



TUBERCULOSIS PROFILE



Uganda ranks 16th on the list of 22 high-burden tuberculosis (TB) countries in the world. In 2007, the country had almost 102,000 new TB cases, with an estimated incidence rate of 330 cases per 100,000 population. The DOTS (the internationally recommended strategy for TB control) case detection and treatment success rates (51 and 70 percent, respectively) for new sputum smear-positive (SS+) cases are still below the World Health Organization's (WHO's) global targets of 70 and 85 percent, respectively. These low rates are mainly due to insufficient case reporting, non-adherence to TB treatment, poor access to health care services, and a limited number of skilled staff and diagnostic facilities. In addition to these challenges, Uganda has the highest default rate of any high-burden country. According to UNAIDS, the prevalence of HIV/AIDS, at 5.4 percent, further exacerbates the problem of TB control. However, while the TB incidence rate is still quite high, it fell by 5.7 percent between 2006 and 2007, and TB mortality has declined over the past four years. Collaborative TB-HIV/AIDS activities are expanding slowly; in 2006, only one-quarter of TB patients were tested for HIV. According to WHO, around 38.7 percent of new TB patients are HIV positive.

Country Population	30,884,000
Est. number of new TB cases	101,785
Est. TB incidence (all cases per 100,000 pop)	330
DOTS population coverage (%)	100
Rate of new SS+ cases (per 100,000 pop)	136
DOTS case detection rate (new SS+) (%)	51
DOTS treatment success rate, 2006 (new SS+) (%)	70
Est. new adult TB cases (HIV) + (%)	38.7
MDR-TB among all new TB cases (%)	0.5
All data are for 2007 except where otherwise noted. WHO Global TB Report 2009	

Uganda's combined National Tuberculosis and Leprosy Program (NTLP), initiated in 1990, achieved 100 percent DOTS population coverage by 2002. In 2001, the Ministry of Health (MOH) formally adopted the community-based TB care (CBTBC) strategy to address TB services. The approach includes a six-step process that districts implement within their TB programs. Service delivery depends on a strategic approach that relies on trained community volunteers implementing CBTBC. The success of this intervention hinges on partnerships among the communities (including traditional health practitioners) and formal health services. Currently, most of Uganda's 89 districts have introduced CBTBC.

USAID Approach and Key Activities

USAID/Uganda began its support to the NTLP in 2001 to develop and implement the TB control strategy, including integrating TB-HIV, expanding community-based DOTS (C-DOTS) to all districts, and strengthening district-level TB planning, surveillance, timely reporting, and supervision. The overall aim was to increase capacity at the national and district levels to manage TB control programs effectively, and to contribute to the national goal of increasing case detection and treatment success rates, leading to reduced mortality in TB-HIV/AIDS co-infected patients by 50 percent. USAID funds for TB programs in Uganda reached \$2.2 million in fiscal year (FY) 2008. USAID-supported TB control activities were implemented through the Uganda Program for Holistic Development, Northern Uganda Malaria, HIV/AIDS and TB program, the Tuberculosis Control and Assistance Program (TB CAP), and Health Initiatives in the Private Sector in 56 of the 89 districts in Uganda. District-level activities include the following:

- Increasing the capacity of districts to manage TB and TB-HIV collaborative activities
- Improving the availability of TB diagnostics up to the district level
- Scaling up DOTS in non-MOH sector
- Implementing advocacy, communication, and social mobilization activities; and increasing community involvement and awareness of TB
- At the national level, FY 2008 resources supported the national coordination of partners through the Uganda Stop TB Partnership

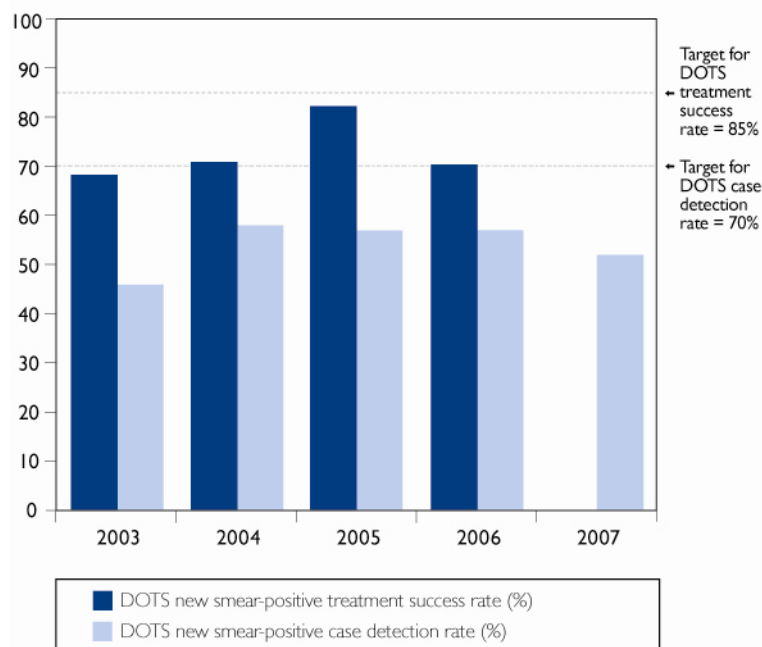
- Adapting DOTS to prevent and manage multidrug-resistant TB
- Expanding public-private partnerships, including TB and TB-HIV/AIDS activities in the workplace

USAID Program Achievements

USAID provided capacity building to the National AIDS Control Program, the NTLP, and 56 districts to absorb funding from the Global Fund to Fight AIDS, Tuberculosis and Malaria and to execute the key elements of the Stop TB Strategy over the long term through strengthening health systems by providing training on management skills, TB, and TB-HIV/AIDS. USAID program achievements include the following:

- Achieved case detection and treatment success rates above the national average in U.S. Government (USG)- supported districts, reaching 53 and 86 percent, respectively
- Increased HIV/AIDS care and treatment for TB patients from 20 to 69 percent, increased the number of TB-HIV/AIDS patients on antibiotics to prevent opportunistic infections from 40 to 88 percent, and increased the number of TB-HIV/AIDS patients on antiretrovirals from 5 to 29 percent in USAID-supported areas; developed and distributed TB-HIV/AIDS supervision tools for district and facility managers
- Supported public-private mix DOTS through training programs that expose and sensitize nongovernmental health care providers to extend quality TB care beyond the national TB control program
- Developed a refresher training course on C-DOTS and oriented a team of nine national trainers; and collaborated with the Uganda Peoples Defense Forces to develop a modified C-DOTS for the military
- Renovated and equipped 30 health centers and their laboratories in FY 2007; and provided external quality control to improve sputum smear microscopy in more than 100 laboratories from January to March 2008
- Trained nearly 200 health workers and volunteers to implement C-DOTS and link TB-HIV/AIDS co-infected patients to TB and HIV care and treatment services
- Streamlined the TB drug supply chain system and implemented a computerized data entry system for tracking TB drug and supply procurement
- Developed and tested management information system tools for TB laboratories, updated the TB infection control (IC) policy, and assisted the NTLP in IC strategy development
- Provided training in management and leadership to the MOH's National AIDS Control Program and the NTLP using the Management and Organizational Sustainability Tool

Case Detection and Treatment Success Rates Under DOTS



Note: DOTS treatment success rate for 2007 will be reported in the WHO Report 2010.
 Source: Global Tuberculosis Control WHO Report 2009

Partnerships

Partnerships are an important element in combating TB in Uganda. Under the leadership of the NTLP, the USG, Canada, the German Leprosy and TB Relief Association, the International Union Against Tuberculosis and Lung Disease, WHO, Malaria Consortium, the Global Fund, and others collaborate to increase TB interventions. The Global Fund has approved two grants to Uganda: a Round 2 grant in 2004 for \$4.7 million and a Round 6 grant in 2007 for \$8.1 million.

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