Bottlenecks in ICF/IPT implementation in Zambia

Dr. C Kaayunga
Dr. C Moyo
Dr. S. Zimba-Tembo
Dr. W. Kaonga
Mr. P. Amanzi
Mr. N. Mwanyambe

Tuesday, March 22, 2011
Map of Zambia
The vision of the Ministry of Health

“to ensure equity of access to cost-effective, quality health care as close to the family as possible”.
ZAMBIAN SITUATION

- Population 13.2 million
- HIV prevalence 14.3%
HIV Prevalence in Zambia

Female 18-16% ~ Male 13-12%, Urban 25-20% ~ Rural 13-10%

- Eastern 10-14%
- Northern 7-8%
- Copper-belt 17-20%
- Central 15-18%
- Western 13-15%
- North-Western 7-9%
- Luapula 11-13%
- Southern 15-18%
- Lusaka 21-22%
MAP SHOWING DISTRIBUTION OF ALL FORMS OF TB & CASES PER PROVINCE
TB/HIV Situation 2010

- The program notified 46,367 all forms of TB.
- Smear positive 12,012 (27%)
- Retreatment 5,931 (12%)
- Children 254 (1%)
- Tested for HIV 37,769 (81%)
- HIV Positive 25,564 (68%)
- Put on CPT 19,656 (77%)
- Put on ART 12,170 (48%)

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Overview of the ART Programme

- Zambia has a population of ~ 13 million
- ~ 1.2 million are living with HIV
- 14.3% prevalence (ZDHS 2007)
- New adult infection rate 1.6% per year (NAC 2009)
- Currently ~450 sites offering ART to over 350,000 clients
- Funding support followed from Global Fund, USG PEPFAR, and CHAI, UNITAID.
Actual Numbers of Patients on ARV’s

ART scale up in Zambia September 2010

- **clients on ART**
- **Burden**

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## Projected Number of Patients on ARV’s

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<tbody>
<tr>
<td>Adults on ART</td>
<td>250,295</td>
<td>305,528</td>
<td>329,689</td>
<td>350,977</td>
<td>367,362</td>
<td>378,178</td>
<td>386,688</td>
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<tr>
<td>Pediatrics on ART</td>
<td>20,800</td>
<td>24,039</td>
<td>25,128</td>
<td>25,057</td>
<td>23,996</td>
<td>22,738</td>
<td>21,930</td>
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<tr>
<td>Total on ART</td>
<td>271,095</td>
<td>329,567</td>
<td>354,817</td>
<td>376,034</td>
<td>391,358</td>
<td>400,915</td>
<td>408,618</td>
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<td>Mothers on PMTCT-only</td>
<td>35,668</td>
<td>38,218</td>
<td>44,050</td>
<td>47,122</td>
<td>50,180</td>
<td>53,244</td>
<td>53,519</td>
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<tr>
<td>Babies on PMTCT-only</td>
<td>26,000</td>
<td>35,488</td>
<td>33,037</td>
<td>40,054</td>
<td>45,162</td>
<td>50,582</td>
<td>50,843</td>
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Bottlenecks from Zamstar experience

- Procurement of drugs was taking too long due to the complex procedure the GDF uses to procure TB drugs.
- Clinicians expressed fears about INH resistance but most of them changed their perception after orientation training.
- Some sites recorded loss to follow up probably due to long distances from the health facility.
Bottlenecks from Zamstar experience

- Most communities wanted to access IPT but could not because IPT there is no MOH policy of giving IPT to people living with HIV outside the pilot sites.
- Staff attitude to administer IPT
- Staff shortage
- With TB programme as the lead, inadequate uptake by ART programme
- TB work up form a stand alone form
Bottlenecks from Zamstar experience

- Some health workers view this as a vertical program
- Lack of tools in the HIV section to capture data
Thank you