

# WORKING WITH LOCAL FAITH-BASED ORGANIZATIONS AND COMMUNITIES ON TUBERCULOSIS



For more than a decade, faith-based organizations (FBOs) and communities have provided guidance and assistance to USAID. The Agency's Bureau for Global Health routinely welcomes and collaborates with FBOs at headquarters and in the field through a variety of platforms, including town hall-style events. In 2016, the Bureau participated in meetings at the Vatican to discuss pressing global health issues, including tuberculosis (TB).

USAID recognizes the invaluable partnership of FBOs, which are estimated to provide 30 to 50 percent of health care services in developing countries. USAID's TB program has successfully partnered with FBOs to mobilize faith-based community health volunteers to provide viable, sustainable, and cost-effective TB diagnosis, treatment, care, and prevention services, particularly in geographically isolated areas.

## ETHIOPIA

USAID Ethiopia has partnered with Kale Heywot Church Development Commission in Ethiopia to prevent and control TB transmission. The project engages 108 private pharmacies to perform symptom screening, collect sputum from people presumed to have TB, and test a new specimen transportation system incorporating SMS messages to relay results. The goal is to better engage private sector providers in TB diagnosis, treatment, and care.

## INDONESIA

In 2012, USAID launched the project Community Empowerment of People Against Tuberculosis (CEPAT) in partnership with the Indonesian National Tuberculosis Program (NTP). The project's first component is designed to increase community knowledge and awareness of TB;

correct health-seeking behavior; provide social support during treatment; and increase access to care, TB case finding, and contact investigation. The second component aims to increase advocacy and knowledge about TB among district stakeholders, resulting in local resource mobilization.

Two of the three Indonesian implementing partners for this work were faith-based organizations: Lembaga Kesehatan Nahdlatul Ulama (LKNU), a division of Nahdlatul Ulama, considered the largest independent Islamic organization in the world with a membership of approximately 40 million, and the Roman Catholic Diocese of Timika, based in Papua province. These organizations used their local presence, community support, and knowledge of local conditions to provide patient-friendly modes of support and increase community-based case finding. CEPAT operated in 25 high TB-prevalence districts in seven provinces across Indonesia, contributing up to 30 percent of the case finding in these districts.

## KENYA

USAID Kenya partnered with the Pastoralist Journalist Network on a project which educated patients to become agents of change in their communities by reversing common misunderstandings of TB and TB patients. The project also worked in villages to reduce the stigma and discrimination directed toward TB patients.

## KYRGYZSTAN

USAID works in Kyrgyzstan with the Spiritual Administration of Muslims in Kyrgyzstan (SAMK) on a variety of patient-centered TB activities. To mark World TB Day 2018, imams in 1,770



A volunteer with the Conference of the Philippines-Episcopal Commission on Health Care's Community-Based Health Program educates church members on TB. *USAID Photo*

mosques delivered TB-related messages to approximately one million people throughout the country. The sermons focused on social stigma and discrimination against people with TB. In addition, SAMK organized a soccer game with imams from four regional departments focused on combating stigma. To reinforce key TB messages, the event also featured experts, including the director of the National Center of Phthiology. More than 150 religious leaders, including 25 women, from five different regions were trained on matters pertaining to TB prevention, diagnosis, treatment, social stigma, and discrimination against patients. It is estimated that these leaders will have a reach of 17,000 persons within their congregations. Nearly 7,200 religious students in more than 100 Madrassas and Koranic institutes were also trained.

## **MALAWI**

Over one-third of the health facilities in Malawi are owned by the Christian Health Association of Malawi (CHAM), an umbrella organization of major Christian faith-based health service organizations. Malawians access TB diagnosis and treatment services free of charge at CHAM-owned facilities, just as they do at Ministry of Health facilities. USAID is the primary partner of the Malawi National TB Program for TB diagnosis, treatment, prevention, and care. The Agency works closely with CHAM to improve diagnosis and increase treatment success rates by providing Xpert platforms, enhance monitoring and surveillance by creating and facilitating data collection tools, and expand access to TB services by building the capacity of TB staff at health facilities.

## **PHILIPPINES**

In 2011, health care workers in the province of Zamboanga Sibugay, located in southern Philippines, were grappling with the challenges of reaching and successfully treating individuals with TB. Geographic isolation, poor road infrastructure, limited transportation options, and high transportation costs made it difficult for residents to access health and TB services. To address these challenges, the Integrated Provincial Health Office (IPHO) began working with the Catholic Bishops Conference of the Philippines-Episcopal Commission on Health Care's (CBCP-ECHC) Community-Based Health Program (CBHP) to bring TB services closer to the people who needed it most. The program, which had an initial cadre of more than 1,000 parish volunteers committed to support IPHO's campaign to find and screen people for TB and to help improve TB-treatment adherence. The campaign quickly expanded across all 16 municipalities in the province.

With support from USAID, IPHO has trained more than 600 community volunteers to conduct TB education and

counseling sessions. Volunteers were also trained to identify individuals with TB symptoms, refer them to the nearest TB-DOTS center, and regularly maintain records and submit reports. This partnership resulted in improved TB detection rates throughout the province. In 2014, the CBHP volunteers helped identify 91 TB cases, contributing to 16 percent of the province's overall case detection. A 95 percent treatment success rate was observed after just one year of CBHP implementation as the the volunteers became treatment partners, ensuring TB treatment compliance and completion. In 2017, IPHO worked with a series of Catholic health care conferences to gather parish program coordinators as well as directors of social action and health commissions and community-based health programs to share and learn from experiences in implementing various health programs in the dioceses. The learnings from the exchanges are expected to inform future programs.

## **TANZANIA**

USAID Tanzania partners with the Christian Social Services Commission (CSSC), an ecumenical body jointly established by the Christian Council of Tanzania and the Tanzania Episcopal Conference, to prevent and control TB transmission. CSSC coordinates and facilitates the delivery of social services through a network of 900 private church-owned health facilities, including 103 large hospitals at district and regional levels. About 60 percent of these facilities are located in remote rural areas, where quality health care remains a challenge. Recently launched, the goal of the recently launched TUWAFIKIE program is to reach rural and under-served populations in the Kagera and Iringa regions. Screening and counseling of potential TB patients will be provided. Sputum samples will also be collected for transportation to laboratories with Xpert machines. Patients will be notified via SMS of their test results and quickly referred to a local treatment facility.

## **ZAMBIA**

USAID works with the Churches Health Association of Zambia (CHAZ) to increase the number of notified TB cases and increase TB treatment success rates through promotion of TB education and capacity building in Zambia. CHAZ is the largest non-government health provider in Zambia. The overall objective of the TB control program is to reduce mortality, morbidity, and social economic burden associated with TB in the Zambian population.