Public-private Mix for TB-HIV Control

Since 2007-08, the US Agency for International Development’s (USAID) Public-Private Mix for TB-HIV Control project has been supporting the Vietnam National Tuberculosis Program (NTP) to implement their case finding strategy through engagement of private and non-NTP public providers. The project, implemented by PATH, aims to strengthen the capacity of private and non-NTP public providers to identify people with presumptive TB and refer them to NTP facilities for diagnosis and treatment as soon as possible. The project partners with the provincial health departments and the provincial TB programs in Hai Phong, Nghe An, Ho Chi Minh City, and Can Tho.

ENGAGING PRIVATE AND NON-NTP PUBLIC PROVIDERS

Private pharmacies and clinics are often the first point of contact for people with TB, and patients routinely seek care at public general hospitals instead of TB-specific clinics. Trainings on TB and HIV, and the referral model, strengthen capacity of providers to identify and refer people with TB-like symptoms. So far, the project has trained and re-trained 2,160 pharmacy workers and providers at private clinics and non-NTP public hospitals to deliver high-quality TB-related information and referrals. TB services include HIV counseling and testing (HCT) for TB confirmed cases. Supervisors play a critical role in providing monthly supportive supervision and feedback to participating PPM facilities. This facilitates linkages between public and private sectors and upgrades PPM provider skills in case identification and referral.

PPM CONTRIBUTIONS TO CASE NOTIFICATION

Since launching in 2008, PPM efforts have led to the referral of 16,968 people with presumptive TB to TB facilities, with 11,043 coming for diagnosis. Of these, 2,243 (20%) were confirmed with TB. Forty-seven percent were found to have smear positive pulmonary TB that can be especially contagious in the community. Of those with TB, 1,833 (81.7%) were tested for HIV, with 65 people testing positive. From October 2011 to early September 2012, 9,829 people with presumptive TB were referred to NTP facilities for TB diagnostic services. Among them, 7,000 received services, 1,241 TB cases (17.7%) were confirmed, and over half had smear positive pulmonary TB. Of those with TB, 1,065 (86%) were provided with HCT, resulting in 13 HIV positive cases.

SUPPORTING ACTIVITIES

In collaboration with the NTP, the project conducted an assessment of access barriers to TB diagnostic services in order to inform NTP programming and policy in Vietnam. To sustain PPM activities in the future, transition plans for all four provinces are being developed with provincial partners. Finally, a PPM toolkit, based on the Hai Phong model, has assisted in scaling up PPM activities in provinces supported by USAID and Global Fund to Fight AIDS, Tuberculosis and Malaria, and lessons learned from USAID-supported PPM sites have contributed to development of a new Circular and national PPM guidelines.