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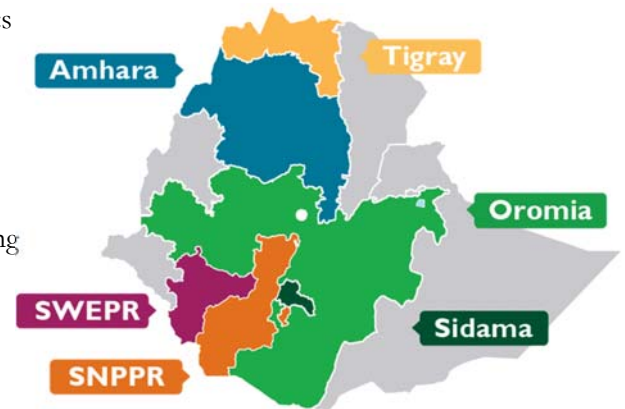
USAID Eliminate TB Project

Despite a steadily declining tuberculosis (TB) rate, averaging 8% per year, Ethiopia continues to be a high-TB-burden country. By building upon previous TB control efforts, the five-year USAID Eliminate TB Project will accelerate and sustain TB elimination efforts in Ethiopia to meet the End TB targets by 2035.

KEY STRATEGIES

USAID Eliminate TB Project aims to reduce TB incidence and mortality by increasing the quality, access, utilization, and sustainability of TB services in six regions across Ethiopia. By engaging public and private stakeholders, the project will improve TB services through four key strategies:

- Increase expansion and utilization of TB diagnostics and technology
- Improve quality-assured and patient-centered TB care and management
- Implement high impact case finding strategies and prevention methods
- Build the capacity of health system support, ensuring country ownership and sustainability



IMPLEMENTING PARTNERS

While the project will engage communities, civil society organizations, and other private-sector partners at the local level in TB prevention and control, there are five main implementing partners.

- **Management Sciences for Health** and the **KNCV Tuberculosis Foundation** combined have over 15 years of technical TB expertise and experience in the five target Ethiopian regions.
- **Amhara Development Association (ADA)**, **Oromia Development Association (ODA)**, and **REACH Ethiopia** are local organizations that provide effective community-based TB approaches.



EXISTING GAPS

Implementing four key project approaches, the USAID Eliminate TB Project will address the persistent gaps that exist in Ethiopia's fight to eliminate TB, including:

- low funding for TB interventions
- infrequent community involvement
- limited diagnostics and utilization of digital X-ray to screen for TB
- high attrition of health workers and shortage of laboratory professionals; and
- catastrophic costs for patients

By the end of the five years, the project will achieve their targets of finding and treating 484,540 new TB patients and 14,357 MDR-TB patients and achieving treatment success rates (TSRs) of at least 95% for drug-sensitive (DS)-TB and 85% for drug-resistant (DR)-TB.

PROJECT APPROACHES

Affordable and Fully Financed TB Care

On a national level, the USAID Eliminate TB Project will collaborate with the Federal Ministry of Health to increase domestic funding for TB by creating a multi-sectoral TB Advisory Council to align government policies and allocate resources. A similar council will be established on a regional level to sustain TB prevention and care, while introducing community-based health insurance (CBHI) at a local level to keep out-of-pocket costs low for TB patients. High costs of TB care for patients will also decrease due to increased engagement of the private sector.



Identifying “Hot Spots” and Engaging Communities

To ensure vulnerable populations receive adequate support, the USAID Eliminate TB Project will use data mapping to identify “hot spots” with large groups of at-risk people and high-patient-load health facilities. As these hot spots are identified, differentiated approaches will be designed to meet the needs of the community. Communities will be engaged through bolstering community-level services, expanding community awareness, and supporting local patient advocacy groups through small grants.

Expanding Quality of Care and Laboratory Services

Building the capacity of the National Tuberculosis and Leprosy Program (NTLP) and individual health providers will provide quality, patient-centered services supported by new diagnostic tools, technology, and drugs. New diagnostic technology, such as GeneXpert machines, and the new shorter, fully-oral drug-resistant TB treatment regimens will be rolled out by the public and private sector to strengthen patient-centered services using approaches differentiated by gender, age, and key population.



Building Local Ownership and Ensuring Sustainability

By the end of the USAID Eliminate TB Project, all TB elimination activities will be completely owned and led by local leaders. Embedded in the design of the project is the transfer of all TB activities to identified local organizations or government bodies through a phased approach across the five-year period. This transfer will occur through an innovative capacity building and sustainability strategy, which combines clinical training, mentorship, blended learning, and organizational capacity building.