FACTSHEET: Challenge TB Project Implementation in Zambia (2017–2019)

BACKGROUND

- Zambia is among the thirty countries in the world with a high TB and TB/HIV burden.
 - In 2017, Zambia notified 37, 203 TB cases, 36,010 were new and relapse cases, while 84% had pulmonary TB and only 53% were bacteriologically confirmed.¹
 - Fifty nine percent of new and relapse TB patients were co-infected with HIV.

The USAID-funded Challenge TB (CTB) project in Zambia, supported the National Tuberculosis Program (NTP) in the implementation of identified program areas. The strategy of CTB Zambia aligned with NTP National Strategic Plan (NSP) 2014-2016 and 2017-2021. The lead partner in Zambia was FHI 360, with KNCV as the prime partner and host of the project management unit. Between January 2017 and September 2019, CTB Zambia implemented activities in the provinces of Copperbelt, Northwestern, Luapula, Muchinga, Central and Northern Provinces.

FOCUS AREAS

- Human resource development and technical assistance.
- The programmatic management of drug-resistant TB (PMDT), including the introduction and scale-up of new drugs and shorter treatment regimens (ND&R).
- TB Infection Prevention and Control (TB IPC).
- Minor renovations of TB spaces, multidrug-resistant (MDR) TB wards and TB reference laboratories.
- TB diagnostics.
- Monitoring and Evaluation (M&E).



The Kabwe MDR-TB ward was renovated into a modern 14-bed capacity facility

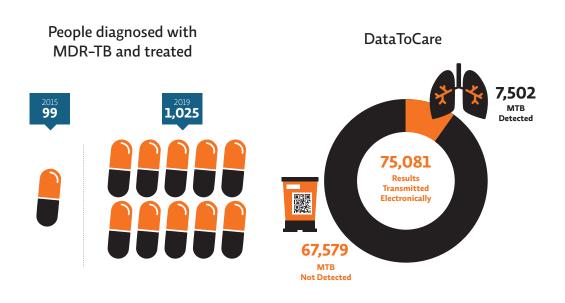


Challenge TB Zambia Team

INTENDED KEY RESULTS

At the end of three years, the project was expected to achieve the following key results:

- Increase the number of people diagnosed with MDR-TB and started on appropriate treatment by 50% over the 2015 baseline.
- Carry out minor renovations leading to three reference laboratories with functioning line probe assay (LPA), culture and drug susceptibility testing (DST).
- Decentralize MDR-TB management to three additional provinces beyond the initial baseline MDR-TB treatment sites.²



KEY ACHIEVEMENTS



The project contributed towards achieving the following results:

- The number of people diagnosed with MDR-TB and started on appropriate treatment increased from 99 in 2015 to 1,025 by 2019, exceeding the end-of-project target of 149.
- A total of 507 DR-TB patients were initiated on new drugs and regimens.
- The number of DR-TB treatment sites in Zambia increased from two in 2015 to 30 in 2019.
- The number of reference laboratories with functioning LPA increased from 2 to 3.
- Three MDR-TB sites and the National Tuberculosis Reference Laboratory (NTRL) were renovated.
- Using DataToCare connectivity, a total of 75,081 patient GeneXpert results were electronically transmitted to the Ministry of Health (MoH), clinicians, and patients in real-time from 144 connected facilities between April 2018 and June 2019. Of patients tested, 7,502 (10%) were MTB-positive and 298 (4%) were rifampicin-resistant (RR) TB. All were initiated on appropriate treatment.
- The proportion of MDR-TB patients with successful treatment outcomes on the longer treatment regimen at the national level improved from 55% for the 2016 cohort to 68%.
- In the Challenge TB-supported provinces, the proportion of facilities reporting quality data to the national level increased from 57% in the 2017 baseline Data Quality Audit (DQA) to 67% in 2018.
- The average adherence to TB IPC control measures improved from 29% in 2018 to 83% in 2019.

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FHI 360 ZAMBIA OFFICE









CHALLENGE