

CONVERGENCE AND DIVERGENCE TE TREATMENT SUPPORT SERVICES BETWEEN TE HEALTH FACILITIES AND PEOPLE WITH TE IN TWO EAST AFRICAN COUNTRIES

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INTRODUCTION

- The End TB Strategy aims to reduce new tuberculosis (TB) cases by 90% and TB-related deaths by 95% between 2015 2035
- TB remains a major cause of morbidity and mortality in sub-Saharan
 Africa including Ethiopia and Uganda
 - Uganda saw increase in the TB case notification rate while Ethiopia saw a drop in the case notification
 - Treatment adherence remains a challenge among patients in both countries
 - Delivery of social services and safety net have been link to improving treatment outcomes

OBJECTIVE

- Comparison of the availability of TB treatment support services reported by health facilities to the TB treatment support services individuals enrolled in TB treatment reported receiving
- Further examined whether the TB support services received by those enrolled on TB treatment aligned with the types of TB support services they most desired

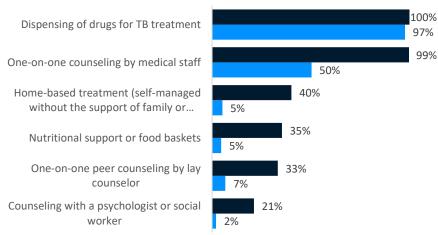
METHODS AND DATA

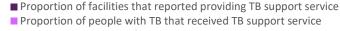
- Quality of Tuberculosis Services Assessment (QTSA) conducted in Uganda and Ethiopia in 2019
- QTSA is a multi-country study aim at measuring the quality of TB care
- The QTSA uses a logical pathway of quality of care that follows a structure-processoutcome framework
- Data collected through facility audit, provider interview, patient exit interview, and register review
- Conducted in randomly selected facilities providing TB services across health care system in each country
- Sample design representative at the national level
- The analysis was restricted to the health facility and patients' exist interview dataset
 Ethiopia and Uganda

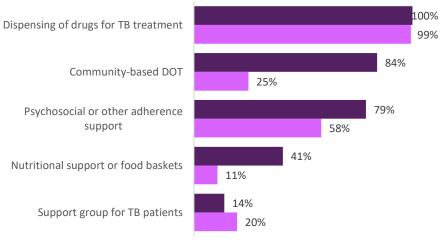
Comparison of TB treatment support services offered by health facilities and TB treatment support services received by individuals enrolled on TB treatment **Ethiopia** Uganda



■ Proportion of people with TB that received TB support service

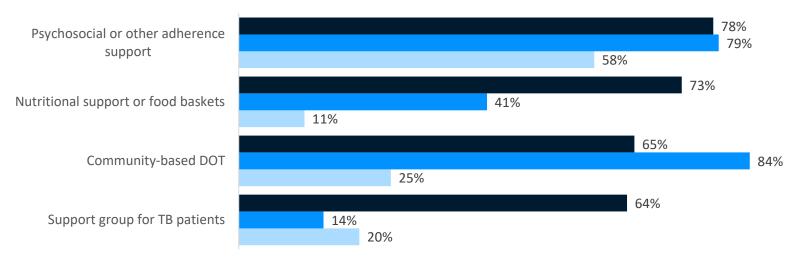






Comparison of TB treatment support services <u>offered</u> by health facilities and TB treatment support services <u>desired</u> and <u>received</u> by individuals enrolled on TB treatment in Uganda

■ Proportion of patients that reported desiring TB support service
■ Proportion of facilities that reported providing TB support service
■ Proportion of patients that received TB support service

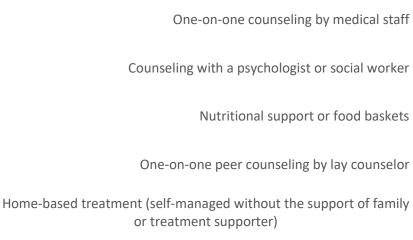


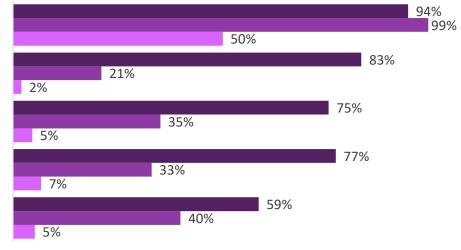
Comparison of TB treatment support services offered by health facilities and TB treatment support services desired and received by individuals enrolled on TB treatment in Ethiopia

■ Proportion of patients that reported desiring TB support service

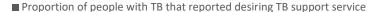
Proportion of patients that received TB support service

■ Proportion of facilities that reported providing TB support service

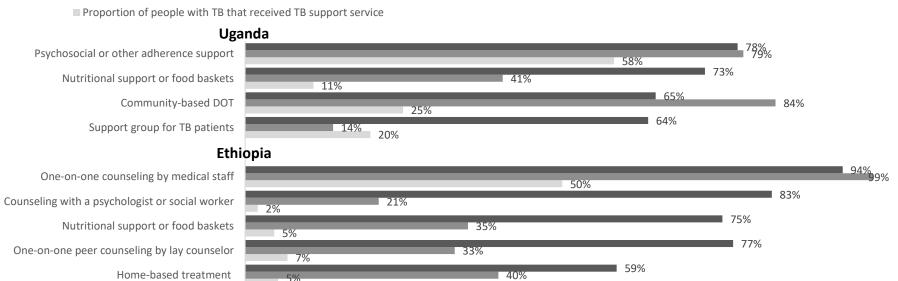




Comparison of TB treatment support services offered by health facilities and TB treatment support services desired and received by individuals with TB in Uganda and Ethiopia



■ Proportion of facilities that reported providing TB support service



CONCLUSIONS/IMPLICATIONS

- There are gaps between services desired and received by people with TB, highlighting the need to understand existing gaps and prioritize TB services that are most responsive to the needs of those with TB
- People with TB expected safety and social services to help them in order to adhere to their treatment plan
- Gaps clearly exist between the services being offered and services being received as well as between the services that are received and the services that are most desired by individuals with TB
- Findings can help NTP to refocus on how TB services are organized and delivered, particularly in resource-limited settings, in order to ensure treatment adherence, improve treatment outcomes, and minimize the catastrophic costs of TB

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- ³ Ethiopian National Tuberculosis and Leprosy Program