects with a very short turnaround time.
- In its first 18 months, TB REACH committed nearly **\$50 million to 75 projects in 36 countries** aiming to find and treat more than **140,000** people with TB who would otherwise have gone undiagnosed.
- Finding 140,000 new cases means saving 70,000 lives and preventing 1.4 million new infections. Scaling up successful TB REACH projects would multiply these figures.

Stop TB Partnership

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