

Finding and treating people with TB in

Yemen

- Contact investigation in TB patient's homes benefits women and the elderly
- Activities continued despite considerable political unrest
- Primary beneficiaries are those with poor access to care



Sana'a - Daily life in Yemen's capital city of Sana'a has suffered great disruption during the ongoing political crisis that began in the spring of 2011. Despite considerable challenges, the Yemen National TB Institute, together with the Liverpool School of Tropical Medicine, has continued to carry out a project which started in January 2011. The project aims to increase case detection in three particularly hard-to-reach groups: women, children and the elderly. Possibly because of their elevated status in Yemeni culture, men appear to have better access to health services. Cultural attitudes affect the ability of women to seek care, as they must usually be accompanied by a man when going out. The elderly are similarly dependent on the availability and willingness of other family members

to accompany them. The risk of cross-infection in these large family groups is high. In Sana'a one in ten households with an identified case of TB has a second case at home. Home visits conducted by culturally attuned health workers are therefore pivotal in obtaining sputum samples and identify cases. This project aims to increase the detection of TB by conducting home visits to all "household contacts" (particularly women, elderly people and children) living in the homes of patients who seek TB treatment and inviting them to undergo TB diagnostic procedures if they have any signs or symptoms suggestive of TB. As many children are unable to produce sputum they are referred to hospital to complete the diagnostic procedure.

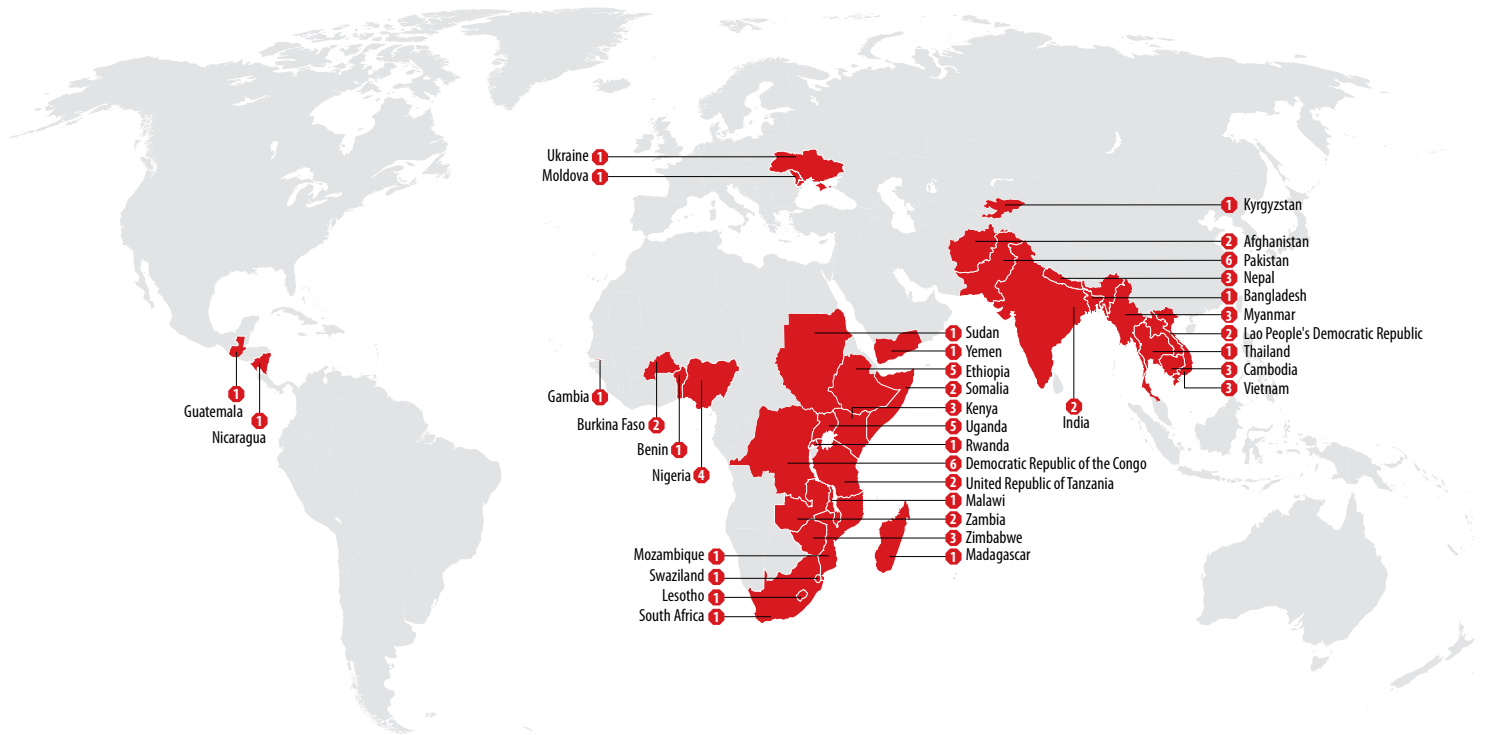
Since the danger for children is especially high, with 60% of children diagnosed with TB failing either to begin treatment or to carry treatment through the second month, educating mothers, who are often uninformed about TB, in the risk of untreated disease, is a very important part of the home visit. Relieving stigma and explaining the diagnostic process has helped women be better caretakers of their own and their children's health.

Despite constraints resulting from the political and economic situation, active case finding through contact investigation has shown to be quite effective. Just from April-June 2011, more than 4000 patients have been screened and TB case finding has remained steady, even as other basic services have been shut down in the project area.



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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