Africa Regional TB summit

4-6 March, 2019 | Kigali, Rwanda

Theme: *It’s time for Africa to step up efforts to find all missing people with TB*
Nacional Tuberculosis Program - Mozambique

Finding the Missing TB Cases and Strengthening the TB Care Cascade: Successes and Challenges

Kigali, March 4, 2019

Presenter: Benedita José
Mozambique country profile: dynamics of epidemiological indicators (2017-2018)

2017

163,000 fell ill with TB
- 101,000 males
- 62,000 females
- 23,000 children

85,376 TB cases notified
77,624 people not notified or not diagnosed

48,000 TB deaths
including 27,000 deaths among people with HIV

Treatment

TB treatment coverage: 52%
2025: 90% End TB operational targets
Treatment success rate: 90%

Drug-resistant TB
8,800 people fell ill with drug-resistant TB
861 notified
907 notified and started on treatment

TB/HIV
66,000 people living with HIV fell ill with TB
33,514 notified
31,790 notified and on antiretroviral treatment
TREND OF TB CASE NOTIFICATIONS 2010 -2018

- Total TB Cases Notified
- Incidence estimate by WHO
- Treatment coverage
- % of TB in Children among total
1. **Summary results to date**
   1. CTB/FHI360 provincial coverage of ICF and systematic screening increased TB notifications by 20-35% in 4 provinces
   2. CCS is just starting similar effort with Global Fund support in 6 other provinces, but preliminary results not yet available
   3. Small pilot of facility based “cough officers” also appears to increase total notifications 15-20%

2. **Strength and challenges**
   1. Standardizing protocols/strategies/CHW compensation
   2. Primarily implemented by partners, and not the MOH
   3. We are updating instruments, M&E processes to better monitor whether or not these efforts are having an impact
TREND OF TB CASE COMMUNITY CONTRIBUTION, 2015 - 2018

Community contribution - 25%

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<th>Year</th>
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There is an increase on MDR TB case notification
- Increase of GeneXpert Coverage
- Improve of MDR clinical management

Treatment Success rate (2016 Cohort)
50%
WHAT WAS DONE TO ADDRESS THE PROBLEM

- Increase of community partners and private sector (clinics and pharmacies) in TB case finding;
- Implementation of FAST Strategy at the Health Facility and monitor its contribution to increase TB case notification;
- Initial trainings and refreshments of Health care Professionals on MDR TB clinical management (The Union);
- Supervision and technical support for the clinicians on MDRT TB Clinical management (ECO Platform);
1. **Status of TB within any national health insurance or UHC policy: provider payment or patient benefit packages**
   1. TB services provided free of charge to all Mozambicans
   2. Ministry of Social Affairs provides social protection under specific conditions defined in the policy

2. **Plan for patient cost survey or action on results**
   1. Ongoing discussions, protocol in development

3. **TB patient and/or MDR-TB patient support packages**
   1. In development, but challenging to implement logistically
   2. Ministry of Social Affairs provides social protection under specific conditions

4. **Linkages with broader social protection programs:**
   1. Strengthening linkage to national nutritional support program
   2. Is a designated disease for short-term disability benefit for public and private employees
LESSONS LEARNED

- Use of combined strategies to find TB cases:
  - At the community level (monthly coughing days, contact tracing, door-to-door screening, etc.)
  - Health facilities (official cough and clinical screening);
- Reinforcement of the transportation system of the TB samples to the health facilities with diagnostic capacity;
- Expansion of the laboratory network and utilization of Xpert MTB/RIF in particular to increase TB-RR diagnosis;
- Supervision, mentoring and monitoring of activities at all levels;
- Close coordination of different projects, funding streams and partners is critical
CURRENT ADVANTAGES, CHALLENGES & URGENT ACTIONS

Summary points

1) Current advantages
   1) Rapid increases in TB notifications
   2) High treatment success for DS-TB, and HIV/TB

2) Challenges
   1) Low rates bacteriological confirmation and MDR-TB treatment success
   2) Large gap in TB notifications (although narrowing)
   3) Fragmented CHW efforts, limited advocacy and political awareness

3) Urgent actions
   1) Update national strategic plan, MDR-TB regimens and treatment strategy
   2) Strengthen and standardize national CHW/advocacy strategy
   3) Increase focus on the quality of care, particularly for MDR-TB and laboratory
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Thank you for your attention