THE ROAD TO ENDING TB IN ETHIOPIA

Success Stories from the USAID Eliminate TB Project
TUBERCULOSIS (TB) REMAINS ONE OF THE WORLD’S TOP INFECTIOUS KILLERS.

Management Sciences for Health (MSH) works with national and local partners to strengthen the capacity of the country’s health system to prevent the spread of TB and improve the lives of those affected by it.

Building on more than a decade of partnership with the Ethiopian Ministry of Health and regional and local governments, the MSH-led USAID Eliminate TB Project aims to reduce TB incidence and mortality through engaging public and private sector players and emphasizing evidence-based planning and decision-making, technical training and capacity building, and community outreach for quality and sustainability of TB services.

This year, on World TB Day 2023, MSH celebrates the past three years of the USAID Eliminate TB Project’s successes by reflecting on stories of people across all levels of society—the government, regional and local partners, health staff, communities, and TB survivors themselves—coming together in the fight to eliminate TB for good.

YES!
WE CAN END TB
WORLD TB DAY 2023

Betiglu is a health worker in Ethiopia’s Oromia Region who has come up with an innovative way to encourage his patients to keep up with their TB treatment course. Read his story on page 4.
TRACING IDPs TO RESTART TB TREATMENTS INTERRUPTED BY CONFLICT

For Fetene and her family, the civil conflict in Ethiopia not only cost them their home—it also nearly cost Fetene her health. After fighting broke out in their town, Fetene and her two daughters were forced to flee their home in Amhara. For days, they traveled on foot to reach the town of Dessie, where they sought refuge at a shelter for internally displaced people (IDPs). There, she realized that she had not taken her TB medication for six weeks. “I asked people if there was a nearby health center so I could get my medication, but then the threat of conflict reached Dessie and we were forced to run again,” Fetene explains.

They headed to Bahir Dar, where they sought help at another IDP center. Two weeks into their stay, a medical team supported by the USAID Eliminate TB Project arrived and began screening people for TB to help identify those whose treatment was disrupted by the conflict. “Thanks to the medical team I managed to restart my drugs,” Fetene said. “Otherwise, I was going to start coughing again.”

Through the integrated and coordinated search for patients among the displaced population, the USAID Eliminate TB Project supported the Amhara Regional Health Bureau to identify 119 TB patients such as Fetene across 20 IDP centers, allowing them to restart their TB treatment course and get back on the road to recovery from the disease.

LEVERAGING WORLD TB DAY TO ADVANCE TB SCREENING IN AMHARA

Building on previous work through the USAID-funded Challenge TB project (2014-2019), the USAID Eliminate TB Project has continued its efforts to eradicate the disease in Ethiopia. A key component of these efforts is focusing on identifying and mapping key affected populations to facilitate reaching them with TB services.

For World TB Day 2021, project staff in Amhara collaborated with the Regional Health Bureau to organize targeted TB screening campaigns among vulnerable groups such as homeless populations, elderly group homes, and people living in poor urban areas. Working in collaboration with zonal health department representatives, local health offices, and multiple health facilities, health care providers received training on symptomatic TB screening and sputum sample collection before heading out to key areas targeted by the campaign.

Over the course of the 5-day campaign, nearly 21,000 people were screened for TB; of these, 491 presumptive TB cases were identified. The samples from the identified TB presumptive cases were transported to hospitals for GeneXpert testing. Out of the 2,183 samples tested for TB, 42 were positive. One man living in an urban slum area who tested positive during the screening campaign expressed his gratitude for the screening team. “I visited more than five health facilities to no avail,” he said. “I could have died had it not been for this sensitization and mass screening—thank you.”
SCREENING IDPs AMID CONFLICT IN TIGRAY

The conflict in Ethiopia’s Tigray Region affected the functionality of the region’s health system, impacting everything from human resources to infrastructure—and TB services were no exception. From disrupting drug-resistant TB client follow-up to damaging facilities and laboratory diagnostic equipment, the capacity of Tigray’s health system to ensure service continuity and conduct monitoring and evaluation was compromised. In response, the USAID Eliminate TB Project’s regional staff in Tigray worked in collaboration with local stakeholders and partners to create a phased strategy to resume TB activities.

Through the Tigray regional team, the project supported rapid situational assessments to explore challenges and solutions, including accessing basic TB diagnostic services for patients and communities, linking patients to care for continuity of TB treatment services, inventorying adequate stock of TB drugs and commodities, and supporting the program data documentation and reporting. During these assessments, the team identified increasing numbers of IDPs from conflict-stricken areas to Tigray’s capital city of Mekelle. The proposed solution was integrated screening for communicable diseases such as TB, HIV, and COVID-19.

Coordinating with the Tigray Regional Health Bureau, project staff initiated, planned, and conducted an integrated mass TB, HIV, and COVID-19 screening campaign among IDPs in Mekelle city in mid-March 2021. Ultimately, more than 1.2 million IDPs sheltering in the city’s 10 IDP centers were screened for the 3 diseases. Of the nearly 4,800 people screened for TB, about 230 presumed cases were identified; ultimately, GeneXpert tests performed for 159 samples did not indicate TB. However, the campaign identified eight people who were positive for COVID-19 and two who were positive for HIV, allowing these patients displaced by the conflict to resume treatment.

GARDENING FOR HEALTH: A REGULAR DOSE OF GARDENING PROMOTES TREATMENT ADHERENCE

Early termination of TB treatment is a major contributor to the spread of the disease in Ethiopia. Many patients often end their treatment early and do not take the full six-month regimen, which leads to the spread of drug-resistant TB.

Betiglu, a TB focal point in Oromia Region’s Keta town, is always trying to convince his TB patients to complete their treatment from beginning to end. He learned about the importance of completing the full treatment course during a training led by the USAID Eliminate TB Project. The project’s regional supervisors provide quarterly supervision to health providers such as Betiglu to deliver quality and sustainable TB services, including preventing multidrug-resistant TB (MDR-TB).

Betiglu came up with an idea that would encourage his patients to come to the health facility regularly to take their pills, thus helping to prevent MDR-TB. On a patient’s first day of treatment, they received a pot and a seedling. Whenever a patient came to the facility to care for their plant, they also received their TB drug regimen. Betiglu found his method to be effective and wants to expand it. “The greenery works by showing a bright future for TB patients,” says Betiglu.

Temesgen, one of Betiglu’s TB patients, had previously faltered in his treatment. After repeated adherence counseling, he agreed to resume treatment and was given a plant to care for. Five months later, his sputum test indicated a negative TB result. He now encourages other TB patients: “Planting is really interesting; it brings hope. Before I only thought of plants giving us firewood, but now see how plants give us life.”
EXPANDING THE SEARCH FOR TB BEYOND THE HOUSEHOLD

Roza and Meseret are young mothers living in the same community in Hawassa town, located about 250 kilometers south of Addis Ababa. The relationship among the community is almost familial: the children all play together regularly, and all of the neighbors pitch in to help take care of them. Some of these neighbors are in treatment for TB, making knowledge of how to prevent the spread of the disease even more crucial. However, as is the case in many parts of Ethiopia, there is very low knowledge among the community about how TB is transmitted, how easily it can be contracted, or how to prevent contracting it.

To increase high-impact case finding and prevention strategies, the USAID Eliminate TB Project provides technical training for health professionals throughout Ethiopia—including for Tadelech, who serves as the TB focal point at Hawassa’s health facility. After learning about the importance of community-level contact investigations, Tadelech visited Roza and Meseret’s community to check on contacts of her TB patients. During her visit, Tadelech observed the close relationship between her patients and their neighbors, prompting her to invite members of the community—including Roza and Meseret—to her health facility for TB sensitization training. After the session, the mothers and their children started TB preventive treatment, which made them both feel relieved. “We are happy now, knowing that our children will not get sick with this disease,” shares Roza.

A “TB VILLAGE” GETS BACK ON TRACK

Known for its high TB infection rate, Metaya—a small, rural village in Amhara—has earned an unfortunate nickname: “TB Village.” Its remote and rugged location near the Nile River Gorge and far from health facilities poses challenges for conducting regular TB prevention and control activities, leading to a lack of awareness among the community about how to prevent, identify, and treat the disease and enabling its rampant spread.

Ayanaw and Robel, residents of Amhara’s Debre Markos town, are members of the treatment initiating center (TIC) at their local health facilities. As TIC members, the two participated in a five-day training organized by the USAID Eliminate TB Project aimed at strengthening programmatic management of drug-resistant TB, with a focus on tailoring interventions for TB-endemic settings such as Metaya.

Following the training, Ayanaw and Robel proposed the formation of a joint supervision and mentoring team to help raise awareness about TB and combat its spread in Metaya. After the local government approved the plan, the team conducted its first visit to the village in September 2021, during which a total of 15 presumptive TB cases were identified and immediately transported by ambulance for evaluation and care. The team has since conducted visits to Metaya on a quarterly basis. “The training helped catalyze meaningful change in the TB prevention and treatment activities for Metaya,” Ayanaw and Robel shared. “Now, this ‘TB village’ is on the right track toward eliminating the disease for good.”
ENGAGING SURVIVORS IN THE FIGHT TO ELIMINATE TB

Several years ago, Tekalign (42), a small trader from East Oromia Region, began experiencing some concerning health symptoms. After several months of medical checks, he ultimately received his true diagnosis: TB. While doctors prescribed him the standard six-month course of medicines to treat his TB, Tekalign—unaware of the importance of finishing the treatment course—stopped taking his medicines after only two months. “I felt I was cured,” he says. Ceasing treatment proved costly for Tekalign, who ended up back in the hospital after his illness devolved. This time, specialists diagnosed him with multidrug-resistant TB. “Had I taken the treatment as advised,” Tekalign reflects, “I might not have experienced these high costs—it took two years to cure me.” His illness also deeply affected his family. “I could not work and earn an income [while I was sick and in treatment], so my family became dependent on relatives,” he explains.

Now, Tekalign—as a member of his local TB Survivors Club—uses his difficult experience to educate his community on the dangers of TB and the importance of seeking testing and treatment if symptoms arise. By partnering with and building the capacity of local organizations such as Oromia Development Association, which leads Tekalign’s club, the USAID Eliminate TB Project engages TB survivors to educate current patients and communities more broadly about the disease and save lives. Participation in his local TB Survivors Club has been important for Tekalign’s healing, as it offers him an avenue to play an important role in his community by speaking about his experience at public gathering areas and health facilities. “I don’t want to see my brothers and sisters suffer such as me,” he says. “Everyone should learn from my past.”

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For more information on our TB work in Ethiopia, please contact communications@msh.org.