KYRGYZ REPUBLIC TUBERCULOSIS ROADMAP OVERVIEW, FISCAL YEAR 2022

This is an overview of the USAID/Kyrgyz Republic FY 2022 Tuberculosis (TB) Roadmap, implemented with FY 2021 budget. It was developed in consultation with the National TB Program (NTP) and with the participation of national and international partners involved in TB prevention and care in the country.

The Kyrgyz Republic is among the high multidrug-resistant TB (MDR-TB) burden countries.[1] The country has an estimated TB burden of 6,900,[2] of which 4,241 (61.5 percent) individuals were detected with TB.[3] Additionally, the MDR-TB and extensively drug-resistant TB (XDR-TB) burden was 1,120 registered cases in 2020 alone.[4]

In 2021, the NTP initiated development of the TB VI strategy for 2022-2026 to replace the TB V strategy. This new National Strategic Plan (NSP) is in line with the United Nations General Assembly (UNGA) High-Level Meeting on TB targets. The new NSP prioritizes:

- Improving active case finding (ACF) and enhancing contact investigation policies and practices, increasing the percentage of bacteriologically-confirmed pulmonary TB cases, and expanding drug-susceptibility testing (DST) coverage;

- Introducing and expanding the use of novel drugs and treatment regimens, including the all-oral shorter regimens and individualized regimens for DR-TB;

- Providing TB preventive treatment (TPT) to people living with HIV/AIDS (PLHIV) and children under 14 who are contacts of people with TB, and further expanding TPT, diagnostic, and treatment options to adult contacts and high-risk groups; and

- Increasing the domestic resources for TB.

The COVID-19 pandemic has had far-reaching effects on the global TB response, threatening to erase years of progress. As a result of COVID-19 and associated measures to control it, one million fewer people in the 23 countries where USAID focuses TB programming had access to TB diagnosis and treatment in 2020, compared to 2019—representing a more than 20 percent decline. In 2020, there was a 31 percent decline in TB case notifications and a 22 percent decline in DR-TB case notifications, compared to 2019. As outlined in this Roadmap, USAID continues to

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[1] World Health Organization. *Global Tuberculosis Report, 2021.*
[2] Ibid.
[3] Ibid.
[4] Ibid.

work with in-country partners and stakeholders to monitor and mitigate the impact of subsequent waves of COVID-19 resurgences on TB programming in real time, and to build more resilient TB programming.

The proposed FY21 USAID TB budget for the Kyrgyz Republic is $6 million. With this level of funding, USAID will support the following technical areas:

REACH

TB diagnosis

The continuing primary objective for improving TB diagnosis in 2022 will be ensuring compliance with the revised diagnostic algorithm and expanding DST coverage. USAID supported an analysis to identify key barriers in increasing GeneXpert coverage. USAID also supported development of and quality improvements to DST and genome sequencing for the newer TB drugs, which will also inform the revision of the diagnostic algorithm. Based on the results, the NTP will finalize a strategic approach for increasing diagnostic and laboratory coverage in the southern part of the country in 2022, including the development of an effective specimen transportation system. Building on the successful pilot results of Laboratory Data Management Information Systems (LDMIS) software, USAID will support its rollout countrywide. USAID will support clinician capacity building to ensure compliance with the revised diagnostic algorithm and use of Xpert MTB/Rif as the main diagnostic tool, while streamlining relevant Standard Operating Procedures (SOPs) at the primary healthcare (PHC) level.

Engaging all care providers

Facility-based case finding, while generally on track with UNGA targets, will require additional improvements, particularly at the PHC level. Moving forward, USAID activities will further support the adoption and expansion of electronic clinical and laboratory tools as part of the government's promoted e-health initiative. In 2022, USAID will build on the results of a 2021 pilot to expand bidirectional TB/COVID-19 testing.

Community TB care delivery

Community-based case finding is largely funded through project-related activities; however, it is an important contributor to the NTP's National TB V Strategy. USAID has recently supported a variety of initiatives focusing on community screenings, patient referrals, and case management expansion. Moving forward, USAID will support the engagement of religious leaders in raising awareness and addressing misconceptions about TB, the further development of social and

behavior change (SBC) initiatives, and the promotion of continued outreach interventions targeting vulnerable groups, such as close contacts, PLHIV, substance abusers, homeless individuals, and released prisoners. ACF models will be further introduced and expanded in pilot areas by utilizing successful community engagement models.

CURE

Drug-susceptible TB (DS-TB) treatment

Despite the introduction of people-centered models of care for those with TB, including video treatment support and home-based care delivery through nongovernmental organizations (NGOs), treatment support remains a key challenge for people with DS-TB. The COVID-19 pandemic presented tremendous additional obstacles for ensuring people with TB had adequate care and support. USAID will continue to support the expansion of case management services for people with TB through step-by-step implementation of case management standards at the PHC level. USAID-funded activities will prioritize support for utilizing and rapidly expanding innovative models for case management and care of those with DS-TB, including virtual support, home-based care, telephone counseling, and access to nutritional support and medical services.

Multidrug-resistant TB (MDR-TB) treatment

Combatting MDR-TB has been the top priority of the NTP and its partners. With USAID's support, the NTP is using cohort analysis tools at oblast and central levels to routinely monitor the treatment progress and safety of people with DR-TB, and make proactive case management adjustments to ensure better treatment outcomes. USAID-funded programs have provided key technical assistance to the NTP in recent years in the adoption of new drugs and treatment regimens for DR-TB, active drug safety monitoring (aDSM), case management, and the utilization of other people-centered models of care. In FY 2022, USAID will support interventions to increase coverage of DST nationwide, through ongoing training and follow-up supervision, specifically at the PHC level. USAID will also expand the utilization of LDMIS tools to analyze data and develop targeted interventions. USAID will train healthcare providers to follow the diagnostic algorithms and perform clinical monitoring, including aDSM, through enhanced monitoring and supervision. Clinical management of DR-TB will be supported at all levels, including DR-TB consiliums, along with interventions to promote treatment adherence and improved aDSM practices. A rapid transition to all-oral and shorter treatment regimens will be further supported, specifically through ongoing engagement with key MDR-TB consiliums.

PREVENT

Prevention

While the UNGA TB prevention targets have been adopted in the current NSP, pending Ministry of Health (MOH) endorsement, national policies have yet to develop a stepwise approach to achieving these targets. Past USAID-funded activities on preventing the transmission of TB focused on improved contact investigation, the introduction of interferon-gamma release assay (IGRA) in research settings, and the enhancement of infection prevention and control practices in TB and PHC facilities. The new TB prevention approach initiated in 2021 outlines key goals and approaches in tackling TB transmission utilizing current World Health Organization (WHO) recommendations on TB infection (TBI) diagnostics and treatment, contact investigation, and infection prevention and control. Current guidelines, policies, and SOPs for preventive treatment and contact investigation will be updated in 2022 to align with the most-up-to-date WHO recommendations. In FY 2022, USAID will work with the NTP on the gradual adoption of new tools to expand preventive treatment coverage, while ensuring solid oversight and mitigating potential risks.

SUSTAINABLE SYSTEMS

Commitment and sustainability

The government of the Kyrgyz Republic continues to demonstrate strong political commitment in the fight against TB through the adoption of UNGA targets and a consistent increase in the domestic funding for TB. The ongoing Action Plan 2017-2026 on TB service optimization, initiated by the MOH and NTP in 2017 with USAID support, resulted in significant operational savings for the NTP, amounting to one million dollars annually. These savings are being reinvested in drug procurement and increased salary support for PHC providers, among other priorities. Moving forward, USAID will promote the continued implementation of the Action Plan 2017-2026 as one of the key drivers for ensuring optimized TB care in hospital settings. Similarly, support for nationwide expansion of increased salary support for PHC providers, initially initiated in Chui and Talas oblast, will also be considered a priority. USAID will ensure that local community organizations continue to play a vital and lasting role in the outreach and provision of TB care for all.

Capacity and functioning systems

Under the capacity and functioning systems component, adoption of health management information systems (HMIS) is a top priority for the NTP and MOH through the e-health government initiative. With USAID support, electronic in-patient cards and LDMIS have been successfully introduced and operationalized into TB services in recent years. Moving forward,

USAID will support the ongoing reengineering/development and piloting of the TB clinical, pharmacy, and specimen transportation modules; outpatient electronic cards; aDSM and knowledge management modules; and monitoring and evaluation and statistic dashboards, while ensuring operational internal and external linkages between all modules and products. Implementing this comprehensive package of activities will require robust technical support, including database maintenance and administration, and implementation of relevant information technology (IT) security standards.